Correspondence

Multiple cotton wool spots following bone marrow transplantation

Sir, B. Gloor et al. assert in their very interesting paper1 that, to the best of their knowledge, 'multifocal ischaemia of retina with multiple cotton-wool spots has not yet been reported as a complication of bone marrow transplantation.'

We would like to point out to the authors that we reported in 19832 a similar case with extensive retinal and choroidal ischaemia, histopathologically confirmed, diagnosed eight months after a bone marrow graft. In this patient a thrombotic microangiopathy (Moschowitz disease) was found shortly afterwards. Then two more cases were observed (not yet published), both with retinal and choroidal ischaemia. One of them certainly had a thrombotic microangiopathy.

None of these three patients received cyclosporin A. Therefore it seems that this drug is not implicated. We think in such cases we may be in presence of ocular manifestations of thrombotic microangiopathy. This may be induced by various and combined factors: skull and/or total body irradiation, immunological disorders in relation to the graft, graft-versus-host disease, chemotherapy.

We note that choroidal involvement was found in the three cases to be associated with retinal disease. In these three cases visual impairment was the inaugural symptom, though the patients seemed to be in good health. As regards our patients the time between graft and visual symptoms is longer than in the patients of Gloor et al. Our three patients died shortly after eye development.

In conclusion, we agree with Gloor et al. that 'it is clearly desirable that all patients submitted to bone marrow transplantation should be examined by an ophthalmologist.'

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References


Ia antigen

Sir, I read with some interest the article by Roussel and Coster.1 I doubt that the human lymphocytes that describe were positive for Ia antigen, as these antigens are coded for by the I region of the mouse histocompatibility complex (see, for example, Hobart and McConnell2). Perhaps the authors would care to comment and correct their article.

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References


Sir, Although the terms Ia antigen (simply an abbreviation for immune-associated antigen) was first used to describe a system of cell-surface glycoproteins in the mouse, it has been and indeed is still widely used in the literature to refer to homologous series of antigens in other species including man.1,3 The monoclonal antibody FMC 14,4 used in this study to detect a monomorphic determinant on human Ia (probably HLA-DR) molecules, certainly does not define mouse Ia antigen. However, we take Dr Clauoué's point.