

confocal microscopy in a patient with presumed cytomegalovirus corneal endotheliitis. *Am J Ophthalmol* 2007; **143**: 715–717.

- 10 Chee SP, Bacsal K, Jap A, Se-Thoe SY, Cheng CL, Tan BH. Clinical features of cytomegalovirus anterior uveitis in immunocompetent patients. *Am J Ophthalmol* 2008; **145**: 834–840.

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Sir,

The surgical outcome and personality change in a child with congenital cataract after multifocal intraocular lens implantation

A 7-year-old girl first presented in January 2007 with bilateral cortical cataract combined with high hyperopia and astigmatism. The refractions were +3.75 spherical diopter (DS)/–1.75 diopter of cylinder (DC) × 175 in the right eye (OD), and +4.25 DS/–2.25 DC × 170 in the left eye (OS). The best-corrected visual acuity (BCVA) was 20/32 in either eye (OU). Spectacles correction and CAM vision-stimulator treatment once a week were prescribed, and BCVA in OU reached 20/25 after 5 months. However, the cortical opacity (OU) aggravated gradually. As the BCVA decreased to 20/40 OD and 20/70 OS in January 2009, bilateral simultaneous phacoemulsification with multifocal IOLs-Tecnis MF (ZM900, AMO) implantation OU was performed in February. The refractions were +1.25 DS/–2.25 DC × 170 OD and +1.0 DS/–2.75 DC × 175 OS 4 weeks after surgery, and the BCVA was 20/30 OU. New spectacles were prescribed and 6 months later the BCVA reached 20/20 OU without performing the CAM treatment after surgery.

According to the statement of the parents, the girl had become introverted and shrinking while vision decreased. However, the girl is vigorous now and is willing to participate in outdoor activities. The Children's Visual Function Questionnaire (CVFQ) developed by Felius *et al* is an instrument designed for parents of children aged ≤7 years to assess the influence of children's visual disorders on themselves and on their families.¹ The CVFQ was filled by the girl's parents before and 6 months after surgery, and the CVFQ total score and subscale scores represented better results (higher scores) after surgery, except for the general health subscale (Table 1). We thought that in the assessment of cataract in children, not only the visual acuity but also the quality of children's life is the concern at the time of surgical intervention. In recent years, new surgery techniques, designed IOLs, and IOL materials have proved to yield good results in senile cataract surgery.

Table 1 The subscale scores of the Children's Visual Function Questionnaire

	Pre-operation	Post-operation
General health	0.75	0.75
General vision	0.2	0.4
Competence	0.6	0.95
Personality	0.89	0.97
Family impact	0.25	0.54
Treatment	0.25	0.75
Total score	0.54	0.82

These advances have also increased the success rate of cataract surgery in children.^{2,3} In this case, the cataract extraction and multifocal IOL implantation were successful in treating the amblyopia and in reshaping the patient's personality.

Conflict of interest

The authors declare no conflict of interest.

References

- 1 Felius J, Stager Sr D, Berry P, Fawcett SL, Stager Jr DR, Salomão SR *et al*. Development of an instrument to assess vision-related quality of life in young children. *Am J Ophthalmol* 2004; **138**: 362–372.
- 2 Jacobi PC, Dietlein TS, Konen W. Multifocal intraocular lens implantation in pediatric cataract surgery. *Ophthalmology* 2001; **108**: 1375–1380.
- 3 Wilson Jr ME, Bartholomew LR, Trivedi RH. Pediatric cataract surgery and intraocular lens implantation: practice styles and preferences of the 2001 ASCRS and AAPOS memberships. *J Cataract Refract Surg* 2003; **29**: 1811–1820.

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Sir,

Myopic pre-foveoschisis: an earlier stage of myopic foveoschisis documented by optical coherence tomography

Myopic foveoschisis (MF) occurs in 9–34% of highly myopic staphylomatous eyes,^{1–3} which may be associated with or may progress to foveal detachment or macular hole, which in turn are associated with decreased visual