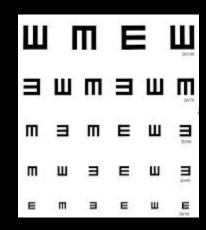
Dr. Faisal Almobarak
Associate Professor and Consultant
Department of Ophthalmology
College of Medicine
King Saud University

Vision:

1- Quantity: VA

2- Quality: VF, clarity of vision, color



vision

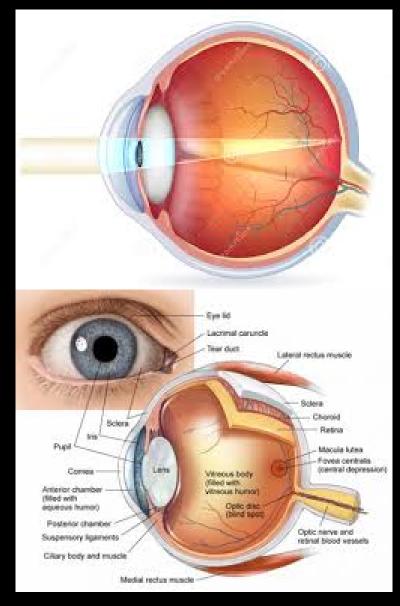






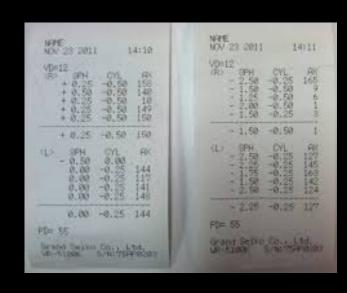
Causes:

- 1. Refractive
- 2. Cornea
- 3. Lens
- 4. Vitreous
- 5. Retina
- 6. Optic Nerve
- 7. Neurologic



Refractive

- Mostly in young patients
- Myopia, hyperopia or astigmatism
- Amblyopia !!
- Signs: Normal exam. Refraction needed to show errors
- Rx: Glasses, CL, Refractive surgery
- NB: lenticular causes needs cataract surgery

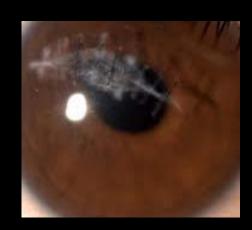


Cornea

- Scar: trauma, infection
- Hereditary: corneal dystrophies, keratoconus
- Signs: corneal scar, bulging corneal, stromal opacities. Might have some conjunctival injection with chronicity



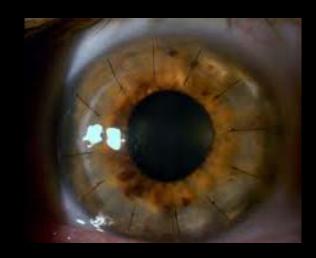




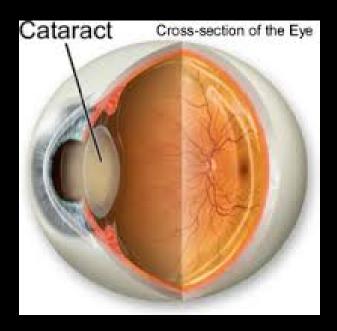
Cornea

• Rx: Refraction, CL (soft or hard), corneal cross linking, keratoplasty





Lens



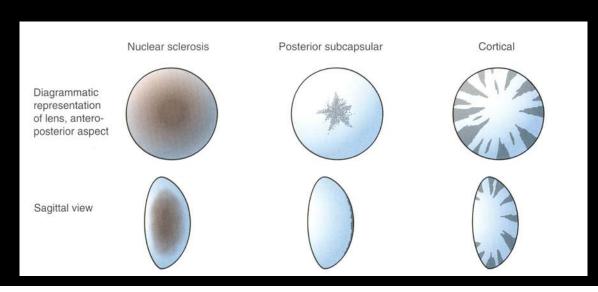
Disorganization of lens proteins



Opacification

- Causes:
- A. Age related
- B. Metabolic
- C. Traumatic
- D. Congenital
- E. Drugs
- F. Inflammation
- G. Ocular

