Dr Tsakok endeavoured to prove his point by applying his test to data that appears in several publications.^{1,6,7} According to his findings, we failed to detect significant differences in the total number of breaks and in the best-corrected visual acuity between scleral buckling and vitrectomy 6 months after surgery (Table 3¹).

We used the widely applied statistical package SPSS 11.5 (Chicago, IL, USA). The data were tested for normality of distribution using the Shapiro-Wilks test, and the equality of variance was confirmed using Levene's test. SPSS computes two-test statistics for the two-sample *t*-test: one for cases in which the variances in both groups are equal, and the other for cases in which they differ. If the variances differed significantly, we implemented the latter test in conjunction with the relevant significance values. Furthermore, due to the retrospective nature of our study, we stressed that the findings might not be generally applicable.¹ According to currently widely accepted standards,^{8,9} we are still convinced that the statistical methodology employed in our study was appropriate.

We agree with Dr Tsakok respecting the importance of the Behrens-Fisher problem. According to our literature search, the Tsakok test has as yet neither generally been recognized within the scientific community nor widely applied for the solution of comparable statistical problems. It may well prove to be superior to the statistical tests currently applied to clinical data, but it must first be validated by independent statisticians.

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Sir, Response

In the Tables of our article, we gave the values of CRP, IL-6, and VCAM-1 as medians and interquartile ranges due to the skewed distribution of these markers. Giving the values in actual serum concentrations enables other investigators to compare their findings to ours. After log transformation to correct skewness, these variables conformed in a satisfactory manner to Normal distribution and were therefore analysed with parametric tests. We did not give the values of the means and standard deviations of the log transformed values because it would not be clinically useful. We trust the medians and interquartile ranges are enough to describe the levels and variances of the measured values.

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Sir,

Advantages of modular phacoemulsification training

Modernising Medical Careers will require rapid and effective training of tomorrow's ophthalmologists, but a