



## Letter to the Editor re: “Lipemia Retinalis Diagnosed Incidentally After Laser Photocoagulation Treatment for Retinopathy of Prematurity”

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Dear Editor,

In the October 2021 issue of the Turkish Journal of Ophthalmology, Öztürk et al.<sup>1</sup> presented an interesting case of lipemia retinalis (LR) in a Turkish preterm infant diagnosed incidentally after laser photocoagulation therapy for retinopathy of prematurity. We believe that Öztürk et al.<sup>1</sup> should consider prenatally acquired human immunodeficiency virus (HIV) infection in the case in question, based on the following point. Globally, HIV infection is still a major health threat. Though HIV/AIDS cases in Turkey were recorded at a level of zero in 2020 according to World Bank data, which is compiled from officially recognized sources,<sup>2</sup> it was previously reported that the epidemiologic profile of HIV-infected individuals is changing in Turkey.<sup>3</sup> Most neonatal HIV infections are the result of vertical transmission.<sup>4</sup> The neonatal population has weaker immunity compared to adults; therefore, if they contract HIV infection, they are at greater risk of rapid disease progression, with significant morbidity and mortality rates.<sup>4</sup> Among emerging HIV-associated complications, hyperlipidemia is increasingly recognized. A substantial number of HIV-infected children were found to have persistent elevation of serum lipid levels, potentially putting them at risk for life-threatening events.<sup>5</sup> Among these events, cases of LR have been reported only

among HIV-positive adults.<sup>6</sup> Accordingly, we believe that an underlying HIV infection should be seriously considered in the case in question, and arranging for CD4 count and viral load estimations and fourth-generation antigen/antibody immunoassays in the mother and her studied preterm infant would be warranted. If these tests were to disclose HIV positivity, the presented case could be considered a novel case report of HIV-associated neonatal LR.

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