- Clinical Classification:
- A. Maturity: immature, mature, hypermature
- B. Anatomic: nuclear, subcapsular, cortical
- C. Age: congenital, infantile, pre-senile, senile



- Gradual onset
- VA: worsening of existing myopia, correction of hyperopia
- Loss of contrast sensitivity in low light
- Glare in bright light (scatter of light)

- Management:
- ✓ Congenital: lens aspitation ± IOL
- ✓ Acquired: ECCE + PCIOL / Phaco + PCIOL

Vitreous

- Vitreous Hge: trauma, PDR, uveitis, PR
- Vitreous condensation, opacification
- Vitritis: uveitis



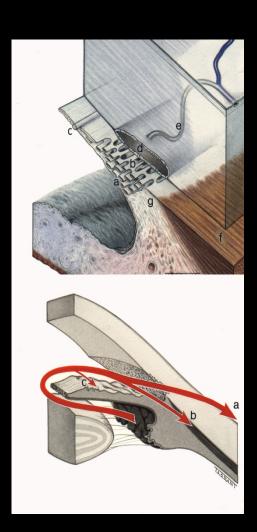
Vitreous

• Rx: underlying cause

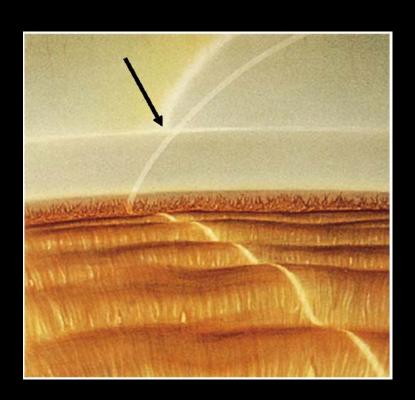
- Second leading cause of blindness
- Early diagnosis is crucial to prevent loss of vision
- High IOP + Characteristic optic nerve head changes + visual field loss secondary to nerve fiber layer loss
- IOP is the single factor to be controlled

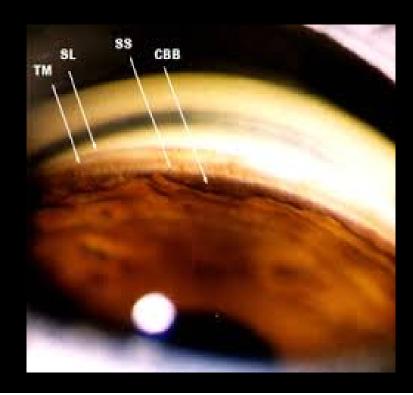
Glaucoma Aqueous Humor

- Active secretion:
- 1. Na/K ATPase
- 2. Cl secretion
- 3. Carbonic anhydrase
- Passive secretion
- 1. Ultrafiltration
- 2. Diffusion



Glaucoma Gonioscopy



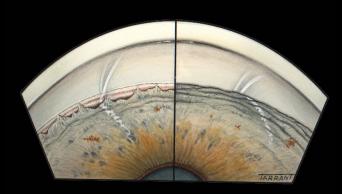


Glaucoma

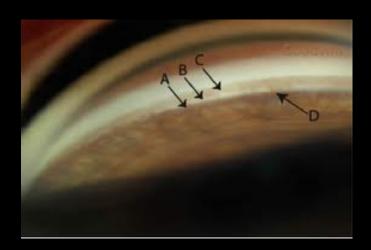
Is the iris

Covering TM

Not covering TM



CLOSED



OPEN

Glaucoma ONH complex evaluation

- Disc margin and disc diameter
- Neuroretinal rim
- Cup/disc ratio
- Disc size
- PPA
- NFL defect
- Optic disc haemorrhage



