CORRESPONDENCE





Effect of surgical intraocular pressure lowering on retinal structures —nerve fibre layer, foveal avascular zone, peripapillary and macular vessel density: 1 year results

Mehrdad Farrokhi¹ · Milad Ebrahimi ¹ · Farnoosh Peykanpour³

Received: 4 September 2019 / Accepted: 11 October 2019 / Published online: 13 November 2019 \odot The Royal College of Ophthalmologists 2019

To the Editor:

We recently read a published paper by Ch'ng et al. [1] entitled "Effect of surgical intraocular pressure lowering on retinal structures nerve fibre layer, foveal avascular zone, peripapillary and macular vessel density: 1 year results". In this study the above-mentioned authors evaluated the effect of surgical intraocular pressure (IOP) lowering on peripapillary retinal nerve fibre layer thickness (RNFL), fovea avascular zone (FAZ), peripapillary and macular vessel density (VD) in glaucoma using optical coherence tomography angiography (OCT-A). In this regard, they performed serial OCT-A scans in 40 eyes with open-angle glaucoma before glaucoma surgery, and at 1-month, 3-month, 6-month and 12-month post-operatively and assessed IOP, RNFL, FAZ and VD at the same times. Because they evaluated the IOP, RNFL, FAZ and VD in the same patients in five time-points of assessment, therefore their comparisons are in category of dependent comparisons. As stated in the statistical analysis section, Table 2 and Fig. 3 of the article, the authors used one-way analysis of variance (ANOVA) and Kruskal Wallis tests to compare means of IOP, RNFL, FAZ and VD before glaucoma surgery, at 1-month, 3-month, 6-month and 12-month postoperatively. They also used Post-hoc tests for pairwise comparisons of measurements between the visits. The authors found that macular vessel density shows a "delayed response" to surgical IOP reduction; filtering surgery can

Milad Ebrahimi milad.labsc@yahoo.com

¹ Medical Student, Isfahan University of Medical Sciences, Isfahan, Iran

² University of Shahed, Tehran, Iran

³ Qom University of Medical Sciences, Qom, Iran

restore near-normal macular vessel densities and filtering surgery causes a significant transient increase in FAZ area, which subsequently decreases to normal values within 12 months after surgery. One way ANOVA and Kruskal Wallis tests are used to determine statistically significant differences of continuous variable with parametric and non-parametric distribution between two or more independent groups, respectively [2]. Therefore, after investigation the normality of numerical data, the authors must use Repeated-Measures ANOVA or Friedman test and paired ttest or Wilcoxon signed-rank test to compare the means of IOP, RNFL, FAZ and VD between five and two time-points of measurement (i.e., before glaucoma surgery, 1-month, 3-month, 6-month and 12-month post-operatively), respectively.

Taken together, analysis of differences of IOP, RNFL, FAZ and VD between five and two time points with appropriate statistical tests is strongly suggested to improve the reliability of results of this valuable research.

Compliance with ethical standards

Conflict of interest The authors declare that they have no conflict of interest.

Publisher's note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

References

- Ch'ng TW, Gillmann K, Hoskens K, Rao HL, Mermoud A, Mansouri K. Effect of surgical intraocular pressure lowering on retinal structures—nerve fibre layer, foveal avascular zone, peripapillary and macular vessel density: 1 year results. Eye (London, England). 2019. [Epub ahead of print].
- Gaddis ML. Statistical methodology: IV. Analysis of variance, analysis of co variance, and multivariate analysis of variance. Acad Emerg Med. 1998;5:258–65.