

Ophthalmology SAQ

By: 430 Ophthalmology team

CHRONIC VISUAL LOSS

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❖ **Note: please refer to the original lecture given by the doctor**



The pictures were sorted by:

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Cataract



Classification of the Cataract based on age of onset



- If the Age of Patient is 70 y.o. → **Senile**
- If the age is 30 y.o. → **Presenile: DM, Steroids, Trauma, Atopic dermatitis.**
- If 2 y.o. → **congenital Cataract** : TX as soon as possible to prevent Amblyopia.

Classification of the Cataract based on morphology

Types of Cataracts



Nuclear cataract



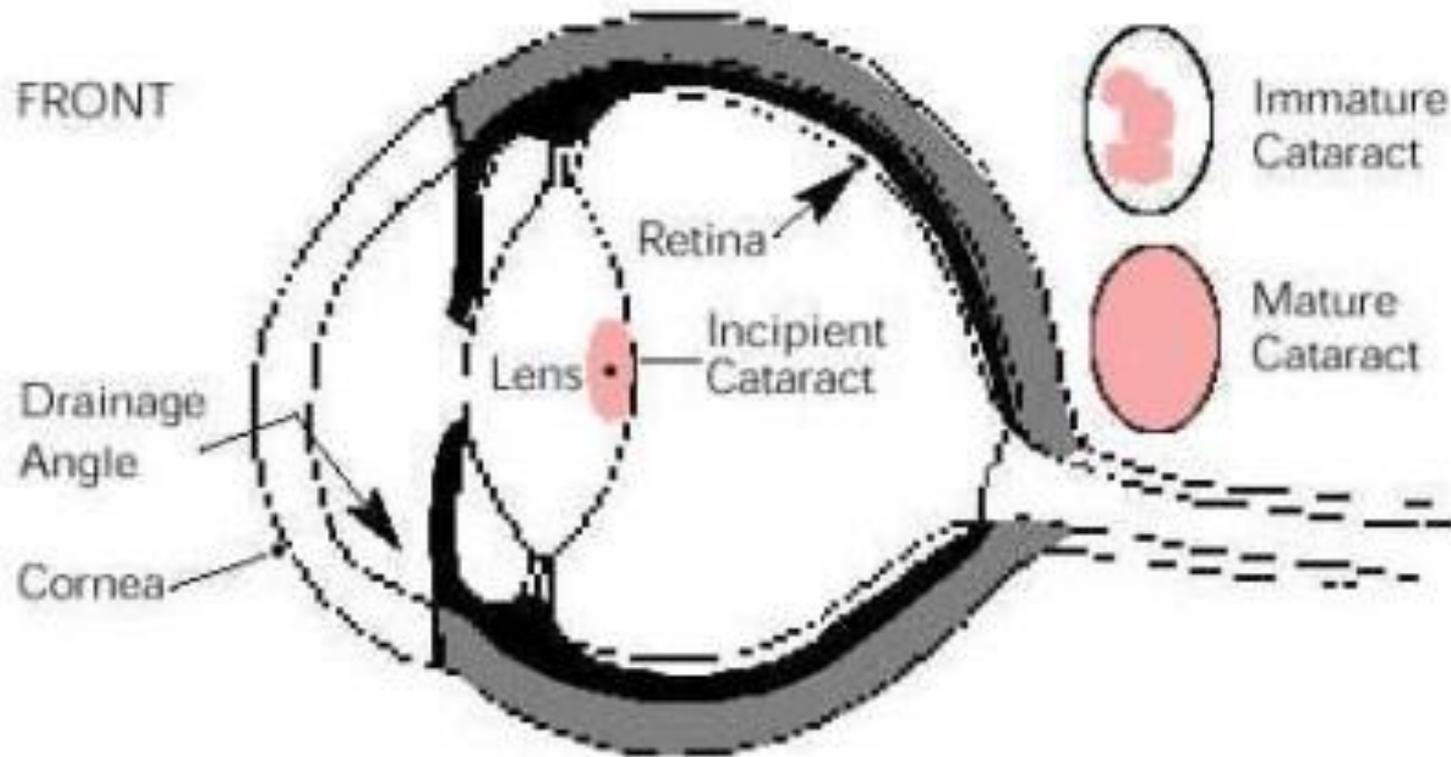
Cortical cataract



Posterior capsular cataract

Images courtesy of Eyemaginations™

Classification of the Cataract based on maturity





- Morgagnian Cataract also known hypermature cataract.
(Liquefaction of the Cortex + Neucleus is down)