Glaucoma Aetiology

Primary

- No detectable reason
- Often bilateral

Secondary

- Predisposing factor
- Often unilateral

Angle

Open

Closed

Combined Mechanism

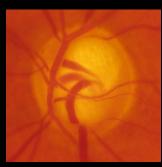
Glaucoma

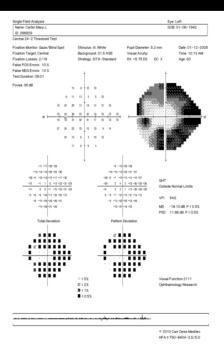
Start with peripheral (navigational) vision involvement



- Initially asymptomatic
- Usually detected on routine examination
- Risk factors:
- **>IOP**
- age
- > Family history
- > DM
- myopia

- Signs:
- ✓ High IOP
- ✓ Gonioscopy: open or closed
- ✓ Optic nerve head damage
- ✓ Visual field loss





- Rx:
- ✓ Antiglaucoma medications
- ✓ Lasers: SLT, PI
- ✓ Glaucoma surgery

Macular Degeneration

- Impaired central vision
- Peripheral vision preserved
- Leading cause of legal blindness in developed world
- Multifactorial
 - Age
 - Smoking, vascular disease, UV light, diet, FHx

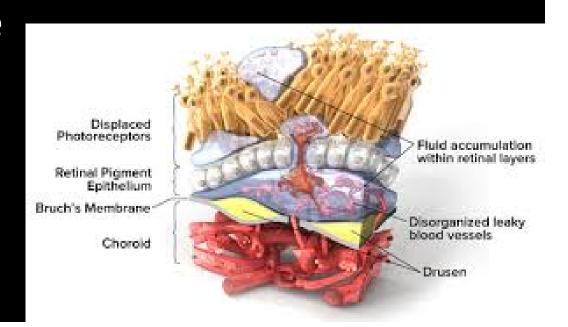
Macular Degeneration

Complaints:

- Metamorphopsia: distorted vision
- Micropsia: reduction of size of objects
- Macropsia: enlargement of size of objects
- Scotoma: VF loss

Macular Degeneration

- Macular involvement:
- Outer retinal layer
- Retinal pigment epithelium
- > Bruch's membrane
- choriocapillaris



Macular Degeneration

- Drusens: lipid products from photoreceptor outer segments, found under retina
- new vessels from choroid grow into the subretinal space forming subretinal neovascular membrane

luid accumulation

Disorganized leaky

Hemorrhage into subretinal space or even through the retina into the vitreous (significant loss of vision)

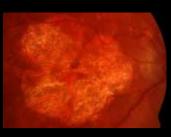
Macular Degeneration

Atrophic

- Often asymptomatic
- Gradual over years
- Signs:
- Drusen



Geographic atrophy



- Photoreceptor degeneration
- scotoma when light adapting

Exudative

- Rapidly progressive (weeks)
- Signs:
- Choroidal (sub-retinal) neovascularisation
- Pre-retinal hemorrhage
- Elevation of retina
- Subretinal fibrosis

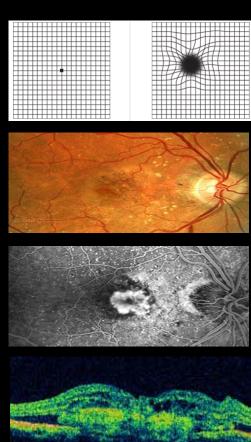


- Metamorphopsia
- Central scotoma



Macular Degeneration

- Diagnosis:
- ✓ Visual acuity
- ✓ Amsler grid
- Ophthalmoscopy
- ✓ Fluorescein angiography
- ✓ ICG
- ✓ OCT



Macular Degeneration Rx Dry Macular Degeneration

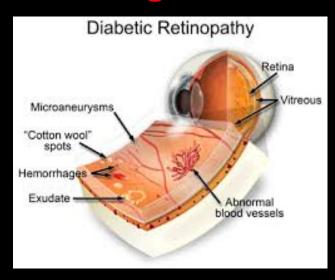
- Lifestyle
- Stop smoking, reduce UV exposure, Zinc & antioxidants
- Low vision aids
- Monitoring with Amsler chart

