Blasts within the developing retina. It is the most common primary intraocular malignancy of childhood. Most cases occur in children younger than six years of age.

The most common presenting symptoms of retinoblastoma are leukocoria (a white pupil), IFH (intraocular fluid on red), or loss of vision. Retinoblastoma can be hereditary.

Retinal dystrophies – Retinitis pigmentosa (RP)
A group of hereditary retinal conditions that cause degeneration of the retina. Retinal cells are among the most specialised cells in the human body and depend on a number of unique genes to create vision. A disease-causing mutation in any one of these genes can lead to vision loss. RP results from a large number of gene defects, of which around a hundred have been found so far. RP can be passed to succeeding generations by one of three genetic inheritance patterns: autosomal dominant, autosomal recessive, or X-linked inheritance. RP causes the degeneration of photoreceptor cells from the outer edges of the retina, causing a progressive loss of peripheral vision, night blindness and reduced or absent electroretinogram (ERG) recordings.

The following list presents the current evidence on back of the eye treatments, as well as reviews which are planned or underway. All Cochrane reviews and protocols are completed using strict methodology and are peer-reviewed at both protocol and review stage. They are published in The Cochrane Database of Systematic Reviews, one of several databases in The Cochrane Library.

Published reviews
A published review follows a structured format detailing, among other things, methods used, inclusion/exclusion criteria, search strategies for finding randomised controlled trials, and meta-analysis (where performed). CEVG-published reviews relevant to back of the eye treatments are:

- Antioxidant vitamin and mineral supplements for age-related macular degeneration
- Antioxidant vitamin and mineral supplements for preventing age-related macular degeneration
- Ginkgo Biloba extract for age-related macular degeneration
- Interventions for acute central retinal artery occlusion
- Interventions for asymptomatic retinal breaks and lattice degeneration for preventing retinal detachment
- Laser photocoagulation for choroidal neovascularisation in pathologic myopia
- Non-steroidal anti-inflammatory agents for treating cystoid macular oedema following cataract surgery
- Photodynamic therapy for neovascular age-related macular degeneration
- Radiotherapy for exudative age-related macular degeneration
- Pars plana vitrectomy for diabetic macular oedema
- Pharmacotherapy for preventing proliferative vitreoretinopathy in retinal detachment surgery
- Statins for age-related macular degeneration
- Sub-threshold laser treatment for diabetic maculopathy
- Surgical interventions for repairing simple rhegmatogenous retinal detachments
- Tamponade in surgery for retinal detachment associated with proliferative vitreoretinopathy
- Traditional Chinese medicine for retinitis pigmentosa.

Published protocols
A published protocol outlines the background, rationale and methods of the review. CEVG-published protocols relevant to back of the eye treatments are:

- Antiangiogenic therapy with anti-VEGF modalities for neovascular age-related macular degeneration
- Haemodilution treatment for retinal vein occlusion
- Interventions for acute retinal necrosis
- Intravitreal steroids for macular oedema in diabetes
- Laser photocoagulation for neovascular age-related macular degeneration
- Surgical implantation of steroids with antiangiogenic characteristics for treating exudative macular degeneration.

Access to Cochrane systematic reviews
The Cochrane Library is available by subscription, either on CD-ROM or via the internet. Residents in a number of countries, including Australia, New Zealand and South Africa, can access the Library free of charge through a ‘national provision’. Higher Education and Further Education residents can access the Library using an Athens password.

Further information
You can either visit the CEVG website at www.cochraneeyes.org or email Anupa Shah, Review Group Co-ordinator at cevg@lsehm.ac.uk