

## Antiglaucoma medications during pregnancy

Ho *et al* studied the relationship between use of antiglaucoma medications during pregnancy and the risk of having low-birth-weight (LBW) infants in 244 pregnant women who had been prescribed topical glaucoma medication during pregnancy. The control group comprised of 1952 pregnant women matched for age, year of delivery, maternal hypertension, and gestational diabetes. The majority of pregnant women (78%) were prescribed beta-blockers to control glaucoma. After adjusting for confounding variables, there was no significant difference in the risk of LBW infants between mothers prescribed beta-blockers and the comparison cohort (OR 1.48). However, there was a significantly higher risk of LBW infants for mothers prescribed topical antiglaucoma medications other than beta-blockers (OR 2.1). The authors conclude that topical beta-blockers can be the first-line drugs for medical treatment of glaucoma in a pregnant woman. **See page 1283**

## ReSTOR IOL in adult anisometropic and amblyopic patients

Petermeier *et al* assessed subjective and objective parameters of visual function after implantation of the AcrySof ReSTOR in 6 eyes with anisometropic amblyopia. The defocus curve showed a clear bifocal profile, even in the amblyopic eyes. All patients had a crowding phenomenon in the amblyopic eye. Binocular contrast sensitivity was within normal limits. Photoc phenomena were not reported by any patient. The authors conclude that even anisometropic amblyopic patients may benefit from AcrySof ReSTOR IOL implantation. **See page 1296**

## Ten years after PRK and LASIK

Alió *et al* performed a retrospective, control-matched study of 68 eyes (34 [PRK] and 34 [LASIK]) with myopia between -6 and -10 D to compare the long-term outcomes. All patients were operated using VISX 20/20 excimer laser

with an optical zone of 5.5 to 6 mm. All PRK-treated eyes were matched with LASIK-treated eyes for age, spherical equivalent, and cylinder. At 10 years, 20 (71%) and 23 (88%) eyes were within  $\pm 1.00$  D and the retreatment rate was 35% and 18% respectively after PRK and LASIK respectively. The efficacy was 0.90 for PRK and 0.95 for LASIK. The authors conclude that LASIK had slightly better efficacy, predictability, and less rate of re-treatment than PRK after 10 years. **See page 1313**

## Epidemiological characteristics of infectious corneal ulcers: the Portsmouth study

Ibrahim *et al* conducted a population based study in southern England to identify the incidence, predisposing factors, and the clinical and microbiological diagnosis of infectious corneal ulcers (n = 1786 patients). Contact lens wear was the main predisposing factor (31%). Gram-positive bacteria accounted for 71% of the bacterial isolates, while Gram negative bacteria accounted for 29% with predominance of *Pseudomonas aeruginosa*. Nine out of 11 patients with *Acanthamoeba* keratitis were contact lens wearers. The authors conclude that wearing contact lenses remains the most important risk factor for infectious corneal ulcers in southern England. **See page 1319**

## Evaluation of filtering bleb function by thermography

Kawasaki *et al* investigated whether thermography can be used to evaluate bleb function by measuring the surface temperatures of filtering blebs from 39 eyes of 33 post-trabeculectomy patients. The temperature decrease in the filtering bleb (TDB) was correlated with IOP control and the morphological appearance of the filtering blebs. The difference between the TDB of the two IOP control groups was significant ( $p < 0.0001$ ), but there was no significant relationship between morphological classification and TDB. The authors conclude functional blebs have lower temperatures than nonfunctional

blebs when evaluated by thermography. **See page 1331**

## Sub-threshold micropulse diode laser and conventional green laser photocoagulation for CSME

Figueira *et al* conducted a prospective randomised double-masked trial comparing sub-threshold micropulse diode laser photocoagulation (MPDL; n = 44) with conventional green laser photocoagulation (CGL; n = 40) in the treatment of clinically significant diabetic macular oedema (CSME). All patients completed 12 months of follow-up. There were no statistically significant differences in BCVA, contrast sensitivity, and retinal thickness between the two laser modalities. At 12 months, laser scars were identified in 14 % of the MPDL-treated eyes compared with 59% of the CGL-treated eyes ( $p < 0.001$ ). The authors conclude that sub-threshold MDPL is as effective as CGL treatment for CSME. **See page 1341**

## Functional aspects of drusen regression

Sallo *et al* studied 14 patients who were identified to show soft drusen regression (out of 960 patients) for photopic and scotopic fine matrix mapping (FMM). Phenotype and functional data were correlated with fundus appearance, autofluorescence and retinal sensitivity. FMM showed generalised threshold elevation relative to normal controls both under photopic and scotopic conditions. Scotopic sensitivity loss exceeded photopic loss in all cases. Sensitivity loss over areas with drusen or regressed drusen did not differ significantly from that over non-drusen areas. The authors conclude that macular soft drusen may fade or disappear without detectable ophthalmoscopic, FA or psychophysical signs of local dysfunction. This phenomenon is a potential source of misclassification in epidemiological studies investigating the natural history of the disease as well as in clinical trials that evaluate the efficacy of possible therapies. **See page 1345**