

Comparison of Retinal and Choroidal Involvement in Sarcoidosis-related Chorioretinitis Using Fluorescein and Indocyanine Green Angiography

Touka Banaee^{1,2}, MD

¹Department of Ophthalmology and Visual Sciences, University of Texas Medical Branch at Galveston, TX, USA

²Department of Ophthalmology, Mashhad University of Medical Sciences, Mashhad, Iran

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Dear Editor,

I read with interest the article by Drs El Ameen and Herbort comparing retinal and choroidal involvement in sarcoidosis.^[1] The article highlights a very important issue regarding the diagnosis of activity in posterior uveitis and the role of indocyanine green angiography (ICGA). I appreciate the beautiful work done by the authors, and I would like to share some comments and questions.

I completely agree with the authors that it is reasonable and helpful to have a quantitative basis for diagnosis and scoring of the activity in posterior uveitis, especially choroiditis, and the scoring systems for fluorescein angiography (FA) and ICGA devised by an international group of well-known uveitis specialists (Angiography Scoring for Uveitis Working Group) are reasonable options in this regard.^[2] But it seems that as the two scoring systems are for two separate modalities investigating different layers of the posterior segment, one cannot directly compare them, just as we cannot directly compare centimeters and inches or grams. They can be compared based on their rate of positivity in active cases or else their scores can be correlated with a gold standard and compared indirectly.

Another issue I would wish to raise is that considering that the ICGA scores have been purposefully doubled to match the FA scores, how can a score of 14.02 on ICGA be statistically significantly different from a score of 7.15 on FA?

Once again, I appreciate the beautiful work of the authors and hope their response will clarify the subject.

Correspondence to:

Touka Banaee, MD. 301 University Blvd. Galveston TX 77555-1106, USA.
E-mail: tobanaee@utmb.edu

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Conflicts of Interest

There are no conflicts of interest.

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