

Posterior Vitreous Detachment and Its Role in the Evolution of Dry to Wet Age Related Macular Degeneration [Letter]

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Dear editor

I have read the paper by Anastasia Bakaliou et al on Posterior Vitreous Detachment and Its Role in the Evolution of Dry to Wet Age Related Macular Degeneration.¹ This study provides new information that vitreomacular adhesion is not the cause of age-related macular degeneration but rather posterior vitreous conditions which are the cause with intense vitreoretinal traction causing the posterior vitreous vessels and retina to experience various paravascular abnormalities which result in damage to eye tissue.²

The study conducted by Anastasia Bakaliou et al showed that eyes with exudative Age-Related Macular Degeneration (AMD) had quite obvious Posterior Vitreous Detachment (PVD), and the rest only had central Vitreomacular Adhesion (VMA) and all correspondents with VMA abnormalities centrally develops into exudative AMD.¹ This is due to posterior vitreous detachment, which separates the vitreous from the retina, which is very age related. At birth, the vitreous is firmly attached to the retina instead of the PVD. Weakening of the vitreoretinal adhesion will initially lead to partial PVD, and then to complete PVD.³

The study conducted by Anastasia Bakaliou et al examined respondents using B-scan ultrasonography and Optical Coherence Tomography (OCT). The correspondents in this study were patients diagnosed with AMD, patients with normal eyes, PVD patients and VMA patients. The tool used to determine the development of exudative AMD and non-exudative AMD is Fundus Fluoroangiography (FFA).¹ I recommend that researchers determine the size, number, and density of vitreous hyperreflective particles in the posterior vitreous area as well as the internal limiting membrane, p. this will assist in the evaluation of vitreal cellular infiltration on OCT examination.⁴ In addition, OCT examination is also able to predict the sensitivity, specificity, and also the value of the macula to detect complete PVD.³

In conclusion, I agree that vitreomacular adhesions have a close relationship with the incidence of exudative and non-exudative AMD, where the development of non-exudative eyes into exudative AMD tends to be lower in eyes with complete PVD.¹ However, it should be noted that patients with pre-existing PVD may have a lower risk of experiencing iatrogenic tears, so the accuracy of the diagnosis of PVD by OCT needs to be studied more deeply.³ Accurate, because some patients with uveitis are refractory to topical steroid therapy resulting in ocular inflammation. I recommend a future prospective study with a larger sample size to support the potential protective role of the posterior vitreous detachment in the evolution of eye disease.⁴

Disclosure

The author reports no conflicts of interest in this communication.

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<https://doi.org/10.2147/OPTH.S413232>