

BJO at a glance

Creig Hoyt, *editor*

ELIMINATING ONCHOCERCIASIS SEEMS POSSIBLE

Onchocerciasis is the world's second leading infectious cause of blindness, responsible for at least one million blind or disabled people. It is endemic in 30 sub-Saharan African countries where 99% of all those infected live. It is remarkable to note, therefore, that it now seems likely that onchocerciasis will be eliminated as a public health problem by the end of this decade. The success of the onchocerciasis control programme gives hopes that other projects involving global and multiple partnerships, addressing healthcare problems related to poverty and other social and environmental problems, will be just as successful.

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HYPOTONIC SODIUM HYALURONATE IN SJÖGREN'S SYNDROME

Most ophthalmologists I know dread the frequent and not always successful consultation about the treatment of dry

eyes. In the case of those patients with Sjögren's syndrome the problem of dry eyes presents in its most extreme forms. While no entirely effective therapy is available for the treatment of dry eyes, recent studies of the use of sodium hyaluronate eye drops have proved promising. Sodium hyaluronate eye drops increase precorneal tear film stability and corneal wettability, reduce the evaporation rate of tears, and the healing time of corneal epithelium. Because tear hyperosmolarity has been shown to be a main pathogenetic factor in dry eye there has been the suggestion that a good tear substitute for dry eyes should be hypotonic. Aragona and coworkers report the findings of a study of sodium hyaluronate eye drops of different osmolarity in the treatment of dry eyes. Their findings suggest that hyaluronate eye drops are useful for treating severe dry eyes and that solutions that are hypotonic are more effective than those that are isotonic.

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WHERE IS THE TOP OF THE NERVE?

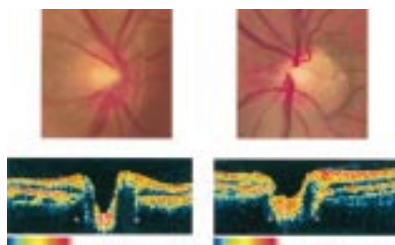
Optic nerve hypoplasia is a congenital anomaly of underdevelopment of the neuronal components of the optic nerve. It manifests itself in many ways, including subtle segmental forms that may not be detected until the patient is an adult. A specific form of optic nerve hypoplasia involving the superior segment has been described. This is often associated with type 1 diabetes in the mother. Unoki and coworkers present the striking findings of optical coherence tomography in superior optic nerve hypoplasia. The images are compelling and the findings suggest that this form of optic nerve hypoplasia in a mild form may be easily overlooked ophthalmoscopically. Superior segmental optic nerve hypoplasia may be much more common than previously thought. Why this disorder only involves the superior segment of the optic nerve is not yet known.

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TREATING AMBLYOPIA: NOT SO SIMPLE

Amblyopia is estimated to occur in 2–3% of children. Although occlusion therapy has been the mainstay therapy for this disorder very little control data exist to outline the appropriate schedules for occlusion therapy. Recently, a study performed in the United States suggested that occlusion therapy and penalisation therapy are equally effective in treating mild to moderate amblyopia, although occlusion therapy is more rapid in doing so. Stewart and colleagues outline the design of the Monitored Occlusion Treatment of Amblyopia Study (MOTAS). This study is designed to investigate the dose-response relation of occlusion treatment of amblyopia. This is a welcome study of a major significant medical problem that still is surrounded more by opinion than fact.

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