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Response to choroidal thickness changes after cataract surgery

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Letters to the Editor

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REFERENCES


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Dear Editor:—We would like to thank Venkatesh and Bavaharan for their interest in our work.

1) We agree with their suggestion regarding systemic variables having an impact on choroidal thickness. It has indeed been reported that having certain comorbidities are associated with a change in choroidal thickness. Hypertension is associated with a decrease in choroidal thickness, and diabetes mellitus has been found to coexist with a thinner choroid as compared to normal controls. Furthermore, hypercholesteremia and obesity have interestingly been linked with an increase in choroidal thickness. However, due to the sample size of our study, we were unable to assess statistically multiple variables which can potentially affect the choroidal thickness. Future studies with larger sample size should take into account systemic factors such as hypertension, diabetes, hyperlipidemia or even states such as pregnancy to evaluate the role of these variables in choroidal thickness change.

2) We also agree that stress and anxiety associated ocular surgery may have a negative impact on choroidal permeability and may affect choroidal thickness change. Future studies in which patients are randomized to topical steroids arm vs non-steroidal anti-inflammatory eye drops can better inform us about the true affect of increased choroidal permeability secondary to steroid drops.

Vitrectomy in diabetic macular edema

Dear Editor:

We read with great interest the article by Michalewska et al titled “Vitrectomy in the management of diabetic macular edema in treatment-naïve patients”. The authors in their study have discussed the advantages of early vitrectomy in diabetic macular edema. However, we have a few comments to make regarding the methodology and the interpretation of results in this study.

1) The authors in this current study do not have a strict visual acuity criterion for including patients in the study. The DRCR.net study evaluating the role of vitrectomy in diabetic macular edema had a well-defined visual acuity criterion [20/63 – 20/400] in their study. So, most patients with thicker macula were excluded from their study.