BJO at a glance

Creig Hoyt, Editor

OCULAR TRAUMA: POVIDONE-IODINE AND TREATMENT OF CORNEAL ULCERS

Ocular trauma is a major cause of monocular blindness and visual impairment worldwide. In many parts of the underdeveloped world the most common cause of ulcer is fungal not bacterial. Treatment options for fungal ulcers are limited because of the expense and lack of available medications. A 5% solution of povidone-iodine is widely used prophylactically to reduce the risk of infection during cataract surgery. In a study from Johns Hopkins University all patients with cornea ulcers presenting for care in a rural Nepal clinic were randomised to a standard protocol of antibiotic therapy versus standard therapy plus 2.5% povidone-iodine every 2 hours for 2 weeks. In this study the addition of povidone-iodine to antibiotic therapy did not improve visual outcomes.

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NEUROLOGICAL DISEASE AND UVEITIS

It is widely recognised by ophthalmologists that uveitis may be associated with a variety of diseases including distinct ocular syndromes, immunologically mediated systemic diseases, infections, and masquerading syndromes such as malignancy. The association of uveitis and neurological disease is also well recognised although usually thought to be relatively infrequent. In a study of 1450 patients with uveitis 8% had neurological disease that was considered to be causally related to the eye inflammation. The most frequent neurological associations were Vogt-Koyanagi-Harada disease, primary central nervous system lymphoma, multiple sclerosis, and herpes virus infection. Multiple sclerosis was associated with pars planitis and bilateral granulomatous anterior uveitis in three quarters of affected individuals.

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PREGNANCY, POST-PREGNANCY, AND ACTIVITY OF UVEITIS

Many autoimmune diseases in females are known to improve during pregnancy but worsen in the postpartum period. A prospective observational case study was conducted by investigators at the National Institutes of Health in four pregnant women in the first trimester with chronic non-infectious uveitis. In this study female hormones and TGF- β may contribute to the activity of uveitis during pregnancy and the postpartum period. Cytokine levels except for TGF- β were almost undetectable.

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MORE ON NECK TIES AND INTRAOCULAR PRESSURE

Teng and coworkers (in an earlier issue of *BJO*) suggested that a tight neck tie might increase intraocular pressure. Theelen and coworkers challenge this point of view. In a study of 23 right eyes of 23 healthy subjects, both male and female, intraocular pressure was measured by applanation tonometry with a TonoPen in four different conditions: (1) open collar upright; (2) head in the headrest of a slit lamp, (3) tight neck tie upright, (4) in a slit lamp position. In this study tight neck ties did not significantly affect intraocular pressure measurements in healthy subjects. However, retroflexion of the neck significantly increased intraocular pressure measurements and the authors suggest that the slit lamp position may not be the ideal position to measure intraocular pressure accurately.

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CAN YOUR PATIENT READ THE DIRECTIONS ON THE EYE DROP BOTTLE?

Physicians are well aware of the problems of patient compliance in taking pharmacological agents. Drummond and coworkers studied 180 patients with varying degrees of visual disability to see if they were able to read the manufacturers' instructions on the side of the bottle of eye drops. Patients with 6/18 visual acuity were able to read their instructions but those whose visual acuity was worse could not. This latter group would benefit from a larger font size or magnification to read instructions. The authors recommend that all printed information for patients with visual acuities between 6/24 and 6/60 be printed in Arial font size 22 or equivalent.

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WHO RESPONDS TO INTRAVITREAL TRIAMCINOLONE ACETONIDE INJECTIONS?

Intravitreal triamcinolone has increasingly been used in the treatment of intraocular proliferative and neovascular diseases. Systemic and local side effects have been reported from this treatment. Jonas and coworkers studied 94 patients in a non-randomised clinical case series who were treated with intravitreal triamcinolone for exudative age related macular degeneration. In this study improvement following therapy was correlated with preoperative visual acuity—that is to say the lower the visual acuity at the time of treatment, the greater the chance of significant improvement. In eyes with retinal pigment epithelial detachment there was better response than in those eyes with minimally classic subfoveal neovascularisation. Further definitions of factors that affect visual outcomes with this treatment are required.

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