



Figure 1 Three different mechanisms of retinal (intraretinal and/or preretinal) bleeding after a sudden lowering of intraocular pressure (IOP). PVD, posterior vitreous detachment.

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Frequency of Purtscher's retinopathy

In their article Agrawal and McKibbin¹ evaluate the one-year frequency and the clinical outcome data of Purtscher's retinopathy through the British Ophthalmological Surveillance Unit. All their 15 cases were visually symptomatic. Twelve cases were associated with trauma and three cases with acute pancreatitis. The authors conclude that the incidence of Purtscher's retinopathy is low (0.24 cases per million population) in the United Kingdom, and that in half of the cases visual acuity improves by at least 2 Snellen lines in 6 months. The authors' data, however, need careful interpretation. We investigated the clinical characteristics, histological features and prognostic significance of retinopathy of pancreatitis

(Purtscher's retinopathy associated with acute pancreatitis) in several studies.^{2,3} We found that most of our cases were visually asymptomatic, because the patients were in severe or terminal status in intensive care units. We also found that retinopathy of pancreatitis was an indicator of multi-organ failure and lethal outcome. Our data suggest that pancreatitis-associated Purtscher's retinopathy is more common than reported by Agrawal and McKibbin,¹ and that the visual outcome may be worse than found by the authors who used data reported by ophthalmologists. One may suppose that the reporting ophthalmologists might have seen only those cases that were associated with less severe systemic damage and therefore the patients were able to realise their visual symptoms. It is probable that Purtscher's retinopathy is more frequent than reported by the authors for the United Kingdom and that the visual outcome is different from that indicated in their article if all cases are considered.

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RETRACTION

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The following article, published in the March 2008 issue of the journal, has been retracted:

Chen Y, Li X-x, Yin H, Gilbert C, Liang J-h, Jiang J-r, Zhao M-w, Beijing ROP Study Group. Risk factors for retinopathy of prematurity in six neonatal intensive care units in Beijing, China. *Br J Ophthalmol* 2008;**92**:326–31.

CORRECTIONS

doi:10.1136/bjo.2007.131540corr1

In the paper by de Silva *et al* (*Br J Ophthalmol* 2008;**92**:954–7) the affiliation of the second author, A Kwan, should be Queensland Eye Institute, Brisbane, Australia and Faculty of Health Sciences, University of Queensland, Herston, Australia.

doi:10.1136/bjo.2007.120675corr1

In the paper by Ducos de Lahitte *et al* (*Br J Ophthalmol* 2008;**92**:64–9) the last author should be B Bodaghi.

NOTICES

Second Sight

Second Sight would like to hear from experienced Indian eye surgeons returning to India after training/working in the UK. Second Sight is a London based charity dedicated to the elimination of cataract blindness in India.

Further details: Dr Lucy Mathen, lucymathen@yahoo.com.

2008 International Agency for the Prevention of Blindness (IAPB) 8th General Assembly

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The Assembly is co-sponsored by the World Health Organization (WHO) and seeks to involve the entire spectrum of eye care workers, from ophthalmologists to public health experts to rehabilitation professionals. The event promises to be stimulating and worthwhile for all interested in the success of VISION 2020: The Right to Sight.

Further details: Email: agency@lvpei.org; Website: <http://8ga.iapb.org>

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CORRECTIONS

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