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Vitamin D deficiency in antiphospholipid syndrome

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Sir,

We read with interest the article titled “Antiphospholipid syndrome is an important modifiable risk factor of stroke in the young” by Khan.[1] We appreciate the author's effort and research work. We would like to highlight a few points regarding ocular findings and the role of vitamin D supplementation in antiphospholipid syndrome (APS). Ophthalmic manifestations of APS are transient monocular blindness, branch retinal artery occlusion, central retinal artery, and vein occlusion and choriocapillary occlusion. Iritis, scleritis, keratitis, vitritis, posterior scleritis, retinal detachment, occipital lobe ischemia, and migraine-like disturbance have also been reported.[2] Tugcu *et al*.[3] reported a case of nonarteritic anterior ischemic optic neuropathy as the presenting manifestation of APS. In our neuro-ophthalmological clinical practice, we observed a recovered case of stroke in a young person due to APS, presenting with residual permanent homonymous hemianopia. Khan[1] has highlighted the importance of developing a research tool to ameliorate and prevent APS-induced vascular brain damage. Vitamin D deficiency is common among APS patients and it is associated with clinically defined thrombotic event.[4] Hypovitaminosis D may have a complex origin in APS and may be part of a mosaic of factors that contribute to autoimmunity rather than a consequence of chronic disease and treatment. To conclude, the prognostic value of vitamin D deficiency and therapeutic value of supplementation in APS patients should be clarified by prospective studies.

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Conflicts of interest

There are no conflicts of interest.

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