Research

Tertiary Glaucoma Care in the VA Health Care System

Lee and coauthors investigated the rate of glaucoma surgery within the Veterans Affairs (VA) health care system. In a database review of fiscal year 2016 data, 490,926 veterans receiving care at 136 VA medical centers were given a glaucoma-related diagnosis. Data showed a 3.39-fold to 19.11-fold higher rate of glaucoma laser and filtering surgery use in care delivery models that included ophthalmologists compared with centers that included optometrists only. Their findings suggest that a disparity exists in glaucoma surgery rates across the VA health care system and that different care delivery models play a role, although outcomes of glaucoma care for the different models of eye care delivery were not analyzed.

In Invited Commentary

Preclinical Alzheimer Disease With OCT Angiographic Findings

O’Bryhim and coauthors evaluated if study participants with biomarker-positive findings for preclinical Alzheimer disease have retinal microvascular alterations detectable by optical coherence tomographic (OCT) angiography compared with control individuals with biomarker-negative findings. In a single-center, case-control study, the foveal avascular zone was larger in participants with preclinical Alzheimer disease determined by the presence of β-amyloid biomarkers (mean [SD], 0.364 [0.095] mm²) compared with those without preclinical Alzheimer disease (mean [SD], 0.275 [0.060] mm²). While these results warrant longitudinal studies in larger cohorts, the authors suggest that foveal avascular zone enlargement may offer a noninvasive, cost-efficient, and rapid screen to identify preclinical Alzheimer disease.

In Invited Commentary

Loss to Follow-up in Patients With Anti-VEGF Injections

Obeid and coauthors determine what percentage of patients with neovascular age-related macular degeneration (nAMD) are lost to follow-up after receiving intravitreal anti-vascular endothelial growth factor (anti-VEGF) injections. Within a cohort study of data from 9007 patients with nAMD, the percentage of patients lost to follow-up after an anti-VEGF injection was greater than 20% when choosing at least 12 months as the interval with no subsequent follow-up visit. Older age, race, lower regional adjusted gross income, greater distance to clinic, and unilateral eye disease were risk factors associated with loss to follow-up. These results suggest that a sizable number of patients with nAMD are lost to follow-up after anti-VEGF injections and that several risk factors might help to identify patients who are at high risk of being lost to follow-up.

In Invited Commentary

Timing of Intervention in CNLDO

Sathiamoorthi and coauthors evaluated the trends for spontaneous resolution in congenital nasolacrimal duct obstruction (CNLDO). In a large population-based study of 1998 infants with CNLDO, the rate of spontaneous resolution of CNLDO plateaued after age 9 months, and the success rate of the initial probing declined after age 15 months. The authors propose that surgical intervention may be appropriate during a new time frame, between age 9 and 15 months, capitalizing on the condition’s changing rate of resolution as well as the declining success rate of the initial probing.

In Invited Commentary

Opinion

Viewpoint

Correlation of Central Retinal Thickness and Visual Acuity in Diabetic Macular Edema

GG Deák and Coauthors

Clinical Review & Education

JAMA Ophthalmology Clinical Challenge

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Research Letter

Utility of Deep Learning Methods for Referability Classification of Age-Related Macular Degeneration

P Burlina and Coauthors

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V Sun and Coauthors

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Measuring Optic Nerve Sheath Diameter as a Proxy for Intracranial Pressure

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