

## EDITORIAL

### 2022 Issue 2 at a Glance:

Esteemed colleagues,

The Turkish Journal of Ophthalmology's second issue of 2022 features 7 original studies, a review, 3 case reports, and a letter to the editor with a reply from the authors.

A clinical study by Harbiyeli et al. titled "Clinical and Mycological Features of Fungal Keratitis: A Retrospective Single-Center Study (2012-2018)" included 38 eyes of 38 patients without polymicrobial etiology among 72 fungal keratitis cases (12.8%) diagnosed in 559 patients with microbial keratitis. The most common predisposing factor in patients under the age of 40 was trauma (63.6%), while pathologies that impaired ocular surface immunity were the leading factor (48.1%) in patients older than 40 years. In their detailed analysis, the authors recommended considering aggressive treatment options for patients presenting with large and central lesions and to follow these cases more closely.

In their study titled "Evaluation of the Clinical Findings of Patients with Penetrating Keratoplasty Followed by Telephone Due to the COVID-19 Pandemic", Yarımada et al. reported that in situations such as pandemics which can disrupt in-person office visits, patients can be safely followed up with telemedicine visits until the challenging circumstances resolve.

In their study titled "Impact of COVID-19-Related Lockdown on Glaucoma Patients", Barış et al. drew attention to the pandemic and the problem of following chronic disease that can sometimes require urgent care. They reported that the number of emergency glaucoma surgeries decreased by 71.7% while the lockdown was imposed, and that 5.5% of patients who were examined after lockdown was lifted had significant vision loss. Based on these findings, the authors concluded that some patients were unable to seek care at hospitals despite the need for urgent intervention.

In their article titled "How to Manage a Strabismus Clinic During the COVID-19 Pandemic; What Is Really Urgent, What Is Not?: A Single-Center Case Series from Turkey", Yabanoğlu et al. pointed out that acute-onset neurological conditions were more common during the COVID-19 pandemic.

A study by Vural et al. titled "A Comparative Evaluation of Globe Trauma Features in a Tertiary Care Hospital Before and During the COVID-19 Pandemic" shows that during lockdowns imposed due to the pandemic, there was an increase in injuries occurring in garden/farm settings and a decrease in occupational accidents.

In a joint study from Thailand and the Netherlands titled "Idiopathic Epiretinal Membranes: Visual Outcomes and Prognostic Factors", Kunavisarut et al. analyzed 130 eyes of 130 patients, 87 of whom underwent surgery and 43 of whom were followed without treatment, and reported that the baseline grade of disorganization of the retinal inner layers and the presence of ellipsoid zone disruption were the most informative prognostic factors in patients with idiopathic epiretinal membrane.

In their study titled "Heavy Silicone Oil as an Endotamponade in Recurrent or Complicated Retinal Detachment and Macular Hole", Kurt and Kapran reported that although the use of heavy silicone oil as an endotamponade has some limitations, such as increased intraocular pressure, emulsification, inflammation, and possible complications during removal, it is an effective and safe treatment option for indications such as proliferative vitreoretinopathy, recurrent macular holes, and other conditions that require inferior retinal support.

The review article in this issue was written by Gündüz and Mirzayev, who comprehensively address the subject of "Surgical Approach in Intraocular Tumors" with rich visual support.

In the case reports section, the first case is presented by Kaderli et al. under the title "Endogenous Fungal Endophthalmitis in a Patient Requiring Intensive Care Hospitalization and Systemic Steroids for the Treatment of COVID-19". The authors recommended keeping endogenous endophthalmitis in mind in patients with complaints of decreased visual acuity and a history of systemic steroid therapy and hospitalization due to COVID-19.

Özdemir et al. state in their case report titled "Half-fluence Photodynamic Treatment for Central Serous Chorioretinopathy in a Patient Receiving Corticosteroids for Behcet's Uveitis" that half-fluence photodynamic therapy (PDT) was a safe and effective method for uveitis patients who develop corticosteroid-induced central serous chorioretinopathy (CSCR) that persists after corticosteroid discontinuation.

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Yanik et al. also reported in their study titled "Atypical Chronic Central Serous Chorioretinopathy Mimicking Vogt-Koyanagi-Harada Disease: Full Therapeutic Response to Half-Fluens Photodynamic Therapy" that half-fluence PDT with oral eplerenone may be a successful treatment option for atypical CSCR by preventing subretinal fibrosis and scar formation.

In their letter to the editor, Ardakani et al. criticized a study by Taheri et al. titled "Dry Eye and Meibomian Glands in Vitiligo", which focused on meibomian gland function and lipid tear film in a series of 86 patients with vitiligo. They stated that to eliminate confounding factors, the researchers should have excluded smokers, contact lens users, and patients using topical cyclosporine A from the study group, and also recommended using a validated local language version of the Ocular Surface Disease Index instead of the original English version. In their reply, Taheri and Nikandish stated that they found the

additional exclusion criteria recommendations appropriate, but that the patient distribution in their study group would not affect the results. In addition, they stated that they would consider the use of the local adaptation of the Ocular Surface Disease Index in future studies and attempted to bridge the gap verbally in the current study.

As the pandemic seems to be following a favorable course, the 13 papers in this issue included 4 original research articles and 1 case report related to the pandemic. In future issues, we hope that studies comparing the pre-pandemic and pandemic periods will be replaced by studies in which the effects of the pandemic on our clinical routines have been completely eliminated.

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