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MYOPIC MACULOPATHY WITHOUT MYOPIA

Poster

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Purpose:

to analyze the possibilities of using OCT to detect myopic maculopathy in difficult cases of diagnosis. A 25-year-old patient admitted with a diagnosis of central serous choriopathy of the left eye was examined. Vision has been reduced since childhood, and has not been observed to have deteriorated in recent years.

Methods:

Visus OD 20/32corr., OS 20/50corr. Refraction OD sph-0.75D cyl-0.75D ax33□, OS cyl+2.5D ax70□. Ophthalmometry OD 39,36/38,91, OS 39,42/39,01, Axial length OD=26.31mm, OS=25.05mm. Anterior segment of both eyes was not changed, eye's structures were transparent, oblique entry of optic nerve disc was determined in fundus of the right eye, no pathology was detected in macula; optic nerve disc was pale pink in left eye, myopic cone was determined, neuroepithelial detachment was detected in macula , zones of "lattice" dystrophy were determined on periphery of both eyes. OCT-machine: Miranta and RTVue XR Avanti with Macular map and Line 15 mm scanning protocols.

Results:

OCT revealed deep peripapillary myopic staphylomas in both eyes. In the left eye, the macular zone was located on the slope of the staphyloma and had a prominent dome-shaped profile, more pronounced in the vertical direction; detachment of the neuroepithelium and local subfoveal thickening of the choroid were determined. OCTA of the left eye: choroidal neovascularization was not detected. Based on the axial length and OCT data, a diagnosis of dome-shaped macula with detachment of the neuroepithelium of the left eye against the background of latent pathological high-grade myopia was established.

Conclusions:

OCT revealed myopic staphyloma and myopic maculopathy in the eye of a patient with hypermetropic refraction with latent pathological myopia.