

CFEH Facebook Case #17

A 63 year old Caucasian female presented at CFEH. She was a low myope and generally asymptomatic although did mention she sometimes bumps into things. BCVA 6/6 in each eye. She has previously undergone a tracheotomy and radiotherapy for a vascular malformation near her larynx and currently takes Crestor, Atacand and Nexium. The Optomap image, fundus autofluorescence and OCT line scans are included for the right eye only, although both eyes had a similar appearance.

What is your diagnosis and management?

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Optometry

NEW SOUTH WALES

AUSTRALIAN CAPITAL TERRITORY

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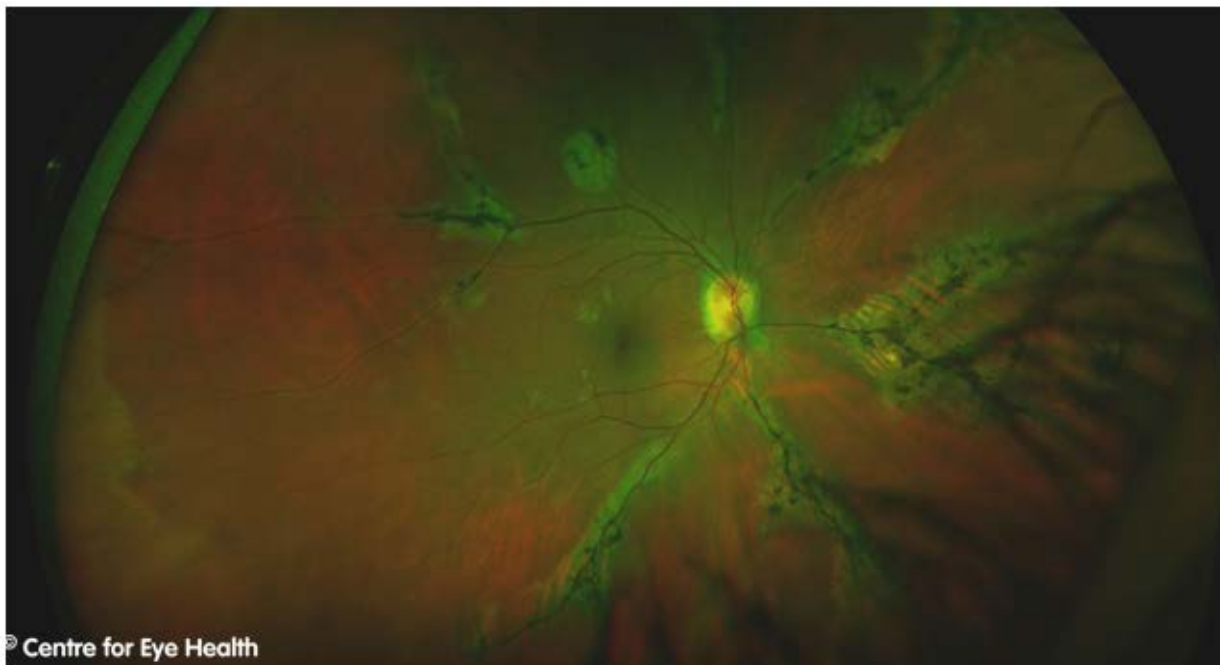
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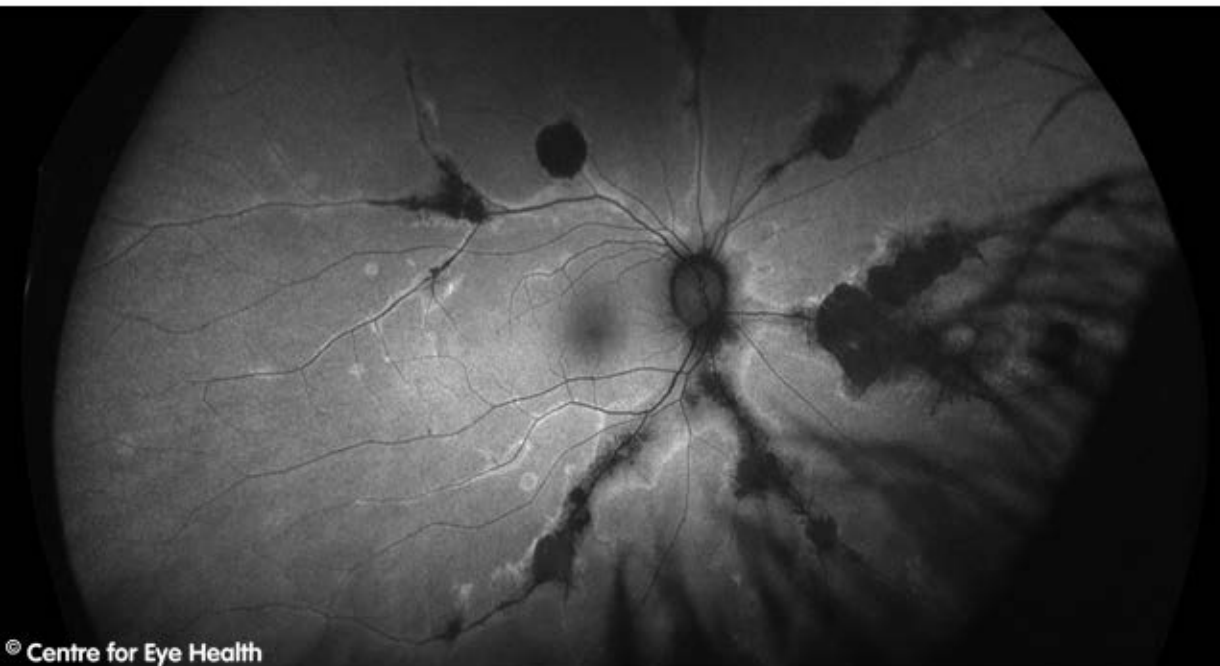
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Central 30-2 Threshold Test

