

2021 Issue 2 at a Glance:

Esteemed colleagues,

This issue of our journal features 6 original studies, 1 review, and 5 case reports examining different topics.

Vitiligo is an acquired depigmentation disorder of the skin and mucous membranes that affects approximately 0.5-1% of the global population. The most accepted mechanism for the pathogenesis of diffuse vitiligo is the autoimmune theory, which implicates autoimmune-mediated destruction of melanocytes. Vitiligo patients exhibit retinal hypopigmentation, retinal pigment epithelium atrophy, and retinal electrophysiological dysfunction. Some studies have also demonstrated ocular surface changes and tear film abnormalities in vitiligo patients with periocular involvement. In their study titled "Dry Eye and Meibomian Glands in Vitiligo", Taheri et al. determined that vitiligo patients had lower Schirmer test and strip meniscometry values, while there was no difference in tear break-up time or meibomian gland loss measured by meibography. The authors concluded that vitiligo was associated with a decrease in aqueous tear film production but did not affect meibomian gland structure and function (see pages 70-74).

Keratoconus (KC) is a corneal disease characterized by non-inflammatory stromal thinning, corneal protrusion, and irregular astigmatism. There are studies in the literature suggesting that OCT can reveal macular changes in KC patients that are undetectable in slit-lamp examination. In a study by Özsaygılı and Yıldırım titled "The Relationship Between Keratoconus Stage and the Thickness of the Retinal Layers", measurements obtained by spectral domain optical coherence tomography were compared in 40 healthy eyes and 85 KC eyes according to disease stage. Measurements of the retinal nerve fiber layer, ganglion cell layer, inner plexiform layer, and outer plexiform layer did not differ between KC and healthy eyes. However, higher KC stage was associated with increased thickness of the inner nuclear layer, which contains neuroglial cell bodies, and reduced thickness of the outer retinal layers, especially the retinal pigment epithelium (see pages 75-82).

Low vision is defined as a distance visual acuity of less than 20/60 or a visual field of 20° or less in the better-seeing eye after refractive correction and if necessary, medical or surgical treatment. In their study titled "Comparison of Quality of Life Questionnaires in Patients with Low Vision", Şahlı and İdil assessed 64 low vision patients using the Low Vision Quality of Life Questionnaire (LVQOL) and the

National Eye Institute Visual Function Questionnaire (NEI VFQ-25) and examined the compatibility between them. They found that total scores of the two questionnaires were strongly correlated and concluded that comparisons could be made between studies using these instruments, both of which have been validated in Turkish (see pages 83-88).

Gedar Totuk et al. share a study titled "Intense Pulsed Light Treatment for Moderate to Severe Acute Blepharitis or Blepharoconjunctivitis: A Retrospective Case Series", in which 11 patients underwent periocular intense pulsed light therapy and showed significant improvement in Ocular Surface Disease Index (OSDI) symptom score, lipid layer thickness, and meibography results 10 weeks later. There were greater than 50% reductions in scores in eyelid compression and ocular surface staining grading systems, and non-invasive tear film break-up time and tear meniscus height were also increased. The patients showed improvement in biomicroscopic signs of blepharitis or blepharoconjunctivitis and had no treatment-related adverse effects (see pages 89-94).

Kavadarlı and Mutlu surveyed 161 ophthalmologists in their study, "Effects of the COVID-19 Pandemic on Turkish Ophthalmologists." Half of the study group, which included mostly specialist ophthalmologists, stated that their weekly working hours were reduced, half were attending routine outpatient clinic appointments, 52.8% were working in COVID-19-related units, 67.1% continued emergency surgeries only, and 52% stated that the follow-up of patients with chronic eye disease was disrupted. Sixty-four percent of the ophthalmologists considered themselves in a high-risk group and 99% reported using a mask during examinations. Ninety-one percent of the respondents had high anxiety about the pandemic and the most common cause of concern (83%) was the risk of infecting family members (see pages 95-101).

