Esteemed colleagues,

In our fourth issue of 2021, the Turkish Journal of Ophthalmology features 6 original studies, a review, 3 letters to the editor with 1 author response, and 2 case reports.

Burcu et al.’s clinical study titled “Donor cornea use in scleral surface reconstruction” emphasizes an important commonality between the sclera and cornea despite their different optic, vascular, and neural architectures. With their type I collagen-rich protein composition, both of these tissues can effectively complete each other anatomically, and this function was exemplified by the successful use of full-thickness and lamellar corneal tissue grafts to repair defects that compromised or threatened scleral integrity in 16 eyes of 16 patients.

Hashemi et al. from Tehran, the capital of Iran, compared 213 Down syndrome patients with 184 control subjects and showed that refractive errors, visual impairment, and amblyopia are more common in Down syndrome. The researchers also performed a vector analysis of astigmatism and determined the frequency of oblique astigmatism in Down syndrome.

Yalçındağ et al. analyzed data obtained in the Behçet Uveitis Screening Trial (BUST) and found that of 4,978 eyes of 3,363 patients in 33 centers, patients with Behçet disease had lower education level and socioeconomic status compared to those with other non-infectious uveitis. However, whether this difference in education and socioeconomic status is a cause or result of Behçet disease is a new subject that requires discussion.

External dacryocystorhinostomy is the gold standard for the treatment of nasolacrimal canal obstruction, and bicanalicular silicone tubes (BST) are frequently utilized in this procedure since their description by Gibbs in 1967. In their study, Özcan et al. investigated the relationship between BST removal time and microbiological analysis results and determined that later BST removal was associated with a higher number of bacterial strains isolated in culture and that Haemophilus influenzae was isolated more frequently in patients with recurrence, adding a new dimension to a classical treatment.

Er et al. evaluated 65 eyes of 65 patients who underwent pars plana vitrectomy and silicone endotamponade due to ruptured retinal detachment and reported that macular structural changes may differ according to the duration of silicone in the eye. This finding also represents a new dimension for a classical treatment method.

Özdek et al. evaluated the safety and effectiveness of simultaneous bilateral vitrectomy surgery for active, bilateral stage 4-5 retinopathy of prematurity (ROP) based on the experience of a single surgeon and suggested that simultaneous bilateral vitrectomy surgery can be considered as an option, but the risk of endophthalmitis should be weighed against the risks of disease progression and anesthesia-related complications.

Değirmenci et al. examined the use of immunomodulatory drugs, which are considered a risk factor during the COVID-19 pandemic, in terms of uveitis treatment and reported that uveitis treatment should be continued while maintaining strict follow-up criteria. Given the drastic change in conditions, they emphasized the need for new guidelines in the management of patients receiving immunomodulatory agents for the treatment of uveitis and made drug- and disease-specific recommendations that will serve as a reference.

Biçer et al. state in a case report titled “Systematized epidermal nevus syndrome involving the upper and lower eyelids bilaterally” that in such rare cases, patients should be examined for extraocular anomalies and their skin lesions should be monitored for possible malignant transformation.

Yabanoglu et al. highlight familial predisposition in spheroidal corneal degeneration, an extremely rare disease with hereditary transmission, in their case report of two siblings.

Erdinest et al. briefly share the preliminary results of their own survey study which is similar to the survey study published in our journal in the article “Effects of the COVID-19 pandemic on Turkish ophthalmologists.” They draw attention to the importance of a continually updated information approach as taken in Turkey and the UK while we navigate this uncharted territory in which correct practices have not been established.

In response to the same article, Gurnani and Kaur summarize the innovative ophthalmology practices they exemplified in India in their letter to the editor titled “Innovations in clinical ophthalmology during the COVID-19 pandemic.” As many of these innovations are simple and modified clinical applications that our ophthalmologist colleagues in nearly every country can incorporate into their practice, this article will be an important reference as long as the pandemic continues.
EDITORIAL

In another letter to the editor, Gönül and Eker respond to an article by Kayıkçıoğlu et al. titled “Unintentional staining of the anterior vitreous with trypan blue during cataract surgery.” They noted that as none of the patients had 20/20 vision postoperatively, they suspect that the inadvertent passage of trypan blue into the vitreous cavity may have caused retinal toxicity. Kayıkçıoğlu et al. considered this suspicion justified, as the patients were not evaluated using electrophysiological tests.

As the pandemic continues, our clinical practices are being reshaped, and this new environment also has an impact on the article titles in our journal. In this issue, 3 of the 13 articles were related to the pandemic. I hope that in subsequent issues, articles focusing primarily on pandemic damage, anxiety, and protection will be replaced by those reporting solutions and successful therapies.

Respectfully on behalf of the Editorial Board,
Sait Eğrilmez, MD