

Comments on: Incidence, clinical profile, and short-term outcomes of posttraumatic glaucoma in pediatric eyes

We read your article with great interest and would like to congratulate you for reporting the incidence, clinical profile, and short-term outcomes of posttraumatic glaucoma in pediatric eyes.^[1]

The ocular trauma classification group included the type of injury, grade, pupillary reaction, and zone of injury for grading open and closed globe injuries.^[2] Posterior extension of injury has been found to be predictive of a poor post-op visual outcome as reported in your study as well. We would like to

know if the zone of injury also correlates with the elevation of intraocular pressure (IOP). And if you could find any relationship of the mechanism of raised IOP and the time of diagnosis with the elevation of IOP?

We would also like to know about the cause of cataract in the 13 reported cases, i.e., if the cataract was trauma induced or steroid induced or if there was any breach of the anterior lens capsule and how were these cases managed.

Some anti glaucoma medications (AGM's) like prostaglandin analogs, adrenergic agonists should be avoided due to the noted adverse effects.^[3] Hence, we would like to know the treatment protocol that was followed for medical therapy before and after the surgical procedures. Could any factors be found which were independently related to surgical intervention?

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

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Access this article online	
Quick Response Code:	Website: www.ijo.in
	DOI: 10.4103/ijo.IJO_1299_19

Cite this article as: Sodhi PS, Sodhi N, Sodhi JS. Comments on: Incidence, clinical profile, and short-term outcomes of posttraumatic glaucoma in pediatric eyes. *Indian J Ophthalmol* 2019;67:1907-8.

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