

Planned posterior assisted levitation in severe subluxated cataract: Surgical technique and clinical results

Dear Editor,

We have read with great interest the article titled, "Planned posterior assisted levitation in severe subluxated cataract: Surgical technique and clinical results".^[1] We wish to highlight a few points: General anaesthesia with its associated complications is hardly justified as a routine where local anaesthesia can be safely administered.

Statistically speaking, with a sample size of four, when the authors claim to have no posterior segment complications, the confidence interval can actually vary from 0-53%.^[2] This range is huge by itself and hence no definite conclusion regarding its safety can be made. Incidentally, the reported rates of posterior segment complications after management of a subluxated lens by Pars plana approach are Cystoid macular oedema (8%), Retinal detachment (3%) and vitreous haemorrhage (3%).^[3]

While the authors have assiduously listed out the complications of transcleral fixation of intraocular lens (IOL) scleral-fixated intraocular lens (SFIOL), they have neither mentioned the complications of Anterior chamber IOL (ACIOL),^[4] nor have they established its superiority over SFIOL.

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