

EDITORIAL

2016 Issue 4 at a Glance:

For this issue, we have selected six original articles and six case reports from Turkish ophthalmologists to share with our national and international readers.

Dadacı et al. evaluated intraoperative and postoperative pain in phacoemulsification surgery conducted under topical anesthesia in senile cataract patients, and investigated factors that may be associated with pain. They found that a large majority of patients reported feeling mild to moderate pain, but pain perception did not affect surgical success. The authors concluded that giving selected patients an analgesic prior to surgery or administering additional anesthesia to patients with severe pain could improve patient comfort (see pages 151-155).

In their evaluation of patients who underwent intraocular lens (IOL) exchange or repositioning in a tertiary referral hospital, Kavuncu et al. determined that the most common indication for IOL exchange was IOL subluxation, the predominant accompanying ocular pathology was pseudoexfoliation syndrome, and factors such as previous vitreoretinal surgery and ocular trauma may increase the risk of IOL exchange surgery (see pages 156-160).

Cases with both cataract and vitreoretinal pathology can be successfully managed with phacoemulsification combined with pars plana vitrectomy (phacovitrectomy). Despite its advantages, combined phacovitrectomy also has disadvantages, one of which being postoperative refractive deviations. Güllük et al. analyzed changes in anterior chamber depth (ACD) after phacovitrectomy and their effect on postoperative refractive changes. The authors report that changes in ACD alone cannot explain the refractive deviations that appear postoperatively, and state that changes in macular thickness and axial length measurements must also be taken into account (see pages 161-164).

Polypoidal choroidal vasculopathy (PCV) commonly manifests with serous and hemorrhagic retinal pigment epithelium (RPE) detachment and is characterized by polypoidal vascular dilations and/or abnormal branching vascular networks (BVN) in the inner choroidal vessels underlying the RPE. Öztaş et al. conducted a clinical study aiming to determine the characteristic fundus autofluorescence (FAF) appearance of lesion components such as polypoidal structures and BVNs in eyes with active PCV using short-wavelength confocal scanning laser ophthalmoscopy. They concluded that FAF imaging is a non-invasive, quick, and repeatable diagnostic technique that can corroborate diagnosis of active PCV by indocyanine green angiography and optical coherence tomography (see pages 165-168).

Alagöz et al. evaluated the effect of intracameral triamcinolone acetonide (TA) on the surgical outcomes of trabeculectomy with mitomycin C and its complications. They observed no increase in the complication rate with TA and a tendency toward lower intraocular pressure and antiglaucomatous drug use in long-term follow-up. They also reported that TA did not have a significant effect on surgical success (see pages 169-174).

In a study by Niyaz et al. analyzing optic disc and cup area in a normal population over 40 years of age, fundus photographs of 3,038

patients were taken with a non-mydratric fundus camera and planimetric measurements of the optic disc and cup were made using VK-2 digital imaging software. Their results indicate that there were no significant differences between men and women or the various age groups in terms of disc area or cup area (see pages 175-178).

In the first case report featured in this issue, Örneş et al. treated both eyes of a 41-year-old female patient diagnosed with retinitis pigmentosa (RP) using 0.7 mg dexamethasone implant (Ozurdex, Allergan) due to secondary macular edema (ME) that was refractory to other treatment modalities. They report that four days after each injection, the patient's visual acuity improved and the ME nearly completely resolved (see pages 179-181).

In the second case report, Güzel et al. document a case with bilateral, simultaneous papillophlebitis thought to be related to hyperhomocysteinemia secondary to methylenetetrahydrofolate reductase (MTHFR) (C677T) polymorphism. The authors emphasize that although papillophlebitis patients may have good visual prognosis, a thorough evaluation for possible serious underlying systemic diseases is advisable (see pages 182-185).

Esen et al. present a case of tubercular serpiginous-like choroiditis who exhibited paradoxical worsening after initiation of antitubercular therapy (ATT). They report that in such situations, therapy should not be assumed ineffective and discontinued, and state that systemic steroid therapy may help suppress inflammation and control progression in these patients (see pages 186-189).

Şatırtav et al. report a patient who was diagnosed with bladder carcinoma after presenting with unilateral recurrent anterior uveitis. They describe the difficulties encountered while diagnosing this elderly patient with uveitis findings, and stress the importance of always considering metastatic disease in such cases (see pages 190-193).

Malignancies are a main cause of proptosis in children. In a case report from Vatandaş et al., computed tomography of a three-year-old boy with proptosis of the right eye and a palpable, immobile mass in the lateral wall of the right orbit revealed diffuse bone destruction and expansion in the right lateral orbital wall and other cranial bones. Diagnosis of Langerhans cell histiocytosis was confirmed by bone biopsy. The authors draw attention to the need to carefully examine pediatric patients presenting with proptosis and keep pathologies like Langerhans cell histiocytosis in mind (see pages 194-196).

Finally, Mangan et al. report a 25-year-old man with isolated anterior lens capsule rupture and subsequent cataract development due to blunt trauma. The authors point out that anterior lens capsule rupture is relatively less common than posterior capsule rupture in blunt trauma and evaluated possible factors leading to this outcome (see pages 197-199).

**Respectfully on behalf of the Editorial Board,
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