

AUTHORS' REPLY

Dear Sir,

We are grateful for this comment⁽¹⁾ on our paper "Optic neuritis in Singapore".⁽²⁾ We did, however, state in our introduction that the Optic Neuritis Treatment Trial (ONTT) carried out in USA was not relevant to the situation we encounter in Singapore. We accept that the reports by Lin et al from Taiwan and Wakakura et al from Japan, as quoted by Du and Song, only enrolled idiopathic cases,⁽¹⁾ but there are no other significant Asian papers upon which to make any comparison or comment.

With regard to the age of our patients, they had a peak incidence between 31 and 40 years. We accept that there is a potential problem with the differential diagnosis between optic neuritis (ON) and ischaemic optic neuropathy (ION) in older patients, but with our experience in this area and as recently published in this journal,⁽³⁾ we are unlikely to have been in error with the diagnosis of ON and ION.

In reply to Du and Song's query regarding a possible viral aetiology in our ON patients, we do not have any confirmatory laboratory evidence of the diagnosis being made if a viral illness was present two or three weeks before the onset of the ON.

In our cases of bilateral ON, all patients complained of visual loss in both eyes and were found to have reduced acuity and visual field defects. We agree that further studies on Asian ON are required.

Yours sincerely,

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