

Authors' reply

Dear Editor,

We thank the readers for their interest in our article¹ and for their valuable comments.² The readers have rightly observed that including *Rhinosporidium seeberi* under Phycomycetes is wrong. We apologize for our error and thank the above readers for pointing that out. The molecular biological analysis of the organism's ribosomal DNA has proved it to be an aquatic protistan parasite.³ While reviewing the literature, we did come across the fact that Chhattisgarh is an endemic area for oculosporidiosis and many cases have been reported from that state in the last few years. We regret the error. The subcutaneous involvement mentioned in the text and Table 1 is actually the involvement of the lacrimal sac. Again the reader has rightly pointed out that recurrence is seen in both conjunctival and lacrimal sac rhinosporidiosis. However, in our study, recurrence was seen only in lacrimal sac rhinosporidiosis. This may be because the follow-up period in our study was limited. We have mentioned a low recurrence rate in comparison to Kuriakose *et al.*⁴ However, we also agree that a recurrence rate of 40% cannot be considered low.

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