



## Editorial

Dr. Md. Shahidul Islam

***“Do research. Feed your talent. Research not only wins the war on cliché, it's the key to victory over fear.”***

*-Robert McKee*

Thinking out of boundaries, weeding out the stereotypes and looking forward for well being of humanity are the motivations for researchers.

Cataract surgery is one of the commonest ophthalmic surgical procedures. Patients suffer from any form of postoperative inflammations even after an uneventful surgery. Topical nonsteroidal anti-inflammatory drugs (NSAIDs) and steroids are commonly used in the management and prevention of inflammation. Although, steroids are highly effective and affordable it may lead to vision threatening adverse effects like increased IOP. To avoid this adverse effect, NSAID may play a vital role to combat against post operative inflammation after cataract surgery.

Ocular myasthenia gravis is a subtype of myasthenia gravis where the weakness is clinically isolated to the extraocular muscles, levator, and orbicularis oculi. Ptosis and diplopia are the initial signs of the disease. In the majority of cases, progression of ocular myasthenia to its generalized form will occur within the first 2 years after ocular symptoms begin. Early diagnosis of ocular myasthenia can provide a guideline to ophthalmologist and internist to start immediate treatment and thus can prevent future myasthenia induced ocular and systemic morbidity.

Oculocardiac reflex (OCR) commonly occurs after ophthalmic procedures in children especially during strabismus surgery due to traction of the extraocular muscles or pressure on the globe. Halothane is well-tolerated, high lipid soluble, slow onset general anesthetic but not suitable for all modern anesthesia systems as it

causes respiratory depression cardiac incidents are common. On the other hand, Isoflurane is low lipid soluble, rapid onset anesthetic with good hemodynamic stability and low hepatic metabolism. Oculocardiac reflex is less common with Isoflurane compared to halothane.

Posterior dislocation of intra ocular lens (IOL) is a complication of cataract surgery with an incidence of approximately 2%. If remained untreated it may cause intraocular inflammations, secondary glaucoma, corneal edema, cystoid macular edema and even retinal detachment. Pars plana vitrectomy (PPV), removal of IOL and secondary scleral fixation of intraocular lens (SFIOL) is a novel, relatively safe and easy method with excellent visual outcome.

Bilateral optic disc swelling appears due to increased intracranial pressure (ICP), infectious/inflammatory, demyelinating, toxic-metabolic/nutritional diseases and hypertensive emergency. Disc swelling plays a vital role for diagnosis and prognosis of multiple non communicable and communicable life threatening conditions. In National Institute of Ophthalmology and Hospital neuro ophthalmology outpatient department, female patients with idiopathic intracranial hypertension were the most common group followed by intracranial space occupying lesion. In NIOH, non-communicable groups were more prevalent than communicable groups in bilateral disc swelling.

In Bangladesh, National Institute of Ophthalmology and Hospital is providing advanced ophthalmic training (long and short term) to both Government and private ophthalmologist. National Institute of Ophthalmology and hospital in collaboration with National Eye Care (NEC), DGHS, MOHFW plays a vital role to ensure international standard ophthalmological training to ophthalmologist. After receiving these training, trained ophthalmologist plays a vital role to prevent blindness and low vision in Bangladesh.

Fibrous dysplasia (FD) is a rare non-malignant condition caused by post-zygotic, activating mutations of the GNAS gene that results in inhibition of the differentiation and proliferation of bone-forming stromal cells and leads to the replacement of normal bone and marrow by fibrous tissue and woven bone. It may cause blindness because of the proximity and compression of the optic nerve by fibrous dysplasia.

Childhood ophthalmic tumors may have a significant impact on vision, morbidity and mortality. Childhood ocular, orbital and surface

tumors have different presentations when compared to these same lesions in adults. Patients may present with leukocoria (white pupil), strabismus, restriction of ocular motility, proptosis, inflammation of the eyelids or conjunctiva, vitreous hemorrhage etc. Therefore, early diagnosis and immediate treatment may save vision and life.

This issue of Journal of National Institute of Ophthalmology has 6 original articles with one case report and one review article. We, the editors hope that this issue may open some knowledge doors for medical professionals.



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