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EDITORIAL

2016 Issue 3 'At a Glance':

Esteemed colleagues,

In the first original research article of the issue, Elgin et al. report that after cataract surgery, eyes with pseudoexfoliation syndrome have deeper anterior chambers than eyes without pseudoexfoliation syndrome that have open-angle glaucoma. As anterior chamber depth is related to effective lens position, their results indicate that the presence of pseudoexfoliation must be considered a parameter which may affect intraocular lens power calculations.

In the second original research article of the issue, Tetikoğlu et al. investigated surgically induced astigmatism resulting from microincisional cataract surgery, or cataract surgery with incisions smaller than 2 mm. They found that cataract extraction by phacoemulsification with suitable tips through a 1.6 mm incision caused a mean surgically induced astigmatism of 0.83 diopters, while this astigmatism increased to over 1.0 diopters when incisions were extended to 2.4 or 2.8 mm for intraocular lens implantation. They emphasized the need for intraocular lens implantation technologies that do not require incisions larger than 2.0 mm.

Obstructive sleep apnea syndrome is frequently accompanied by ocular surface and tear film layer disruption associated with continuous positive airway pressure (CPAP) therapy and the common comorbidity, floppy eyelid syndrome (FES). However, Karaca et al. have contributed new information to the ophthalmology literature with their report that patients with obstructive sleep apnea syndrome, even those who have mild forms, do not have FES and are not undergoing CPAP, exhibit poorer results on tests of tear film quality and secretion compared to a control group.

Kardeş et al. report the clinical characteristics and the effects of these characteristics on prognosis in herpetic anterior uveitis, a condition often diagnosed based on clinical findings. Their study sheds light on the general practice of ophthalmology.

Şekeroğlu et al. investigated retinopathy of prematurity in 54 triplets and found that low birth weight and gestational age

were determining factors of retinopathy, while the number of gestations in multiples pregnancies was not an independent prognostic variable.

Tunay et al. report that 91.4% of the geriatric patients they rehabilitated with low vision aids were still using their aids after 1 year, which is a striking example of treatment compliance success for the literature. They attributed their high level of treatment compliance to proper patient training in the use of their low vision aid and frequent follow-up. Due to high cost and expectations, the compliance rate is generally in the 50-60% range. Therefore, this demonstration of how to achieve higher patient compliance is a valuable contribution to our national literature.

In this issue's review, Tarlan and Kiratlı describe, with original case images, current approaches in the diagnosis and treatment of uveal malignant melanoma, which with recent developments has moved away from enucleation in favor of eye-sparing treatment options like transpupillary thermotherapy and radiotherapy.

With Muslubaş et al.'s well-documented series of 3 cases of macular burn, which may occur as a result of exposure to lasers used in entertainment venues and presentations, they raise awareness of the public health threat posed by 5 mW or higher powered lasers.

Akıncioğlu et al. report on the utility of multifocal ERG in Bietti crystalline dystrophy as an objective test for the diagnosis and follow-up of subjective visual function loss.

Multiple myeloma is a malignancy that is usually limited to bone marrow involvement, but extramedullary involvement may occur at a rate of 3%. From this relatively rare condition, Vatansever et al. present cases they have encountered with orbital metastasis.

Respectfully on behalf of the Editorial Board,

Sait Eğrilmez, MD