

Comments on: Clinical profile and prevalence of conjunctivitis in mild COVID-19 patients in a tertiary care COVID-19 hospital: A retrospective cross-sectional study

Dear Editor,

Recently published literature has shown that the coronavirus disease (COVID-19) can cause ocular complications such as conjunctivitis, though not necessarily in the early stages of the disease.^[1] Chen *et al.*^[2] showed that conjunctival congestion is one of the COVID-19-related ocular symptoms, which may have clinical diagnostic significance. We read the article by Sindhuja *et al.*^[3] with great interest and we must congratulate the authors for bringing out this interesting COVID-19 clinical study, probably the first large scale conjunctivitis retrospective analysis in India.

However, we have a few important observations to make and would like the authors to throw light on that. Firstly, the authors have highlighted that patient details were extracted from predesigned proforma. Is this proforma being regularly used for all COVID-19 positive admitted patients as a routine protocol or was specifically designed for this conjunctivitis study? If the proforma was specifically designed for this study, then this highlights the prospective nature of the study, but the study mentions it as a retrospective analysis. This needs clarification.

Secondly, the authors have mentioned that 12/127 had ocular complaints. Did the ophthalmologist posted in the ward for rounds also examined the remaining 115 asymptomatic patients? This is not clear in the methodology. If not, then there is a possibility that few of the patients with mild conjunctivitis may have been missed and this stands as a limitation.

Lastly, the authors have mentioned that 8/11 had conjunctival congestion. Since none of the patients had any associated signs and symptoms of conjunctivitis such as discharge, chemosis,^[3] pain, and periorbital edema, how did the authors rule out other causes of diffuse conjunctival congestion such as episcleritis, scleritis, dry eyes, and congestion due to inadequate sleep or stress on torchlight examination?

Moreover, the occurrence of conjunctivitis along with the COVID-19 symptoms can be a chance association as levels of severe acute respiratory syndrome coronavirus 2 (SARS COVID-19) was not assessed by conjunctival swab analysis.^[4,5]

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Conflicts of interest

There are no conflicts of interest.

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