



**PO 21**

**ANTERIOR UVEITIS IN A PATIENT WITH ANTERIOR CHAMBER SYNCHYSIS SCINTILLANS 30 YEARS AFTER BLUNT TRAUMA – A CASE REPORT**

Inês Ludovico<sup>1</sup>, Patrícia Barros da Silva<sup>1</sup>, Edgar Lopes<sup>1</sup>, Catarina Mota<sup>1</sup>, Diogo Maleita<sup>1</sup>, Rita Serras Pereira<sup>1</sup>, Carlos Batalha<sup>1</sup>, Luísa Vieira<sup>1</sup>

*(<sup>1</sup>Centro Hospitalar e Universitário de Lisboa Central)*

**Introduction and Purpose:** Synchysis scintillans, also known as cholesterolosis bulbi, is a rare condition occurring around the 3rd decade of life with no gender predominance. Often asymptomatic and presenting as an incidental finding on fundoscopic examination, it can occur after ocular trauma, hyphema, vitreous hemorrhage, retinal detachment, advanced stage diabetic retinopathy, chronic uveitis and it has been associated with Coats Disease. Although the exact pathophysiology is unknown, the widely accepted theory is that cholesterol from lysed red blood cells deposits predominantly in the posterior segment of the eye. Rarer cases of anterior chamber cholesterol crystal deposition have been reported.

The purpose of our study was to describe a case of a patient showing to our Ophthalmology Department with anterior uveitis in her left eye in association with anterior chamber synchysis scintillans 30 years after blunt trauma.

**Materials and Methods:** Patient case report with past and present history, clinical findings and exams performed in our tertiary center, namely biomicroscopy, intraocular pressure measurement, fundoscopic examination, anterior segment photography, ultrasound biomicroscopy and B-Mode ophthalmic ultrasonography.

**Results and Discussion:** A 40-year-old female from Cape Verde with a past history of blunt trauma in childhood to her left eye presents at our Ophthalmology Department with complaints of sharp pain and redness of her left eye. Best corrected visual acuity (BCVA) on her right eye was 20/20 and hand movement perception on her left eye. Biomicroscopy revealed diffuse conjunctival hyperemia, Tyndall ++, nasal synechiae and synchysis scintillans on the anterior chamber behaving in a snow globe-like effect in a phakic patient. Intraocular pressure measurement was of 10 mmHg on her right eye and 9 mmHg on her left eye. Fundoscopic findings were difficult to assess as there was a multitude of cholesterol crystals in suspension on the anterior chamber. Anterior segment photography allowed us to obtain more detailed images of the biomicroscopic findings. Finally, ultrasound biomicroscopy showed hyperechoic aspects resembling pseudohypopyon that dislodge as the patient moves. It also showed anterior and posterior synechiae. Also B-Mode ophthalmic ultrasonography showed hyperechoic motile aspects within the vitreous humor compatible with the referred disease, and inferior retinal traction due to vitreous collapse.

**Conclusion:** Anterior chamber synchysis scintillans is a rare condition and, although most often asymptomatic and not requiring any further treatment, in some cases it can be accompanied by complications that may require intervention.