<http://www.rootatlas.com/wordpress/video/486/hypermature-morgagnian-cataract/>

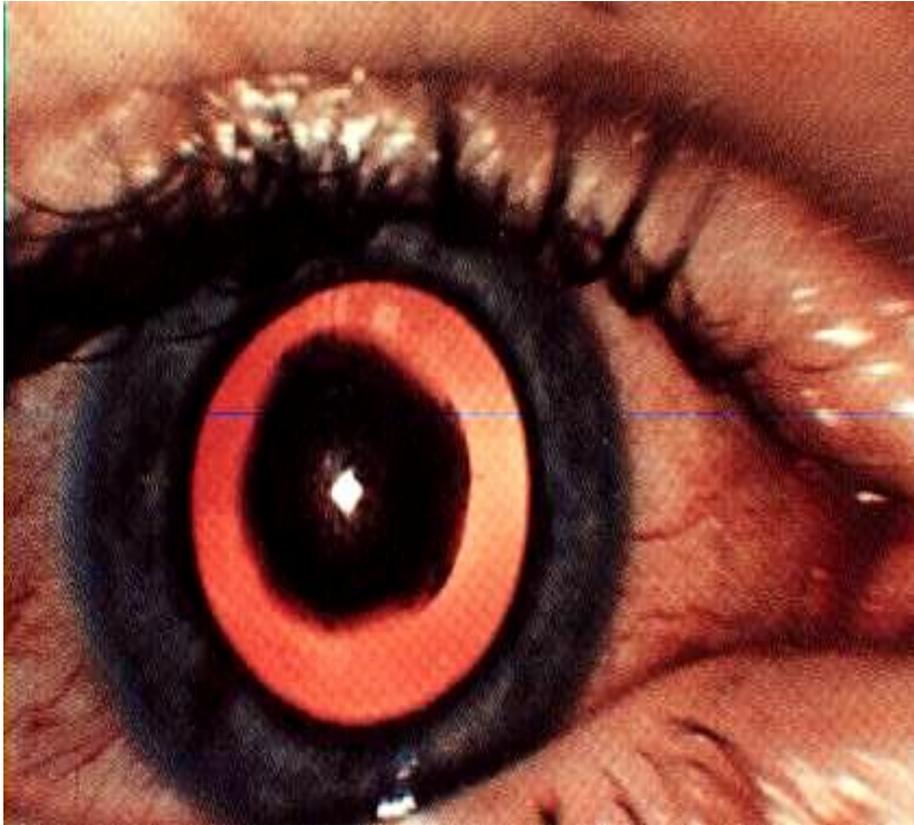


- 60 years old man present with history of gradual decrease of vision.
 - What is the diagnosis ?
 - **Senile cataract**
 - **Mention 2 postoperative complications for this condition ?**
- A- Endophthalmitis**
- B- Hemorrhage**
- C- Glaucoma**



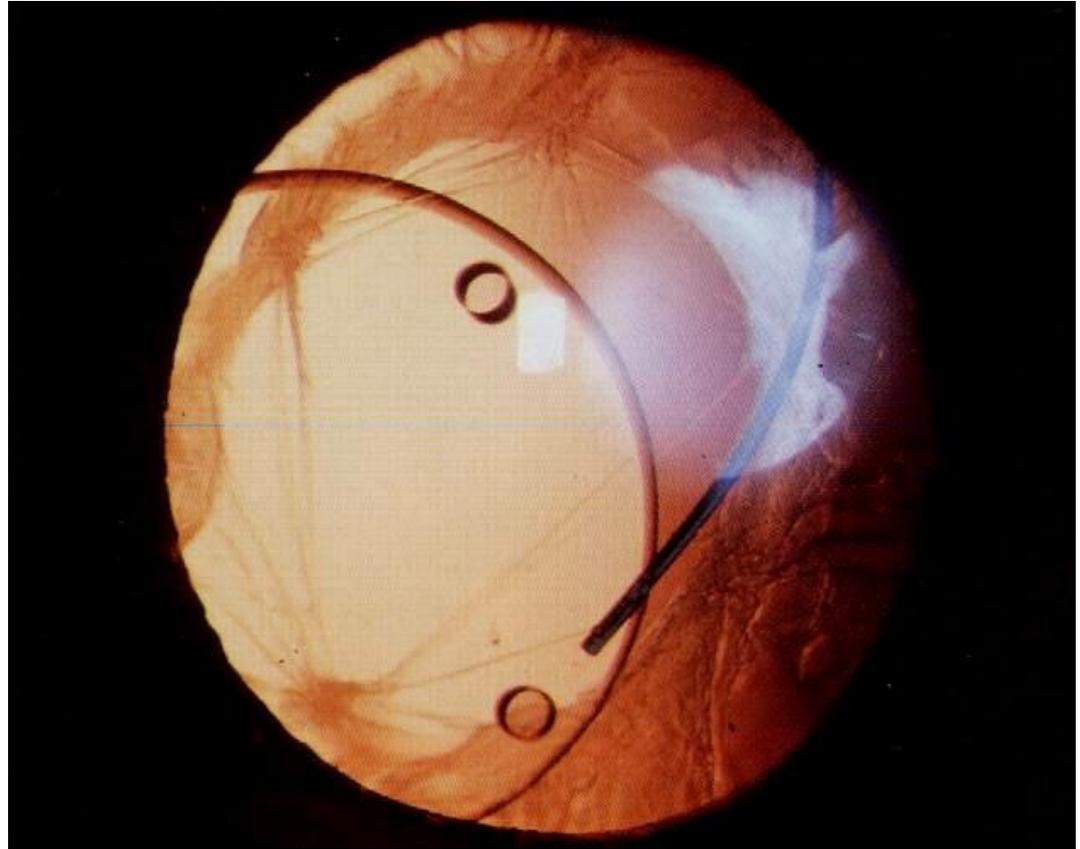
- A. What is the diagnosis
- B. Give 2 post surgical complications?