Fixation Monitor: Gaze/Blind Spot

Fixation Target: Central

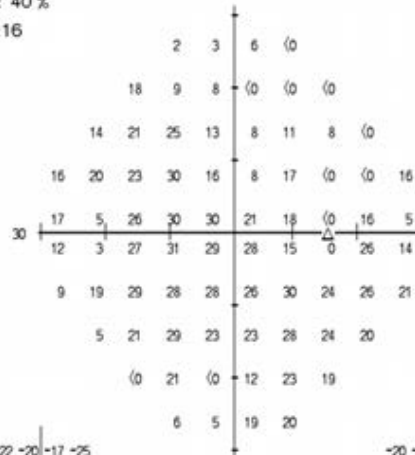
Fixation Losses: 0/22

False POS Errors: 1 %

False NEG Errors: 40 %

Test Duration: 10:16

Fovea: OFF



Pupil Diameter: 6.1 mm

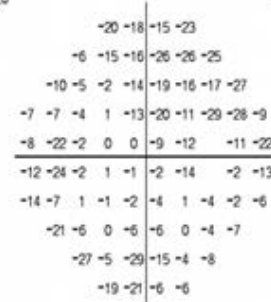
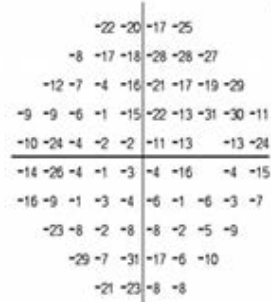
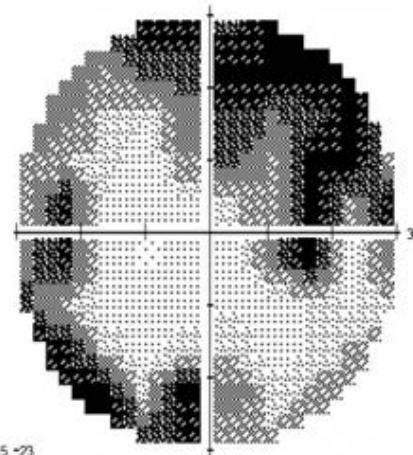
Visual Acuity:

