

Brittle cornea syndrome: current perspectives [Response to Letter]

This article was published in the following Dove Press journal:
Clinical Ophthalmology

Andrew Walkden^{1,2}
Emma Burkitt-Wright^{3,4}
Leon Au^{1,2}

¹Manchester Royal Eye Hospital, Manchester University Foundation Trust, Manchester, UK; ²Medical Academic Health Sciences Centre, University of Manchester, UK; ³Genetic Medicine, Institute of Human Development, Faculty of Medical and Human Sciences, University of Manchester, Manchester, UK; ⁴Genetic Medicine, St Mary's Hospital, Central Manchester University Hospitals NHS Foundation Trust, Manchester Academic Health Science Centre, Manchester, UK

Dear editor

We would like to thank Srirampur and colleagues for their comments with regards to our review article on Brittle Cornea Syndrome, and we are delighted to learn that they agree with our approach to managing a rare, complex and devastating condition.

We thank them for highlighting the difficulties associated with suturing such thin and friable corneal tissue, and this issue has been touched upon by other colleagues within the literature.¹⁻³ Your comments on post operative management in terms of suture rotation and steroid titration are interesting and well thought out, and the aim of increasing stromal collagen deposition and more effective healing should be encouraged. We will certainly apply these principles in future cases.

We commend our colleagues from Hyderabad, India for their valuable comments and we would welcome any further thoughts from other colleagues around the world that have had the opportunity to manage such a rare and challenging condition.

Disclosure

The authors report no conflicts of interest in this communication.

References

1. Kaufmann C, Schubiger G, Thiel MA. Corneal cross-linking for brittle cornea syndrome. *Cornea*. 2015;34(10):1326–1328. doi:10.1097/ICO.0000000000000577
2. Natarajan R, Shah GY, Rao SK, Padamanabhan P. Penetrating keratoplasty as a globe-saving procedure in fragile cornea. *Cornea*. 2003;22(2):164–165.
3. Izquierdo L Jr., Mannis MJ, Marsh PB, Yang SP, McCarthy JM. Bilateral spontaneous corneal rupture in brittle cornea syndrome: a case report. *Cornea*. 1999;18(5):621–624.

Correspondence: Andrew Walkden
Manchester Royal Eye Hospital,
Manchester University Foundation Trust,
Oxford Road, Manchester M13 9WL, UK,
Tel +44 779 215 3269
Email walkdenandrew@gmail.com

Dove Medical Press encourages responsible, free and frank academic debate. The content of the Clinical Ophthalmology 'letters to the editor' section does not necessarily represent the views of Dove Medical Press, its officers, agents, employees, related entities or the Clinical Ophthalmology editors. While all reasonable steps have been taken to confirm the content of each letter, Dove Medical Press accepts no liability in respect of the content of any letter, nor is it responsible for the content and accuracy of any letter to the editor.

Clinical Ophthalmology

Dovepress

Publish your work in this journal

Clinical Ophthalmology is an international, peer-reviewed journal covering all subspecialties within ophthalmology. Key topics include: Optometry; Visual science; Pharmacology and drug therapy in eye diseases; Basic Sciences; Primary and Secondary eye care; Patient Safety and Quality of Care Improvements. This journal is indexed on PubMed

Central and CAS, and is the official journal of The Society of Clinical Ophthalmology (SCO). The manuscript management system is completely online and includes a very quick and fair peer-review system, which is all easy to use. Visit <http://www.dovepress.com/testimonials.php> to read real quotes from published authors.

Submit your manuscript here: <https://www.dovepress.com/clinical-ophthalmology-journal>