- A. cataract
- B. 1- endophthalmitis ,
2- inflammation , hemorrhage , ... etc

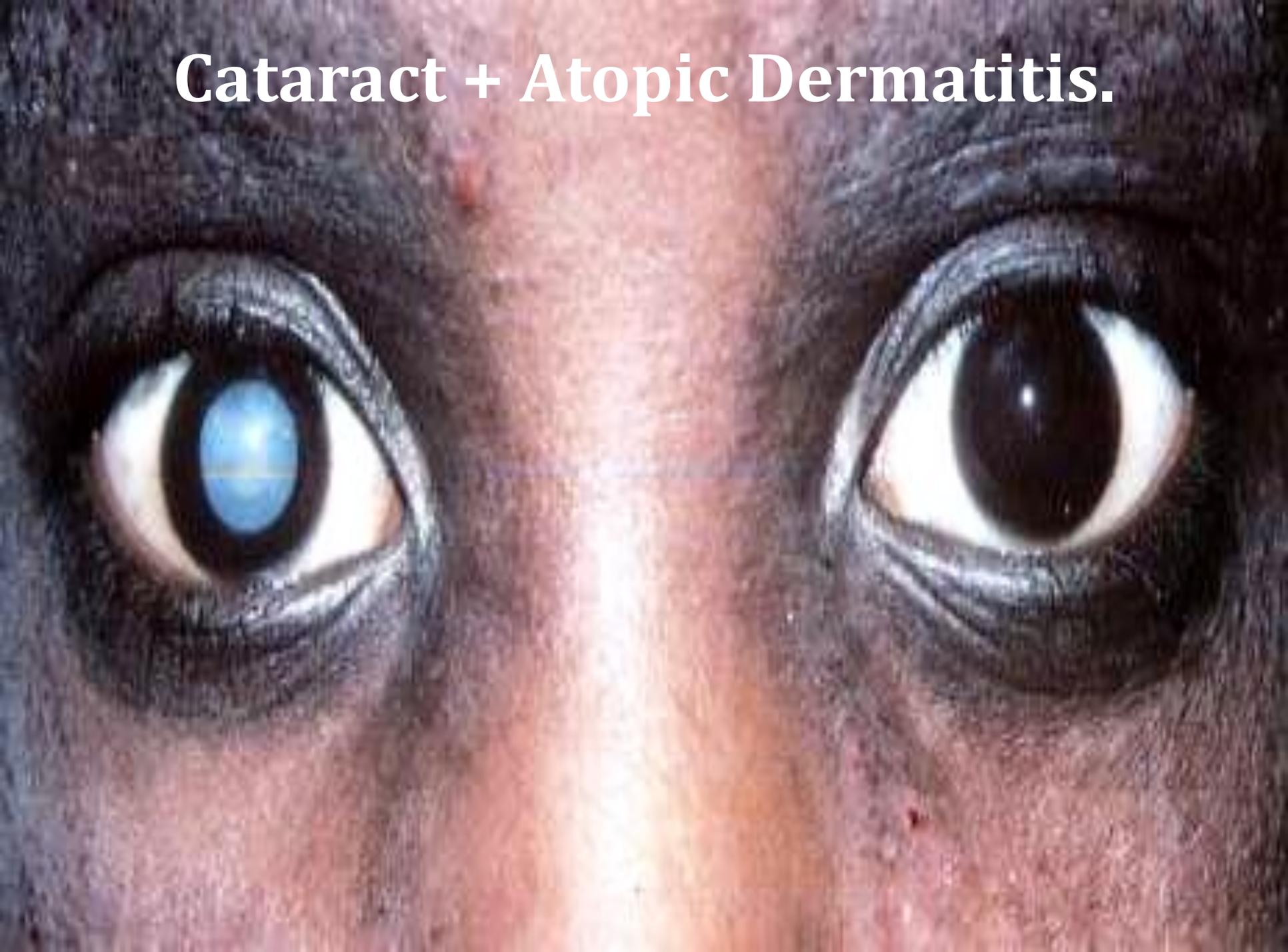


- **Black red Reflex:**
 - **Cataract.**
 - **Vitreous hemorrhage.**
 - **Corneal Opacity.**

