



Highlights from this issue

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Keith Barton, Jost B Jonas , James Chodosh , *Editors in chief***Outcome of peripheral iridotomy in subjects with uveitis** (see page 8)

The peripheral iridotomy (PI) survival time was 70 days for YAG PI and 11 years for surgical PI in uveitic patients. Younger age and iris bombe were associated with increased failure risk. Glaucoma developed in 36.5%.

Areas of agreement in the management of childhood non-infectious chronic anterior uveitis in the UK (see page 11)

Childhood uveitis comprises a heterogeneous group of rare, blinding eye diseases. High-level evidence to support practice is lacking. We report evidence of absence of consensus, amongst UK specialists, on the management of childhood anterior uveitis.

Examinations under anaesthesia as a measure of disease burden in unilateral retinoblastoma: the London experience (see page 17)

In this cohort of unilateral retinoblastoma patients, children that presented with International Intraocular Retinoblastoma Classification Group B or C underwent twice the number of examinations under anaesthesia as compared to group D or E cases.

Incidence trends of conjunctival malignant melanoma in Canada (see page 23)

This analysis of 190 patients defines incidence trends for conjunctival melanoma in Canada, highlights important geographic difference in the distribution of this malignancy and confirms the existence of a north to south geographic incidence gradient in North America.

Ruthenium-106 vs iodine-125 plaque brachytherapy of 571 choroidal melanomas with a thickness of ≥ 5.5 mm (see page 26)

In 571 patients with ≥ 5.5 mm thick choroidal melanomas, the incidence of repeated brachytherapy was significantly higher after primary treatment with Ruthenium-106 vs Iodine-125. There were however no differences in size-controlled hazards for post-brachytherapy

enucleation, melanoma-related mortality or relative survival.

Correlation of changes in serum level of VEGF and peripapillary retinal thickness in patients with POEMS syndrome (see page 33)

Together with the reduction in the serum level of vascular endothelial growth factor, the peripapillary retinal thickness was also reduced significantly after thalidomide treatment in patients with polyneuropathy, organomegaly, endocrinopathy, monoclonal gammopathy, and skin changes syndrome.

Safety of 6000 intravitreal dexamethasone implants (see page 39)

This study reports the safety of 6015 injections in 2736 eyes in real life situation. Most common side effects were cataract progression (32.5%) and intraocular pressure rise of >25 mmHg (26.5%), with only 0.5% eyes required filtering surgery.

Anatomical and functional changes in neovascular AMD in remission: comparison of fibrocellular and fibrovascular phenotypes (see page 47)

Neovascular AMD eyes in remission may be characterised by either a fibrovascular or fibrocellular phenotype.

Effects of three intravitreal injections of aflibercept on the ocular circulation in eyes with age-related maculopathy (see page 53)

This study investigated the effects of three consecutive intravitreal injections of aflibercept on ocular perfusion with laser speckle flowgraphy. Results indicate reduced choroidal and optic nerve head perfusion 1 month after the third injection.

Factors associated with extended remission in neovascular age-related macular degeneration on pro re nata treatment protocol (see page 58)

In patients with neovascular age-related macular degeneration, treatment free

periods of over 1 year can be achieved in 9.2%. Baseline anatomical features may predict the likelihood of achieving extended remission, including Type 3 CNV lesion, thinner choroid, and the absence of macular atrophy at presentation. Patients who present with isolated intraretinal fluid are more likely to achieve early extended remission.

Safety and tolerability of ranibizumab in uni/bilateral neovascular age-related macular degeneration: Twelve-month TWEYEs study (see page 64)

In the TWEYEs study, the incidence rates within and outside of the risk period were practically similar. Over 1 year, ranibizumab was well tolerated in patients with neovascular age-related macular degeneration treated unilaterally or bilaterally in a pragmatic setting.

