



# Response to: No strong evidence to date for an association between RIMS1 and retinal dystrophy: Mahrood O, et al.

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Dear Editor,

We thank Drs Mahrood et al. for bringing to our attention their latest findings in relation to the seminal report implicating pathogenicity of *RIMS1*. Their conclusion that *RIMS1* lacks an evidentiary base as a monogenic cause of retinal dystrophy, is reassuring for our patient, who in most respects displays a profile of incomplete congenital stationary night blindness [1]. We note however the presence of unusually depressed scotopic responses in our case. Whilst this may reflect heterogeneity within the *CACNA1F*-related disease spectrum [2], the possibility of allelic modifiers is also acknowledged. Raising the question as to whether the identified variance in *RIMS1* is phenotypically complicit or simply an innocent bystander; and emphasising the importance of

interrogation of potential modifying factors across the inherited retinal dystrophies.

## References

1. Weston P, Taranath D, Liebelt J, Smith N (2022) A clinical and electrophysiological case study of a child with a novel frame shift mutation in the *CACNA1F* and missense variation of *RIMS1* genes. *Doc Ophthalmol* 145(2):163–174. <https://doi.org/10.1007/s10633-022-09892-w> (Epub 2022 Aug 10)
2. Men CJ, Bujakowska KM, Comander J, Place E, Bedoukian EC, Zhu X, Leroy BP, Fulton AB, Pierce EA (2017) The importance of genetic testing as demonstrated by two cases of *CACNA1F*-associated retinal generation misdiagnosed as LCA. *Mol Vis* 10(23):695–706

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