GLAUCOMA STORIES

Professor Florent APTEL
Professor Jean-François ROULAND





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Deep anterior chamber... yes indeed!

Case report

Mrs. B, 41 year old was referred by a physician colleague for bilateral ocular hypertension, associated with the presence of anterior synechiae revealed upon gonioscopic examination. In his mail, he writes that he suspects a primary bilateral angle closure glaucoma, but is surprised by the significant deepness of the anterior chamber.

Mrs. B had history of asthma, which appeared a few year before. She was treated with inhaled corticosteroids when symptoms appeared.

On examination visual acuity is 20/40 in the right eye and 20/20 in the left eye with a correction of -2.50 diopters in both eyes. Intraocular pressure without treatment is 32 mmHg on the right and 18 mmHg on the left without treatment.

The gonioscopic examination reveals numerous peripheral anterior synechiae on the right and only a few on the left with deep anterior chambers in the center (Figure 1).

Multiple choice question

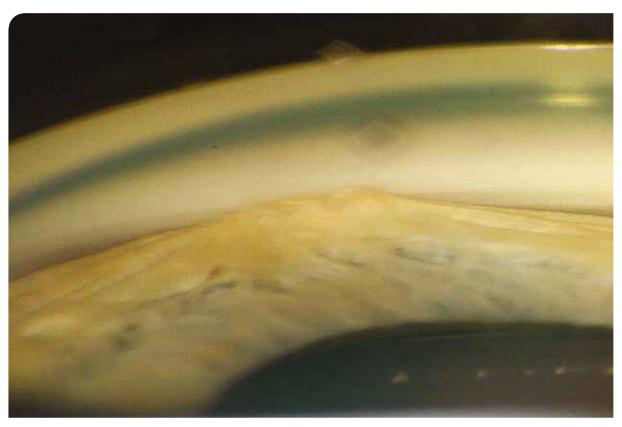


Figure 1: Peripheral anterior synechiae of the right eye.

What condition can explain the presence of anterior synechiae in this patient (one correct answer)

- A. Primary angle-closure glaucoma
- B. Chronic anterior uveitis
- C. Neovascular glaucoma
- D. Pupillary seclusion
- E. Plateau iris syndrome

Answer to the MCQ on page 21

Complete case report and answer to the question

On examination visual acuity is 20/40 in the right and 20/20 in the left eye with a correction of -2.50 diopters in both eyes.

Intraocular pressure without treatment is 32 mmHg on the right and 18 mmHg on the left without treatment

The examination of the anterior segment reveals the presence of some bilateral granulomatous retrodescemetic precipitates. The anterior chambers are quiet and deep. Numerous irido-crystalline synechiae are present on the right and very minimal on the left (Figure 2).



Figure 2: Numerous irido-crystalline synechiae.

A highly magnified examination shows the presence of nodules on the iris margin (Koeppe nodules) and on the iris stroma (Busacca nodules) (Figures 3 and 4).

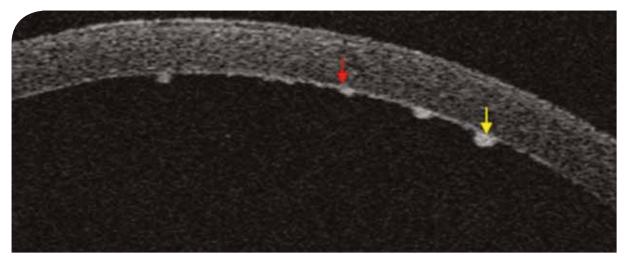


Figure 3: Iris nodules.

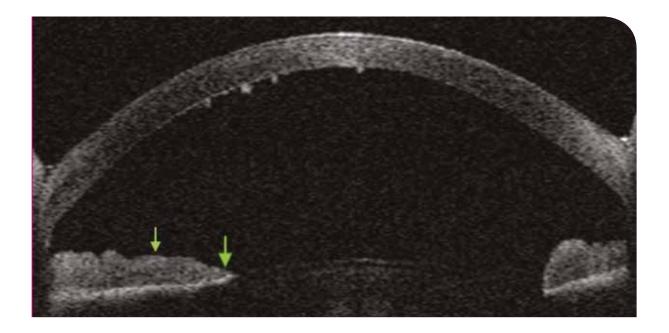


Figure 4: Retro-descemetic precipitates in OCT.

The gonioscopic examination reveals fairly extented peripheral anterior synechiae, numerous on the right and few on the left.

These synechiae exceed the anterior limit of the trabecular meshwork, concealing half of the its circumference on the right (Figure 5).

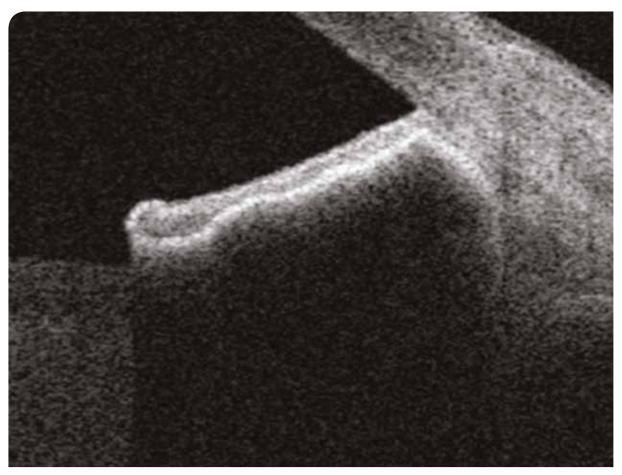


Figure 5: Cross-section of a peripheral anterior synechia.