The National Eye Survey of Trinidad and Tobago (NESTT): Prevalence, causes and risk factors for presenting vision impairment in adults over 40 years (see page 74)

The National Eye Survey of Trinidad and Tobago identified that 11.9% adults over 40 years had presenting vision impairment, and a further 22.3% had uncorrected presbyopia. Leading causes of blindness (0.73%) were glaucoma and cataract.

Risk factors for disease progression in low-teens normal-tension glaucoma (see page 81)

Despite baseline intraocular pressure (IOP) in the low-teens, more than one-third of Normal Tension Glaucoma showed glaucoma progression during 8 years follow-up, and variability of diurnal blood pressure or diurnal IOP and disc haemorrhage were risk factors for progression.

Combined subconjunctival injection of dexamethasone for the management of acute primary angle closure: a randomised controlled trial (see page 87)

This study was performed to explore the role of combined subconjunctival injection of dexamethasone for the treatment

of acute primary angle closure (APAC). The authors observed that this approach was associated with an accelerated reduction in IOP in APAC eyes.

Volumetric parameters-based differentiation of narrow angle from open angle and classification of angle configurations: an SS-OCT study (see page 92)

Anterior chamber volume has better performance than angle open distance (AOD) or anterior chamber depth in detection of narrow angle and the combination of iris volume, iris thickness and AOD750 could further classify configurations of angle closure compared with ultrasound biomicroscopy.

The association between focal lamina cribrosa defects and optic disc haemorrhage in glaucoma (see page 98)

This study investigated the relationship between focal lamina cribrosa defects and optic disc haemorrhages, finding that lamina defects were associated with an increase in haemorrhage occurrence with no association between defect size and haemorrhage frequency.

Topographic correlation between macular superficial microvessel density and ganglion cell-inner plexiform layer thickness in glaucoma-suspect and early normal-tension glaucoma (see page 104)

There was significant topographic correlation between macular superficial microvessel density and macular ganglion

cell-inner plexiform layer thickness in glaucoma suspects and early-stage normal-tension glaucoma patients.

Illness perceptions in people newly-diagnosed with glaucoma and ocular hypertension (see page 110)

Illness perceptions have strong links to outcome in chronic disease. This study shows that some illness perceptions in newly-diagnosed patients with glaucoma or ocular hypertension differ to illness perceptions in patients who have been diagnosed for at least 2 years, overall illness perceptions were equally negative in all groups.

Risk factors and outcomes of management of delayed suprachoroidal haemorrhage following Ahmed glaucoma valve implantation in children (see page 115)

A case-control study of the occurrence, risk factors and details of management of nine cases of delayed suprachoroidal haemorrhage vs 27 controls among children who underwent Ahmed glaucoma valve implantation, is discussed.

Corneal biomechanics and biomechanically-corrected intraocular pressure in primary open angle glaucoma, ocular hypertension and controls (see page 121)

Normal tension glaucoma corneas are softer and more deformable under the air puff compared with controls, ocular hypertension and high-tension glaucoma. Glaucoma patients with softer

corneas are more likely to show visual field defects.

Effect of recombinant human nerve growth factor eye drops in patients with dry eye: a phase IIa, open label, multiple-dose study (see page 127)

This open-label clinical trial shows that human nerve growth factor eye drops treatment is safe and effective in improving both frequency and severity of symptoms and ocular surface damage in patients with dry eye.

Dynamic assessment of the tear film mucous and lipid layers using a novel tear film imager (see page 136)

The tear film imager is the first technology that reproducibly assesses the mucous and lipid layers of the tear film. It can be a useful novel tool in the clinical evaluation of dry eye.

Two-year observation of posterior corneal elevations after small incision lenticule extraction (smile) for myopia higher than -10 diopters (see page 142)

No significant forward shifts of posterior corneal elevation (PCE) were observed after small incision lenticule extraction (SMILE) or femtosecond-laser in situ keratomileusis for extremely high myopia. After SMILE, posterior corneal elevation exhibited short-term forward displacement and returned to the original level after six postoperative months.