

subconjunctival limbus oblique incision (SCOLI) for mature cataracts. Although the authors' results are impressive, we would like to highlight that conventional manual small-incision cataract surgery (MSICS) can also produce very good visual and refractive outcomes.

Several studies have demonstrated that MSICS is safe and effective, even in advanced or complicated cataracts. Venkatesh *et al.*^[2] described excellent visual outcomes of MSICS performed on a group of patients with brown and brunescant cataracts, with 97.1% achieving visual acuity (VA) of 6/18 or better with low complication rates. Another paper, also reported excellent outcomes in white cataracts,^[3] with 98.2% achieving corrected distance VA of 6/18 or better. MSICS has also been shown to be safe in patients with phacolytic glaucoma,^[4] demonstrating good visual outcomes with 87.9% of patients achieving good visual outcomes of 20/60 or better, while intraocular pressure was controlled without the need for long-term anti-glaucoma medications.

Although the authors reported SCOLI induces less iatrogenic astigmatism due to its supero-oblique incision,^[1] Ruit *et al.*^[5] had demonstrated that conventional MSICS can similarly reduce induced astigmatism by adopting a temporal approach. A recent Cochrane review^[6] further suggests that conventional MSICS results in less surgically-induced astigmatism compared to extra-capsular cataract extraction.

In summary, we congratulate the authors in promoting and teaching alternative techniques of cataract surgery that are safe, efficacious, and cost-effective. In conjunction with the International Agency for the Prevention of Blindness and the World Health Organization Programme for Blindness and Deafness, this is part of a strategy to reduce cataract blindness globally. We feel that it is important for clinicians to consider the option of MSICS as part of their surgical repertoire.

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Conventional manual small-incision cataract surgery

Sir,
We read with interest the article by Yang *et al.*^[1] describing good visual outcomes in manual cataract extraction via a

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