Dear editor

We are writing to you regarding the recent publication in Clinical Ophthalmology titled “Personality Traits Associated with Treatment Choice with an Explicit Statistical Prediction After an Explanation in a Negative Context: A Study in Patients with Glaucoma” by Kodaka et al. The study presented in this article provides valuable insight into the relationship between personality traits and treatment choice in glaucoma patients. The findings regarding the influence of framing effects on decision-making, as well as the relationship between personality traits and treatment certainty, are particularly interesting. The authors’ exploration of the impact of positively and negatively framed explanations on patient decisions, as well as the role of conscientiousness and neuroticism in treatment choice, adds significant value to the field of ophthalmology.

However, we would like to raise a few points for consideration. This study has some weaknesses that need to be noted. First, the relatively small sample size and the study being conducted in only one hospital may limit the generalizability of the findings. Further research with a larger and more diverse patient population is needed to validate the results. Also, the use of questionnaires to evaluate patients’ personality may have limitations in portraying a comprehensive picture of personality. Furthermore, this study did not consider other factors that might influence treatment decisions, such as social, economic or cultural factors. Lastly, this study did not provide in-depth insight into the psychological mechanisms behind therapeutic decision-making, which could be an interesting research area to explore further.

To improve the quality of this study, recommendations for improvement may include several things. First, an increase in sample size and inclusion of patients from different hospitals or locations is needed to expand the generalizability of the findings. In addition, the use of questionnaires to evaluate personality can be expanded by considering more comprehensive and valid personality assessment methods. Future research could also expand the scope to include social, economic and cultural factors that may influence treatment decisions. In addition, further in-depth research into the psychological mechanisms behind therapeutic decision-making may provide greater insight. Cross-disciplinary collaboration between ophthalmology and psychology may also provide a more comprehensive perspective. Thus, future research is expected to provide a better understanding of the factors that influence the treatment decisions of patients with glaucoma.

We believe that this study has the potential to stimulate further research in this area and contribute to the development of a more patient-centered approach to treatment decision-making in glaucoma and other eye conditions.
Disclosure
The authors report no conflicts of interest in this communication.

References