- **After this surgery, the patient will be?**
- **Aphakia**
- **Psudophakia**
- **Eiophakia**
- **Myope**



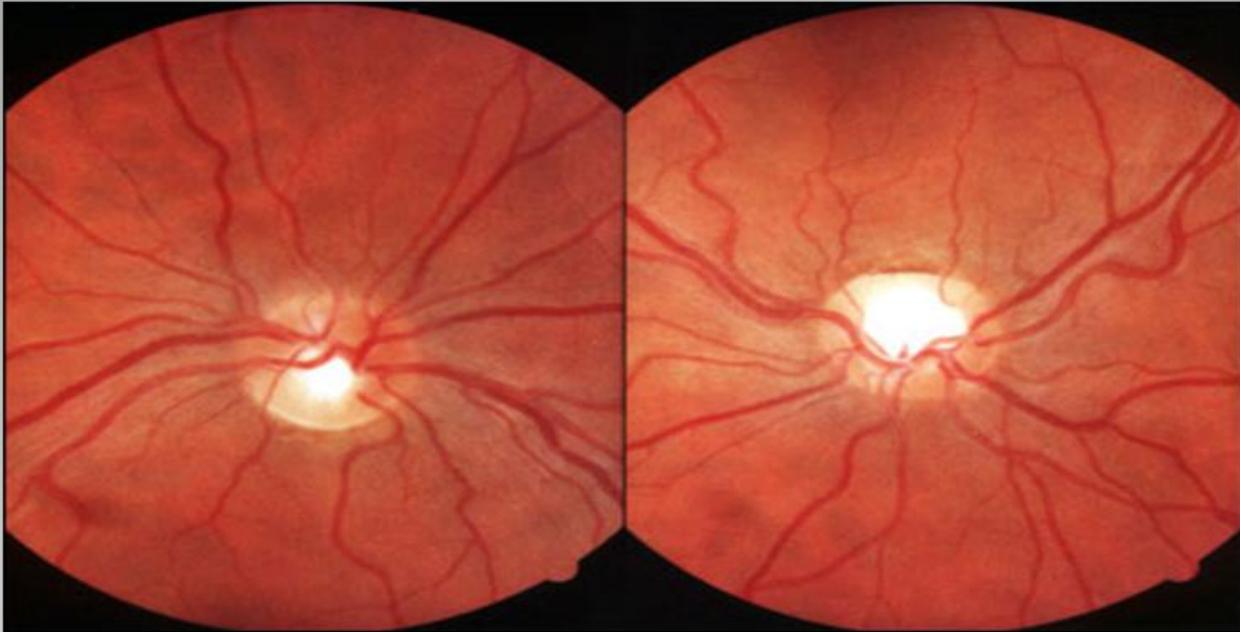
Cataract + Atopic Dermatitis.



