

Editorial

The Value of Case Studies

This edition of the AOJ contains four case reports, each very different from the others but they all attest to the value of presenting and publishing case studies. These can be of particular value in several ways.

Firstly, publication of rare cases allows for a data base to be developed. Documentation of these cases can provide data for a more comprehensive review of the condition and its occurrence within the population. The very interesting case study by Sommerville McAlester and Kelly (Temperature – A Contributing Factor in a Case of Superior Oblique Palsy) will also alert the readers of the AOJ to possible pathology when they may come across a similar ‘throw away line’ from a patient and may assist the patient by the clinician’s understanding of the possible association with multiple sclerosis. The simple ‘ice test’ is one that we can readily use in such cases.

The paper by Dirani, Chamberlain, Garoufalos, Chen, Guymer and Baird (Discordant Unilateral Myopia in Adult Female Monozygotic Twins) is another example of the value of recording a rare example of an ocular anomaly. In what appears to be a first report of a significant refractive error in only one of a pair of monozygotic twins, in the absence of any other apparent anomalies, again causes us to reflect on our understanding of human physiology. As the authors postulate, this may have been due to intrauterine factors, however, the presence of strabismus in each of that twin’s children only adds to the conundrum (although, of course, we don’t know how the father may have contributed his genes to this).

Publication of rare and unusual cases may eventually aid in the understanding of the pathogenesis of these conditions and highlights need for observation and good history taking.

The cases presented by Vassallo, Mancuso and Harper (Two Cases of Valsalva Retinopathy Treated with Nd:YAG Laser Hyaloidotomy) again add to the literature on a particular condition but they also provide a context to learn more about the pathophysiology of the eye, vision and binocular function. As with the Sommerville McAlester and Kelly case study, a simple comment from the patient’s history (such as coughing or sneezing) will alert the clinician to the possible causes of the patient’s retinopathy. Finally, with the ever increasing areas of practice that orthoptists now need to understand, they can provide the context to

help us understand new treatments, such as Nd:YAG laser hyaloidotomy.

The report by Leone, Georgievski and Koklanis (The Speed of Emmetropia) also provides an opportunity to review basic sciences (in this case physiological optics) and normal development by putting these in the context of a case study (a person!) so that they become more relevant and more easily understood. They can also provide evidence that, in many cases, unnecessary treatment may be counterproductive when there is no evidence (in this case no strabismus and only minor anisometropia) that any pathology or potential pathology exists.

I hope that the readers of the AOJ will be alerted not only to the possibility of an unusual pathology from these presentations but, when they see a patient that they find interesting or unusual, they will also consider presenting the case for publication. We can all contribute to our profession in this way.

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