Eales' disease is an idiopathic occlusive retinal vasculitis that usually occurs in young men and affects the peripheral retinal veins. The disease may present with periphlebitis with or without arthritis, peripheral capillary non-perfusion, retinal and disc neovascularization, retinal vein occlusion, vitreous hemorrhage, retinal detachment, and neovascular glaucoma. In an original study by Ersöz et al. titled "Vitrectomy Due to Vitreous Hemorrhage and Tractional Retinal Detachment Secondary to Eales' Disease", 22 eyes of 21 patients had a higher mean best corrected visual acuity (BCVA) after vitrectomy (BCVA increased in 72.7% of eyes). In multivariate linear regression analysis, final BCVA was negatively associated with preoperative or postoperative proliferative vitreoretinopathy stage C (PVR-C), preoperative detachment involving the macula, postoperative neovascular glaucoma, and longer

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preoperative disease duration. The rate of primary anatomic success was 81.8% and the final anatomical success rate was reported as 90.9%. The authors concluded that in Eales' disease, good visual outcomes can be obtained with vitreoretinal surgery if the detachment area does not involve the macula and PVR-C does not develop preoperatively or postoperatively (see pages 102-106).

In the review selected for this issue, titled "Congenital Cataracts and Its Genetics: The Era of Next-Generation Sequencing", Şekeroğlu and Utine present a detailed overview of the literature on the epidemiology, etiology, classification, and genetics of congenital cataract, with particular focus on the role of next-generation sequencing (see pages 107-113).

In the first case report of this issue, titled "Cytarabine-Induced Corneal Toxicity: Clinical Features and Relief of Symptoms with Loteprednol Etabonate 0.5% in Two Patients", Özcan and Uçakhan detected toxic keratopathy characterized by ocular discomfort, photophobia, blurred vision, and central corneal epithelial cysts in 2 patients who received high-dose cytarabine chemotherapy for acute myeloid leukemia. In vivo confocal microscopy revealed disseminated hyperreflective granular and irregular intraepithelial opacities concentrated in the basal epithelial layers. After 2-3 weeks of treatment with topical loteprednol etabonate 0.5%, both the symptoms and the epithelial microcysts on confocal microscopy had resolved (see pages 114-117).

A case report by Cespedes et al. titled "Utility of the Glabellar Flap in the Reconstruction of Medial Canthal Tumors after Mohs Surgery" presents two patients with basal cell carcinoma in the medial canthal region who underwent tumor excision by Mohs surgery followed by reconstruction with a glabellar flap alone in one case and glabellar and cheek advancement flaps in the other case (see pages 118-122).

In a case report titled "A Case of Multiple Optic Disc Pits: 21-Year Follow-up", Ceylan et al. discuss a 25-year-old female patient

with partially accommodative esotropia and two optic disc pits in the right eye and one in the left eye with 21 years of follow-up fundus photographs, visual field, spectral-domain optical coherence tomography, and multifocal electroretinography examinations (see pages 123-126).

In a study by Nikandish and Saremi titled "ANCA-Negative Churg-Strauss Syndrome Presenting as Bilateral Central Retinal Artery Occlusion: A Case Report", a 42-year-old man with bilateral central retinal artery occlusion, visual acuity at the level of hand motions in the right eye and counting fingers in the left eye, and retinal whitening and cherry red spot on funduscopy is presented. When eosinophilia was detected in addition to his right limb weakness, purpura on the right foot, and mononeuritis multiplex on electromyography, the patient was diagnosed as having Churg-Strauss syndrome according to the American College of Rheumatology diagnostic criteria and treatment with intravenous methylprednisolone 1 g/day for 3 days and cyclophosphamide was initiated. Although his systemic symptoms improved, there was no increase in visual acuity (see pages 127-130).

In the final case report, titled "Solar Retinopathy Presenting with Outer Retinal Defects Among Habitants of High Altitude", Sharma et al. described 3 patients living at high altitudes who presented during the winter months with visual field scotoma after a prolonged time in the sun. Tomography revealed discontinuity in the ellipsoid zone and outer retinal layer defects (see pages 131-133).

We hope that the articles selected for this issue will be interesting and enjoyable reading.

**Respectfully on behalf of the Editorial Board,
Banu Bozkurt, MD**