At a glance

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Nosocomial adenovirus keratoconjunctivitis

Adenovirus keratoconjunctivitis (AKC) is the commonest nosocomial eye infection. Despite implementation of infection-control measures including handwashing, local area surface cleaning, single-use eye-drops and avoidance of tonometry, several cases of nosocomial infection AKC (48.4% (75/155)) were identified at Moorfields Eye Hospital by Dart *et al*. Following implementation of a new infection control policy which included segregating suspected AKC cases in a separate waiting area and examination room (the Red Room), and by expediting their examination, to reduce their exposure to staff and patients in the common waiting areas, the numbers of nosocomial cases dropped to 3.4% (8/235). In addition inclusion of AKC as an infection control index infection, demanding ongoing quarterly audit, has ensured that the policy is implemented and remains effective. ***See page 18***

Optomap for retinal screening within casualty setting

Khandhadia *et al* compared nurse-guided Optomap retinal imaging with examination by an eye casualty officer, in detecting clinically significant peripheral retinal lesions in 219 patients with retinal symptoms (flashing lights and floaters). The findings from the Optomap and casualty officer were compared with a gold-standard scleral indentation examination performed by a retinal specialist. The sensitivity of the Optomap for detecting retinal detachment (n = 7) was 100%. For retinal tears/holes (n = 18) the Optomap sensitivity was 33% compared with 67% for the casualty officer. The authors conclude that Optomap detects retinal detachments successfully but is not able to accurately detect retinal holes and tears. ***See page 52***

Dry eye diagnostic tests

Moore *et al* assessed concordance between common dry eye diagnostic tests including phenol red thread test (PRT), tear film break-up time (TBUT), biomicroscopic examination and impression cytological assessment of conjunctival goblet cells, and McMonnies' dry eye questionnaire (MQ) test in 91 subjects with dry eyes. A statistically significant difference was noted between PRT results and all other tests. Only Meibomian gland pathology, MQ, reduced goblet cell density and TBUT demonstrated correlation. The authors conclude that assessment of aqueous deficiency in dry eye is difficult because of poor correlation between symptoms and direct measurement of tear volume. However, there is a correlation between tests assessing lipid/mucous deficiency. ***See page 66***

Knowledge and beliefs in the Singapore Malay Eye Study

Undercorrected refractive errors are an important cause of poor vision in Asia. Rosman *et al* describe knowledge and beliefs of refractive errors and possible impact of undercorrection in a population-based study of 3280 adult Malays in Singapore. In 503 subjects with refractive errors, undercorrected refractive errors were more frequent in females (61% vs 49%) and knowledge on refractive errors (63% vs 78%) was significantly lower in this group. The authors conclude that the lack of knowledge and awareness of refractive errors are important risk factors for undercorrected refractive error in an urban Singapore population. ***See page 4***

Assessment of lens opacities with anterior segment OCT

Wong *et al* evaluated the reliability of lens density measurement with anterior segment OCT in 55 eyes with age-related cataracts. After dilation, lens photographs were taken with a slit lamp and graded against the LOCS III standardised condition. Anterior segment OCT imaging was performed on the same eyes with a high-resolution scan. Significant correlations were found between anterior segment OCT nuclear density measurements and the LOCS III nuclear opalescence and nuclear colour scores (r = 0.77 and 0.60, p?0.001). The authors conclude that anterior segment OCT nucleus density measurement is reliable and correlates with the LOCS III scores. ***See page 61***

Atrophy of the lateral geniculate nucleus in glaucoma

Gupta *et al* determined whether the lateral geniculate nucleus (LGN) undergoes atrophy in patients with glaucoma and vision loss. They measured LGN on coronal proton density magnetic resonance images in 10 glaucoma patients and age-matched controls (8). Compared with controls, the mean LGN heights in glaucoma were decreased in right (4.09 mm vs 4.74 mm) and left (3.98 mm vs 4.83 mm) LGN. These in vivo observations are consistent with ex vivo primate and human neuropathological studies. ***See page 56***

Autofluorescence imaging in central serous chorioretinopathy

Ayata *et al* compared short-wavelength (SW) and near-infrared (NIR) autofluorescence (AF) in 26 eyes with acute central serous chorioretinopathy (CSC). Focally decreased AF at the leakage site was seen in most of the cases with acute CSC. In addition, diffuse decreased SW-AF corresponding to the area of the serous retinal detachment was also observed. The authors conclude that AF imaging is a useful non-invasive technique for diagnosing and monitoring CSC. ***See page 79***

Retinoblastoma in Iran, the USA and the UK

The primary aim of treatment of retinoblastoma is to eliminate or reduce tumour specific mortality. In this issue, studies from Iran, USA, and UK report on survival of children with retinoblastoma. Naseripour *et al* report survival of 83.1% at 5 year (Kaplan–Meier estimates) for children treated in Iran. Birch *et al* have estimated 5-year survival rate of 97% for unilateral cases and 100% for bilateral cases (UK). Broaddus *et al* report the 5-year observed actuarial survival rate of 96.5% (US). In the UK and US, where prior data were available, improvements in survival were observed. With international collaborative efforts underway, survival with retinoblastoma in the developing countries can also be improved. ***See pages 21–39***

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