A patient with a history of glaucoma

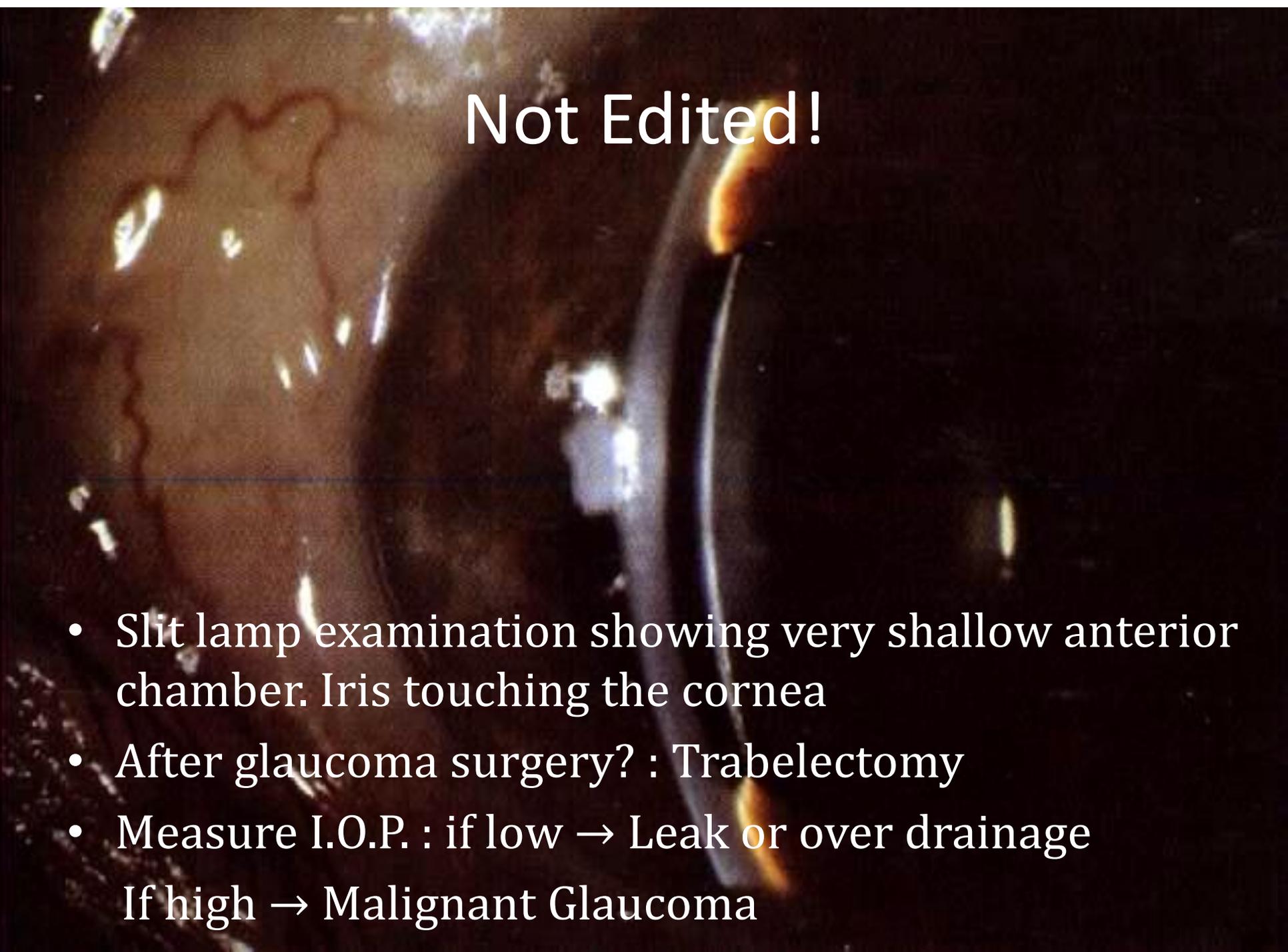


- **What is this sign?**
- **Cupping of the optic disk (increase disk to cup ratio).**
- **Mention 2 types of visual defects associated with this condition?**
- **Peripheral visual field defect. + arcuate scotoma + Nasal step defect**