Macular Degeneration

- Observation
- Laser photocoagulation
- Anti-VEGF
- Verteporfin photodynamic therapy (PDT): injection of photosensitizer into systemic circulation followed immediately by laser targeting new vessels in macular area

Diabetic Retinopathy

- Microangiopathy which involves pre-capillary arterioles, capillaries and post-capillary venules
- Microvascular occlusion
- Microvascular leakage



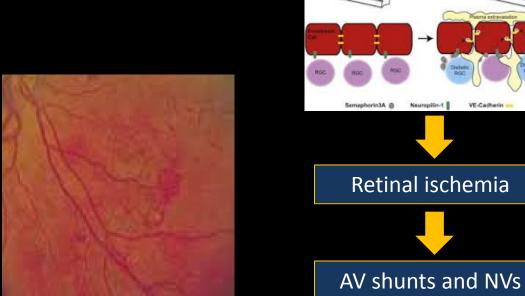
Diabetic Retinopathy

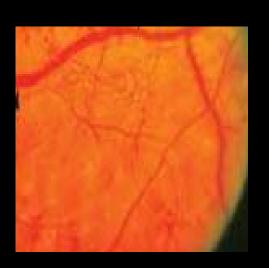
Microvascular Occlusion

Thick capillary basement membrane

Capillary endothelial cell damage

Changes in red blood cells

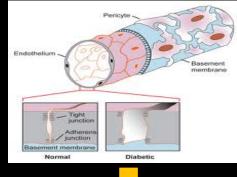




Diabetic Retinopathy

Microvascular Leakage

Loss of pericytes between endothelial cells



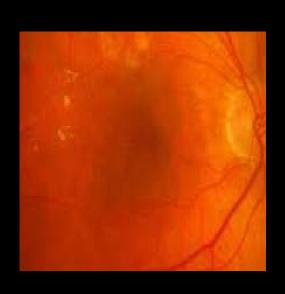


Leakage into retina



Exudates and edema





Diabetic Retinopathy Risk Factors

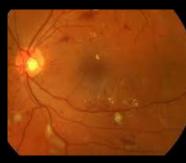
- Duration
- poor metabolic control
- Pregnancy
- HTN
- Nephropathy
- Smoking
- Obesity
- hyperlipidemia

Diabetic Retinopathy

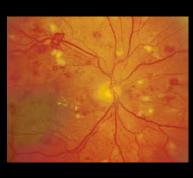
Classified clinically to two types:

- NPDR
- A. Mild
- B. Moderate
- C. Sever
- PDR
- A. Early
- B. Advance





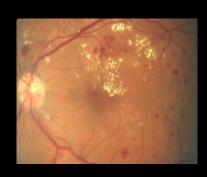




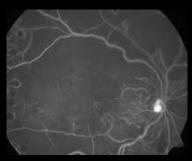


Diabetic Retinopathy NPDR

- Asymptomatic
- Decreased visual acuity:
- A. CSME
- B. macular ischemia







Diabetic Retinopathy PDR

- Symptomatic
- Can also cause macular ischemia and/or edema

Diabetic Retinopathy PDR

Neovascularization

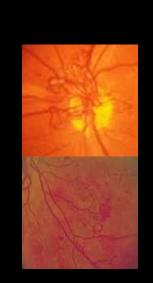
NVD: neovascularization of the disc

NVE: neovascularization elsewhere

- Fragile (intra-retinal or vitreous hemorrhage)
- Associated with fibrous proliferation TRD

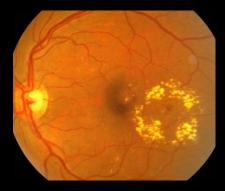






Diabetic Retinopathy Diabetic Macular Edema

- Retinal edema threatening or involving the macula
- Evaluate: location of retinal thickening relative to the fovea and the presence and location of exudates





