

Case #31921376

Summary: Unilateral transient, long-duration repeated episodes of vision loss due to UGH syndrome (Uveitis, Glaucoma, Hyphema) from intraocular lens haptic (arm) rubbing up against posterior iris causing intermittent bleeding into anterior chamber

History

Presentation:

64-year-old woman who has been experiencing episodes of haziness in vision

Inquiry: Bilateral vs Unilateral unilateral

Inquiry: Duration

Episodes can last a little as one hour when the vision is only mildly affected to as long as all day long for the episodes when vision is affected more severely.

Inquiry: Episode Characteristics

Positive phenomena, appears as a white out of vision and white haze.

Inquiry: Activity during the episode

Symptoms can last throughout the day regardless of activity

Inquiry: Pattern of visual loss

Complete white out of vision in right eye

Inquiry: Other Symptoms

There is no pain and no other symptoms

Inquiry: Current Medication

She saw a neurologist who put her on daily aspirin and since then the episodes have lasted longer

Inquiry: Other History Patient had cataract surgery in the right eye 6 years ago and right after surgery it was discovered that the wrong power intraocular lens was implanted so it was replaced the next day. The right eye has just never felt right since then. The episodes of white out of vision started about 6 months ago. The left eye also had cataract surgery 5 years ago and the surgery went without any problems.

Exam Results

The patient's friend took a picture of her right eye during one of the episodes and this is what was seen:



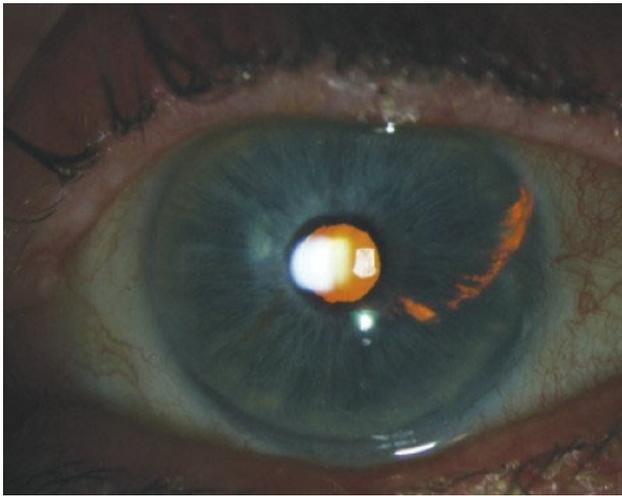
Further Results

The patient was then asked to come to the clinic later that week after the episode cleared and the slit lamp exam showed the following:

Commentary:

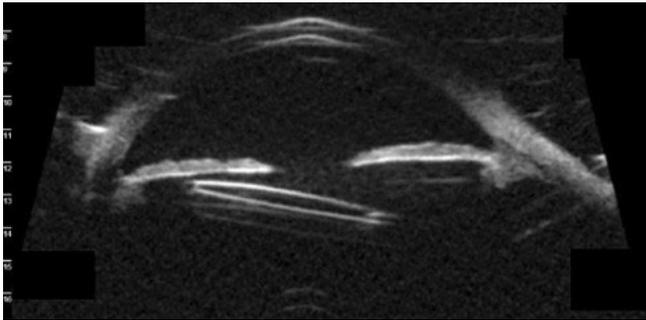
Transient vision loss due to UGH syndrome is characterized by longer duration (hours) and often more of a white-out of vision as opposed to a darkening of vision. The hyphema, or microhyphema, with dispersed blood in the anterior chamber gives the symptom of vision loss, often as bad as hand motion or light perception. There may or may not be associated increase in intraocular pressure. These are almost always in the setting of an intraocular lens haptic rubbing on the posterior iris near a small blood vessel producing intermittent hemorrhage. This can be identified with a good slit lamp examination with transillumination which usually reveals the area of iris thinning and visualization of the haptic. Most commonly, one part of the lens is in the bag and the other part of the lens is in the sulcus. Anterior segment OCT or high frequency ultrasonography can also be used to visualize the relationship of the haptic to the iris. Surgical treatment may require removal and replacement of the IOL, but often just cutting and removing the haptic may be enough to solve the

problem.



This photo shows that the haptic of the intraocular lens is rubbing against the back surface of the iris causing a pattern of transillumination defect that corresponded to where the haptic was rubbing off the pigment and causing intermittent bleeding from an iris vessel into the anterior chamber during an episode.

Ultrasound imaging demonstrating the following:



Displacement (tilting) of the intraocular lens causing the haptic to rub against the iris.

Copyright © 2020 Flip-Talks. All rights reserved.