- **What is the cause of this condition??**
- **A. Chronic open angle Glaucoma .**
- **Most likely Primary**
- **In Closed angle Glaucoma: there is no time for cupping to develop.**



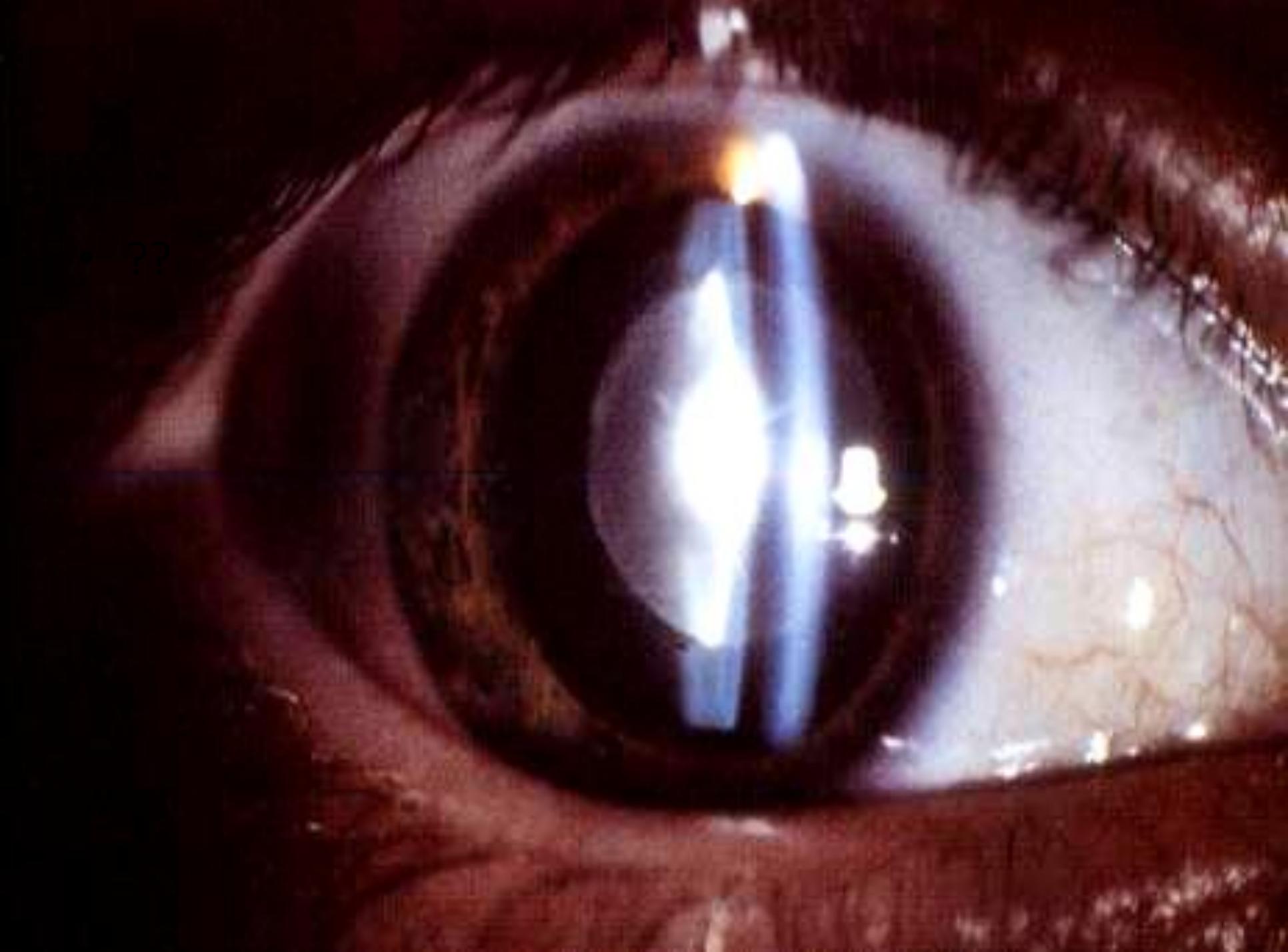
- A. What is the diagnosis?
- B. What are the visual field defects?