Diabetic Retinopathy

- Rx:
- Laser
- intravitreal steroid injection
- intravitreal anti-VEGF injection
- pars plana vitrectomy

Retinitis Pigmentosa

- Group of genetic disorders affect the retina ability to respond to light
- Slow loss of vision: nyctalopia, loss of peripheral vision, blindness
- Most are legally bling by 40s
- Central visual field of less than 20 degrees
- XR: males: more often and more severe females: carry the genes and experience vision loss less frequently

Retinitis Pigmentosa

- Target photoreceptors
- Associated with pigmentary changes in the RPE, which may be primary or secondary to the photoreceptor loss

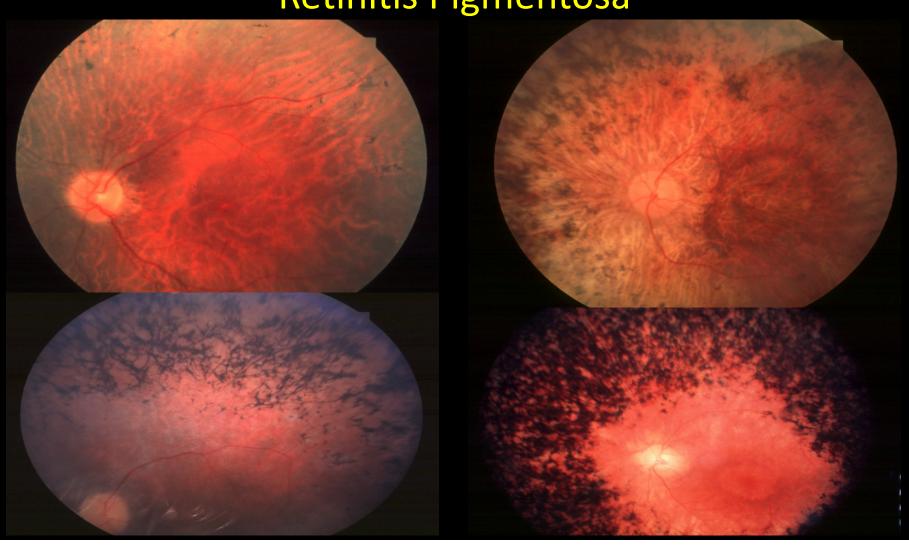
Retinitis Pigmentosa Symptoms

- Nyctalopia (loss of night vision)
- Tunnel vision (loss of peripheral vision)

Retinitis Pigmentosa Signs

- VA: 20/20 NLP
- +- APD
- PSCC
- RPE hyperpigmentation (bone spicules) alternate with atrophic regions
- Attenuation of the arterioles
- Waxy pallor of the optic nerve head
- CME (severe cases of RP)

Retinitis Pigmentosa



Retinitis Pigmentosa Investigations

- VF test
- Color testing (mild blue-yellow axis color defects)
- Dark adaptation study (reduced contrast sensitivity relative to VA)
- Genetic subtyping

Retinitis Pigmentosa Investigations

- OCT (CME)
- FFA
- ERG
- EOG

Retinitis Pigmentosa Systemic Associations

- hearing loss and RP
- ✓ Usher syndrome
- ✓ Alport syndrome
- ✓ Refsum disease
- Kearns-Sayre syndrome
- ✓ External ophthalmoplegia
- ✓ Lid ptosis
- ✓ Heart block
- ✓ Pigmentary retinopathy

Retinitis Pigmentosa Systemic Associations

- Abetalipoproteinemia
- Mucopolysaccharidoses
- Bardet-Biedl syndrome
- Neuronal ceroid lipofuscinosis

Retinitis Pigmentosa

Treatment

- CAI: CME
- Vitamins ??
- Cataract: surgery
- Low vision aids
- Gene therapy !!