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**Re: Lam et al.: Postoperative outcomes of idiopathic epiretinal membrane associated with foveoschisis**

Recently, Lam et al. [1] concluded that patients with macular pucker and foveoschisis had a higher risk of postoperative macular oedema. Since only 5/17 cases had baseline fluorescein angiography it is unclear how they distinguished foveoschisis due to tangential traction, versus cystoid macular edema (CME). Is it possible that postoperative CME was recurrent and not new? In our experience, resolution of foveoschisis takes much longer than the relatively swift resolution in 25% and partial resolution in 68.8% of cases at 1 month, so perhaps CME was a confounding factor. Indeed, Figure 3 appears more like exudative cyst than 'foveoschisis'.

Previous studies [2] found that nearly half of patients with macular pucker had multiple centers of retinal contraction which were associated with a higher prevalence of intraretinal cysts and greater macular thickening. Was en face OCT performed to determine the number of contraction centers and its relationship to foveoschisis as well as outcomes of surgery? Additionally, anomalous PVD with vitreoschisis [3] and vitreo-papillary adhesion [4] may be important in the pathogenesis of macular pucker. Did the authors correlate these with foveoschisis and postoperative outcomes?

There was no significant difference in postoperative visual acuity (VA) between the foveoschisis and control groups, but this may not be the best outcome measure in macular pucker surgery. Studies [5] have shown that quantifying contrast sensitivity function (CSF), distortions (3-D Threshold Amsler Grid), and 3-D macular volume (as opposed to 2-D central thickness) more completely characterizes the benefits of surgery. Specifically, VA, CSF, and macular thickness all improved (34%, 35%, 33%, respectively;  $P < 0.001$  for each) postoperatively, but did not normalize relative to control (fellow) eyes. [5] In fact, only the Distortions Index (92% improved,  $P < 0.01$ ) and macular volume normalized, demonstrating the discriminating power and sensitivity of these outcome measures of surgical success. What is not known, however, is the relationship to 'foveoschisis'.

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A graduate of Cornell University and Yale University School of Medicine, Dr. Gui trained at the prestigious Jules Stein Eye Institute at UCLA for ophthalmology and vitreoretinal surgery. He has received numerous awards including the Jules Stein Eye Institute Fellow Excellence in Research Award, has published multiple original articles and letters in peer-reviewed journals such as *Ophthalmology Retina*, *British Journal of Ophthalmology*, *Retinal Cases and Brief Reports*, and *Experimental Eye Research*, and has delivered podium presentations at various international meetings, most recently at MacULart in Paris, France.

He currently practices as a vitreoretinal surgeon and specialist at the VMR Institute for Vitreous Macula Retina in Huntington Beach, California and is honored to embrace the tradition of excellence for which the institute stands.



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