Risk of Refractive Errors in Regressed Retinopathy of Prematurity in Emmetropic Infants

When retinopathy of prematurity regresses, as it does in most cases, these children are typically reevaluated several months later. If a cycloplegic refraction is normal, there is a wide variety of practice patterns to address when these children should be reexamined. An unanswered question is whether the children remain at high risk of developing significant refractive errors.

In this issue, Morrison et al. found that the risk of developing ametropia in these children is similar to that of the general population. They suggested that these children can have a follow-up ocular examination by their pediatrician at 3 to 4 years of age. The authors’ study findings and recommendations for these children with regressed retinopathy of prematurity would certainly reduce the need for several ocular examinations by the pediatric ophthalmologist during the first 2 to 3 years of life.

However, further prospective studies are necessary to corroborate the authors’ findings in this study before recommendations that differ from the current practice patterns for these children can be made.

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Editor

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