

Review of: "The Effect of Early Bilateral Sequential Phacovitrectomy for Terson's Syndrome on Neurorehabilitation"

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Potential competing interests: No potential competing interests to declare.

This paper describes one (1) case where immediate sequential bilateral phacovitrectomy was performed in a case of bilateral Terson's syndrome after subarachnoid haemorrhage. The report is interesting but could benefit from some adjustments

The authors conclude that the bilateral eye surgery was beneficial for the rehabilitation of the patient. Although a reasonable assumption, a unilateral operation also could have provided improved visual quality to support rehabilitation while avoiding the risk of a bilateral vision-threatening complication. In my opinion, the authors could have analysed this in more detail.

As complication risks after phacovitrectomy for Terson's syndrome (ref 9) is clearly larger than after cataract surgery, a thorough balancing of risks and advantages with operating both eyes in the same session must be done. A discussion about risk management for immediate sequential bilateral intraocular procedures in general could include references from the growing literature on immediate sequential bilateral cataract surgery, nowadays more accepted but still not uncontroversial. Accuracy of refractive outcome is sometimes suggested as a reason to perform regular cataract surgery on separate occasions for each eye. The authors could go more in detail how this case was handled with regard to preoperative biometry and give data on planned postoperative refraction in relation to resulting postoperative refraction.

Finally, in a paper promoting immediate sequential bilateral intraocular surgery it would also be prudent to touch upon basic steps for minimizing risks with immediate sequential bilateral intraocular procedures, including but not limited to instrument handling, sterilization routines and procedures to avoid confusion regarding which side is operated upon. Literature on cataract surgery is relevant also here.