RX: +8.75 DS DC X

Date: 23-05-2013

Time: 11:03 AM

Age: 64



GHT

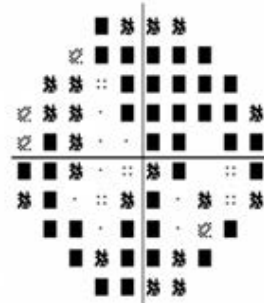
Outside Normal Limits

VFI 72%

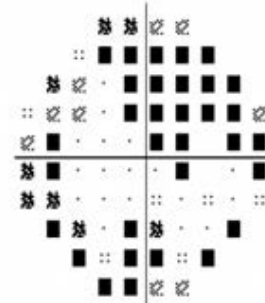
MD -10.66 dB P < 0.5%

PSD 10.09 dB P < 0.5%

Total Deviation



Pattern Deviation



∴ < 5%

∴ < 2%

∴ < 1%

■ < 0.5%

Guide Dogs - University of NSW

Centre for Eye Health

Gate 14, Barker Street

Kensington NSW 2033

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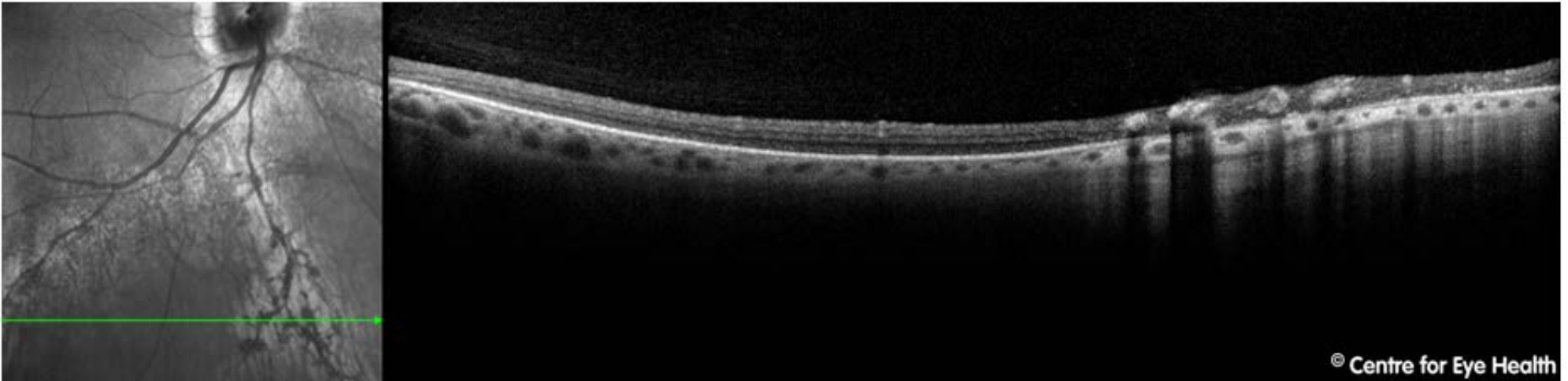
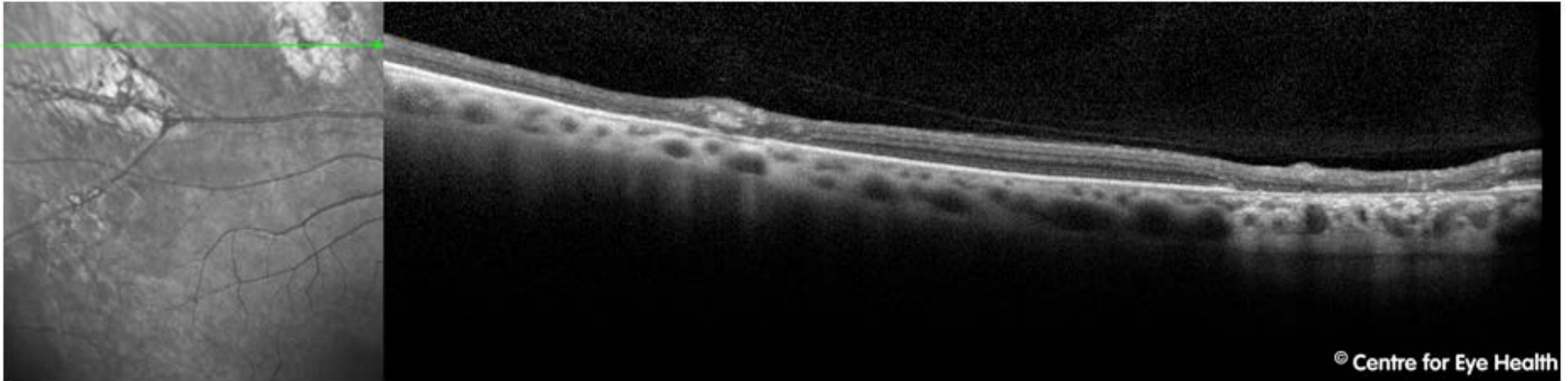
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ANSWER

Pigmented Paravenous Chorioretinal Atrophy (PPCRA)

This is a bilateral, progressive condition that is characterised by pigmentary changes including RPE atrophy and pigment clumping around the blood vessels. The OCT images show a reduction in the outer nuclear layer thickness, as well as disappearance of the Ise and interdigitation zone. The hyper-reflective areas seen in the OCT images within the retina are due to RPE migration and increased reflectance seen in areas of the choroid is due to the drop out of RPE cells.

The exact aetiology of this condition is unknown, and speculation exists that it may be either genetic in nature, developmental or an immune response due to associated inflammatory conditions.

Sufferers often remain asymptomatic and the threat to vision is not high as the condition is usually stable. Recommended management is to review the fundus appearance and visual fields annually to document progression. An ERG can help with diagnosis and monitoring of this condition. In this case, both an ERG and EOG were performed at CFEH with the ERG showing a normal scotopic and reduced photopic response. The EOG showed an abnormal Arden ratio. Given the presence of significant field defect, Estermann field assessment may be required to assess suitability to drive.

This case and a series of other unusual eye conditions are presented in a video lecture “Case Studies on Unusual Eye Conditions”, available for viewing through Learning for Vision and approved for 2 therapeutic CPD points. Go to www.learningforvision.com.au to purchase this and other lectures from our catalogue.