

EDITORIAL

2016 Issue 1 at a glance:

The valuable research being conducted by Turkish ophthalmologists is represented in this issue by a selection of six original research articles, one review and three case reports which we believe will contribute to the field both nationally and internationally.

In their retrospective analysis of 24 cases of ocular rosacea, Müftüoğlu and Akova observed meibomitis in all eyes, blepharitis in 83%, punctate keratopathy in 67%, chalazion and corneal neovascularization in 50% and peripheral corneal infiltrates in 16.6% of eyes. The condition was controlled in most patients with topical steroids, cyclosporin and systemic doxycycline. Descemetocoele and corneal perforation occurred in two patients and were treated with tissue adhesive, amniotic membrane transplantation and bandage contact lenses. In four eyes with severe corneal vascularization, significant improvement was achieved with topical anti-VEGF therapy.

Mangan et al. present their retrospective study entitled "Comparison of Different Types of Complications in the Phacoemulsification Surgery Learning Curve According to Number of Operations Performed", in which they found that corneal burns, Descemet's membrane detachment and corneal edema lasting over 10 days were the most frequent complications for residents after their 120th surgery performed, while complications posterior to the iris such as posterior capsule rupture, zonular dialysis and dropped nucleus and nuclear fragments occurred at a higher rate in the residents' 60-120th surgeries. Fewer complications arose in residents' first 60 surgeries due to the higher rate of supervisor interventions. The authors concluded that clinics should analyze their surgical complication rates and modify their phacoemulsification training programs according to the needs of residents.

Kaya et al. evaluated the efficacy and safety of a 23-gauge (G) system for active silicone oil removal using the transconjunctival sutureless technique in 116 eyes of 113 patients and reported improved visual acuity in 59.48% and anatomic success in 97.41% of eyes. Only 6.89% of the eyes required suturation of at least one sclerotomy site; recurrent retinal detachment was observed in 3 eyes. None of the patients developed choroidal detachment, endophthalmitis, corneal decompensation or macular edema, leading the authors to conclude that active silicone oil removal with the 23-G transconjunctival sutureless technique is extremely effective and safe.

Sayman Müslübaşı et al. compared the results of treatment with photodynamic therapy (PDT) alone (9 eyes) and combined PDT and intravitreal bevacizumab (IVB) injection (25 eyes) in patients with polypoidal choroidal vasculopathy (PCV). They reported that both groups exhibited comparable decreases in central macular thickness and regression of the polypoidal lesions in approximately 65% of the eyes.

Yumuşak et al. demonstrated that unilateral inferior oblique myectomy performed in 27 eyes with superior oblique palsy resulted in almost

complete resolution of inferior oblique overaction and abnormal head position postoperatively. In addition, there was no possibility of scleral perforation due to the lack of scleral sutures. Therefore, the authors concluded that inferior oblique myectomy can be a first choice of surgical method in patients with inferior oblique overaction associated with superior oblique palsy.

In a retrospective study by Balıkoğlu Yılmaz et al. evaluating the demographic characteristics, treatments and outcomes of seven patients with canaliculitis, the inferior canaliculus was involved more often (71.4%) and all patients exhibited epiphora, chronic conjunctivitis, a palpable and thickened canaliculus, and yellow discharge from the punctum. *Actinomyces* species were most commonly isolated (75%) and dacryoliths were present in six of the cases. Following canaliculotomy and removal of the dacryoliths by canalicular curettage, the patients were treated for 10 days with 100,000 U/ml topical penicillin and oral ampicillin/sulbactam; all patients' signs and symptoms resolved completely within one month.

The choroid has an important role in the pathophysiology of common chorioretinal diseases such as central serous retinopathy, age-related macular degeneration and degenerative myopia. Quantitative assessment of the choroid with traditional methods like indocyanine green angiography and ultrasonography is extremely difficult due to their limited resolution and reproducibility. In their review "The Choroid and Optical Coherence Tomography", Sezer et al. present a thorough discussion of the utilization of optical coherence tomography in the diagnosis and management of chorioretinal diseases.

Uzunel et al. present the application of transpupillary argon laser cyclophotocoagulation (TALC) in a case of elevated intraocular pressure (IOP) refractory to maximal medical treatment in a patient with traumatic aniridia and aphakia who had previously undergone trabeculectomy. The patient's IOP was controlled with medical treatment after the application of two sessions of TALC. The authors stated that TALC may be a safe and effective alternative method for reducing IOP in eyes that have visible ciliary processes and do not respond to conventional treatments.

Kinyas and Esgin share their management of intermediate uveitis and retinal periphlebitis in a 40-year-old female patient who was diagnosed with multiple sclerosis 12 years earlier and had been treated with interferon beta-1a for the previous 7 years.

Özdek et al. report the case of a 17-year-old female patient with elevated IOP secondary to the migration of an encircling silicone band implanted during retinal detachment surgery through the rectus muscles and along the sclera into the cornea. The patient's IOP returned to normal following surgical removal of the silicone encircling band.

Sincerely on behalf of the Editorial Board,
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