

## Footnotes and Financial Disclosures

Originally received: January 18, 2016.

Final revision: March 17, 2016.

Accepted: March 22, 2016.

Available online: May 6, 2016.

Manuscript no. 2016-130

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Financial Disclosure(s):

The author(s) have no proprietary or commercial interest in any materials discussed in this article.

Supported by the Basic Science Research program through the National Research Foundation of Korea funded by the Ministry of Education (NRF-2015R1D1A1A01059630), Seoul, Korea. The funding organizations had no role in the design or conduct of this research.

Author Contributions:

Conception and design: Sung, Heo, Park

Data collection: Sung, Kang, Park

Analysis and interpretation: Sung, Kang, Park

Obtained funding: Not applicable

Overall responsibility: Sung, Heo, Park

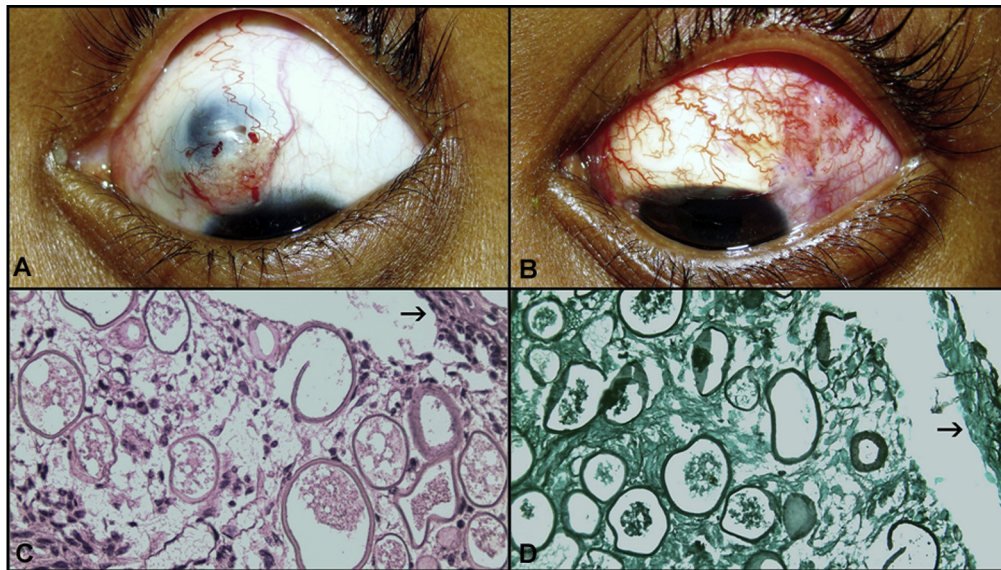
Abbreviations and Acronyms:

**CI** = confidence interval; **CNTG** = Collaborative Normal Tension Glaucoma; **D** = diopter; **dB** = decibel; **HR** = hazard ratio; **IOP** = intraocular pressure; **MD** = mean deviation; **NTG** = normal-tension glaucoma; **ONH** = optic nerve head; **PPA** = parapapillary atrophy; **RNFL** = retinal nerve fiber layer; **SD** = standard deviation; **SE** = spherical equivalent; **TD** = total deviation; **VF** = visual field.

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## Pictures & Perspectives



### Scleromalacia Perforans from Long-Standing Bulbar Conjunctival Rhinosporidiosis

A 12-year-old child presented with a 6-month old painless, reddish-blue swelling superior to the upper limbus (Fig 1A). Scleral thinning with uveal show and a conjunctival mass with dot-like, yellowish-white surface excrescences were noted. Excision with a donor sclera patch graft was performed (Fig 1B). Histopathology showed partially separated squamous metaplastic epithelium (Fig 1C–D, arrows), edematous stroma, and numerous thick walled sporangia indicating rhinosporidiosis. Several of these appeared degenerated and empty. Others showed granular debris material (Fig 1C, Hematoxylin-Eosin; Fig 1D, Gomori's Methenamine Silver  $\times 400$ ). Ocular rhinosporidiosis most commonly involves the tarsal conjunctiva. Scleral melt from bulbar conjunctival rhinosporidiosis is known but extremely rare.

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