Litwin et al (see page 899)
Caution is required when considering functional surgical correction of blepharoptosis for patients with Myasthenia Gravis. There is a high likelihood of need for further surgery because of initial under-correction and despite this, a proportion will develop corneal exposure.

Sun et al (see page 903)
In dry eye, Diquafosol, compared to sodium hyaluronate, is not inferior in the improvement in corneal fluorescein staining score and superior in terms of rose bengal staining.

Jagan et al (see page 909)
Sebaceous Adenomas of the eyelid are rare but should be evaluated with immunohistochemical staining for the mismatch repair proteins MLH1 and MSH2 to screen for Muir-Torre Syndrome and hence possible internal malignancy.

Cheng et al (see page 920)
Automated choroidal segmentation software demonstrated a mean peripapillary choroidal thickness of 136.2±56.8 μm in a population-based study. Shorter axial length, younger age, lower triglycerides levels and diabetes are associated with thicker peripapillary choroid.

Aung et al (see page 927)
Iris-trabecular contact after phacogoniosynechiolysis using SS OCT.

Ryu et al (see page 932)
In this large sample of an asymptomatic population, we found an association between intraocular pressure and subclinical atherosclerosis measured by coronary artery calcium computed tomography.

Newton et al (see page 937)
Delayed diagnosis of retinoblastoma in Uganda leads to unnecessary deaths, but the introduction of a programme of neo-adjuvant and adjuvant chemotherapy is associated with significant improvements in survival.

Künkele et al (see page 949)
The neoadjuvant/adjuvant chemotherapy regimen used by the German Retinoblastoma Referral Center for patients displaying histopathological risk factors is safe and efficient in preventing metastasis.

Narayanan et al (see page 954)
Bevacizumab versus ranibizumab in BRVO.

Yoshida et al (see page 960)
The elevated levels of MCP-1 and IL-6 even after successful vitrectomy indicate prolonged inflammation which can cause postoperative DME in vitrectomized eyes.

Sivaprasad et al (see page 967)
Areas of temporal macular thinning are associated with proliferative sickle cell retinopathy. Eyes of patients with sickle cell disease also have significantly lower retinal and choroidal thickness compared to age, gender and ethnicity matched controls.

Arya et al (see page 973)
Pointwise linear regression analysis of humphrey visual fields in patients with birdshot chorioretinopathy monitored with electroretinography.

Kodikian et al (see page 979)
The dexamethasone implant Ozurdex® seems to be an interesting therapeutic alternative for post-surgical macular edema including Irvine-Gass syndrome refractory to first-line treatments. In case of 2 injections, the effectiveness and safety were similar.

Guo et al (see page 990)
In ethnic Chinese patients with conjunctival melanomas, the T stage was an independent prognostic factor for overall survival, and the primary tumour thickness and postoperative adjuvant therapy were prognostic factors for recurrence-free survival.

Gicquel et al (see page 997)
Optimization of the binocular through-focus subjective quality of vision with modified monovision using combinations of spherical (SA4) and secondary spherical (SA6) aberrations.

Russo et al (see page 1004)
Concentrations of vascular endothelial growth factor and pigment epithelium-derived factor in patients with myopic choroidal neovascularisation before and after intravitreal ranibizumab.

Quill et al (see page 1009)
This study shows that the ECM response of LC cells to strain is mediated via calcium signalling. The ability to modulate this calcium signalling may open future therapeutic options in glaucoma.
Highlights from this issue

Keith Barton, James Chodosh and Jost Jonas

*Br J Ophthalmol* 2015 99: i
doi: 10.1136/bjophthalmol-2015-307285

Updated information and services can be found at:
http://bjo.bmj.com/content/99/7/i

These include:

**Email alerting service**
Receive free email alerts when new articles cite this article. Sign up in the box at the top right corner of the online article.

Notes

To request permissions go to:
http://group.bmj.com/group/rights-licensing/permissions

To order reprints go to:
http://journals.bmj.com/cgi/reprintform

To subscribe to BMJ go to:
http://group.bmj.com/subscribe/