



A Case Report: Bilateral Optic Pit with Its Inferonasal Location in Right Eye

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Abstract

Optic Disc Pit (ODP) is a rare congenital anomaly which is seen approximately in 1/11,000. Optic disc pits are bilateral in up to 105 to 15% of cases. ODP has been observed temporally in 70%, centrally in 20% and inferiorly in 10% of cases. We present a bilateral ODP case with atypical inferonasal presentation at right eye.

Introduction

Purpose

To present clinical features of a bilateral optic pit case.

Methods

A 30-year-old woman with bilateral optic pit who was admitted to our clinic for a routine ophthalmologic examination has been presented with her fundus photos, Fundus Fluorescein Angiography (FFA), Optical Coherence Tomography (OCT) and perimetry results.

Case Presentation

In detailed ophthalmologic assessment; best-corrected visual acuity was 20/20 in both eyes, anterior segment examination was unremarkable, intraocular pressures were recorded as 22 mmHg OD and 21 mmHg OS (with Goldmann applanation tonometry). Central corneal thicknesses were 639 µm OD and 638 µm OS. Corrected intraocular pressures were 16 mmHg in right eye and 15 mmHg in left eye. Dilated fundus examination of right eye revealed an optic pit located at inferonasal of optic disc. Fundus examination of left eye revealed an optic pit located temporally. FFA showed hypofluorescence at nasal inferior of the right optic disc and at temporal of the left optic disc. FFA showed no hyperfluorescence at macula or other retinal areas on both eyes. Loss of retinal tissue at optic pit areas was observed in OCT image at the level of optic nerve head (this was correlated with optic disc pit). The patient was informed to apply for medical examination in case of vision loss. The examination findings of patient were stable at follow up examination after 2 months. The ophthalmologic examination was advised for every 6 months.

Result

Optic Disc Pit (ODP) is a rare congenital anomaly which is seen approximately in 1/11,000 [1] Histologically, ODP is a herniation of dysplastic retina into a collagen-rich excavation that extends into the subarachnoid space through a defect in the lamina cribrosa [2]. It affects males and females equally [1]. Optic disc pits are bilateral in up to 10% to 15% of cases. ODP has been observed temporally in 70%, centrally in 20% and inferiorly in 10% of cases [3,4]. Our case is interesting because of its bilaterality and inferonasal location of optic disc pit in right eye. The patients with ODP should be followed up for maculopathy. It should be noted that ODP maculopathy could affect both eyes at different times asymmetrically.

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Received Date: 17 Jul 2016

Accepted Date: 06 Sep 2017

Published Date: 15 Sep 2017

Citation:

Arslan ME, Pangal E, Özsaygılı C, Demircan S, Çiçek A. A Case Report: Bilateral Optic Pit with Its Inferonasal Location in Right Eye. J Clin Ophthalmol Eye Disord. 2017; 1(2): 1007.

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