- A. Optic disc cupping
- B. Arcuate scotoma , paracentral scotoma, and nasal step defect.



Not Edited!

- Slit lamp examination showing very shallow anterior chamber. Iris touching the cornea
- After glaucoma surgery? : Trabelectomy
- Measure I.O.P. : if low → Leak or over drainage
If high → Malignant Glaucoma



- Q: Name the type of visual field defect?

A: Tunnel vision;
peripheral visual field
loss

Q: What is the most
likely
cause/Diagnosis?

A: Open Angle
Glaucoma (chronic).



Normal Vision



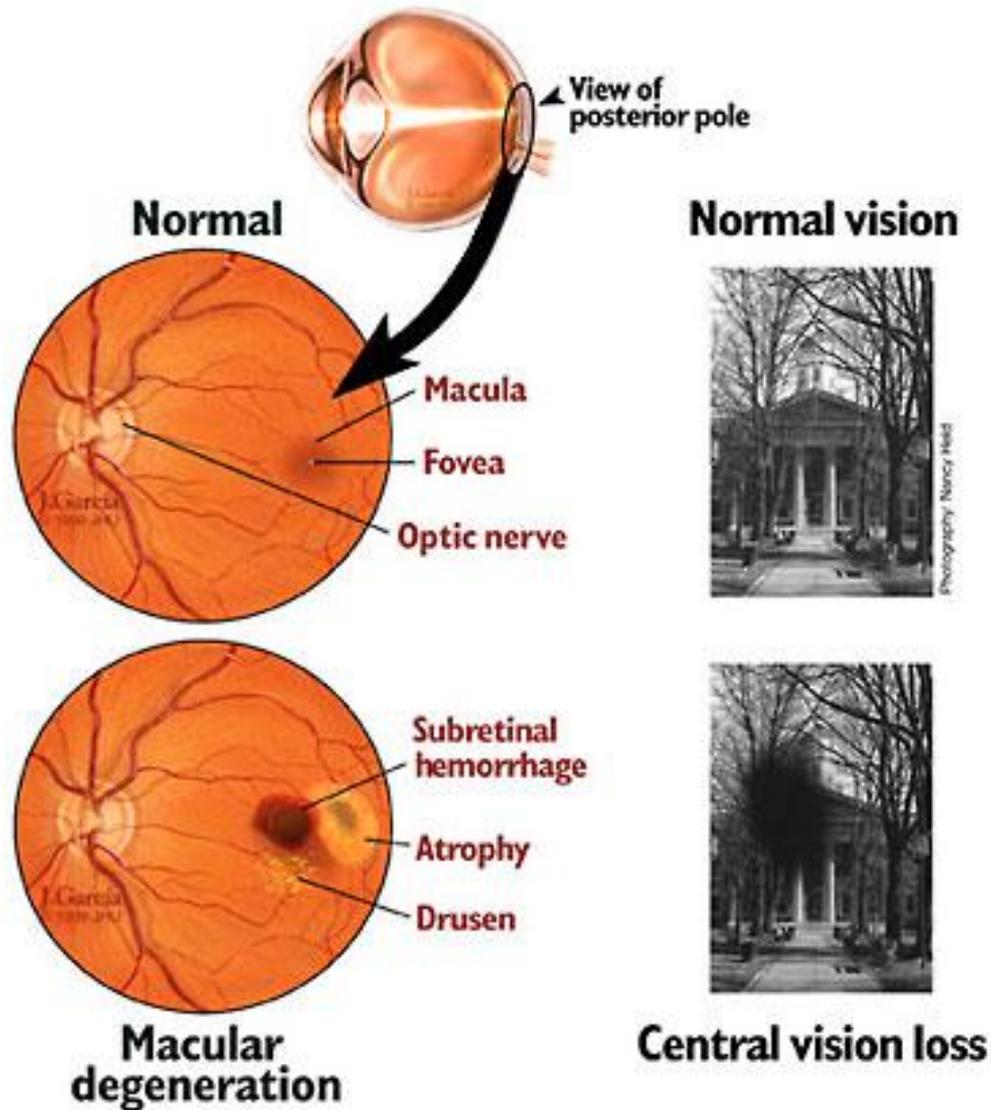
Glaucoma



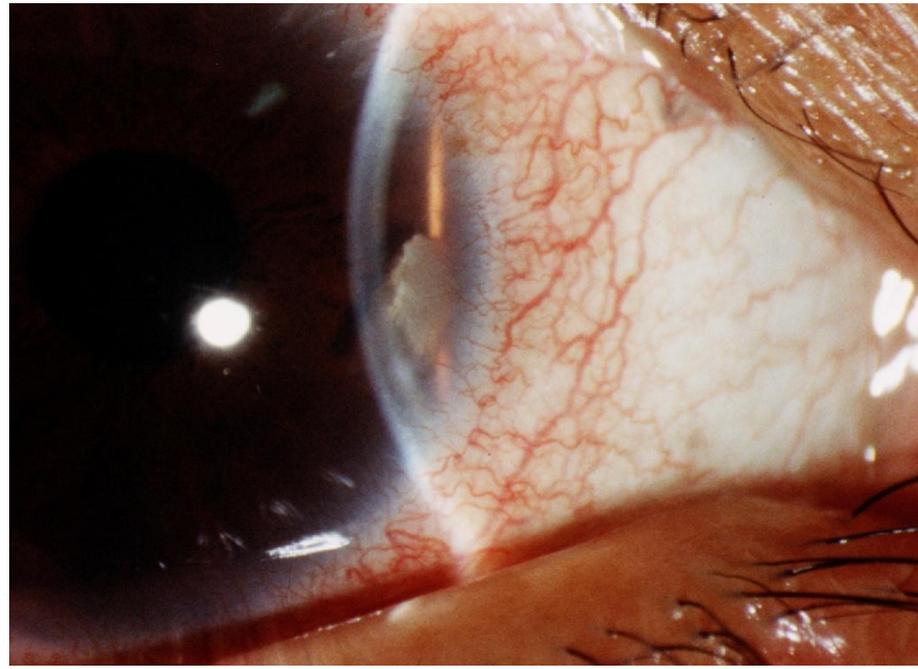
10) This patient a 50 year old in a regular check up, you have to examine all EXCEPT:

- a. Refraction.
- b. Goniometry.
- c. Tonometry.
- d. Fluorescence angiogram.

Macular degeneration



These next slides are not edited



Q1. What is the diagnosis ?

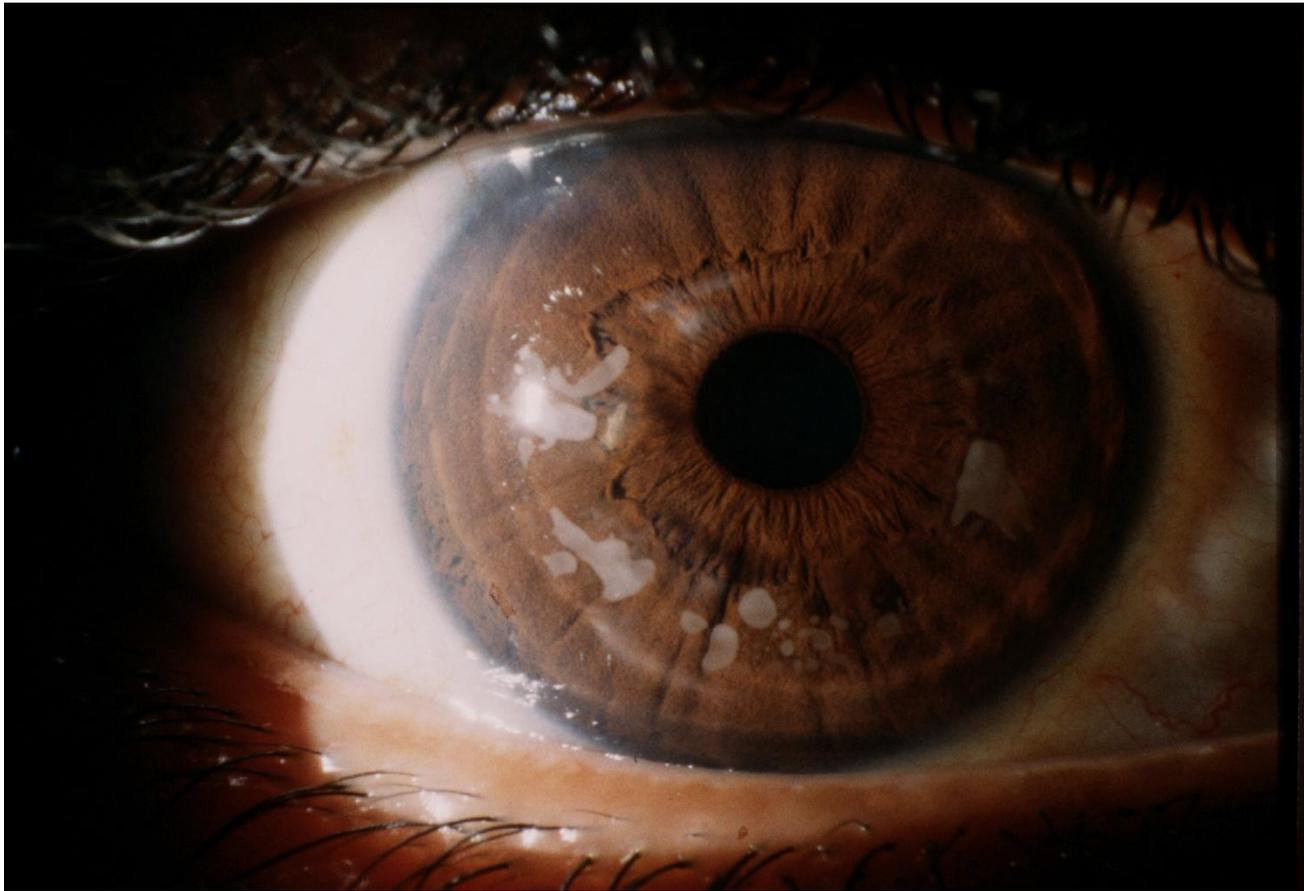
lenticular piece in AC

Q2. What was the possible surgery done?

Phaco emulsification

Q3. What is the treatment ?

lenticular piece removal

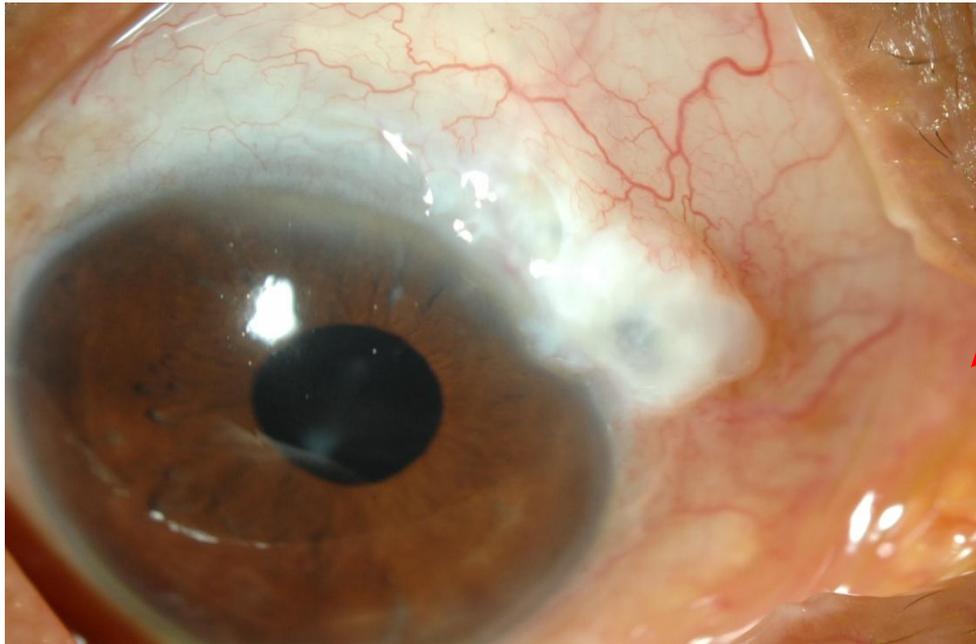


Q1. What is the diagnosis ?

Lasik flap interface Epithelial down growth

Q2. Would you treat ? If yes What are the indications?

Yes : If there is decreased vision due to astigmatism or visual axis involvement



Q1. Mention three clinical signs seen ?

A:Reddness

B:Pseudophakia

C:Conjunctiva cyst

Q2. What does the arrow show?

Inadvertent Cystic Bleb

Q3. If you decide to operate

a) **what will be the procedure?** A:Excejen of the bleb and put more limbal sutures

b) **What will you avoid which decreases VA?** B:Tight limbal sutures



13-02-2010

50- Right 5:00:2

28-year-old male with history of blurring VA OD for 3 months.

- A) What is the diagnosis ?
- B) What is the name of this sign in FFA?

???

