

3 de Dezembro

14h30 | 16h00 – Sala 3

Moderadores | Chairs: Angelina Meireles (CHUPorto), Mário Ornelas (H. Setúbal), Carla Teixeira (HPH),
Mário Alfaiate (CHUC), António Sampaio (IMO), Belmira Beltrán(HVFX)

VD 5

PARS PLANA VITRECTOMY FOR MACULAR SUB-INTERNAL LIMITING MEMBRANE HEMORRHAGE OF UNKNOWN CAUSE

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Introduction: Sub-internal limiting membrane (sub-ILM) hemorrhage is a rare cause of visual loss. The most common causes are Valsalva retinopathy, blood dyscrasia, ocular trauma, and Terson syndrome. The hemorrhage may clear spontaneously, but it can persist for several months leading to further retinal damage, especially upon a large hemorrhagic collection.

Methods: We report a case of a 52 years-old woman submitted to PPV to treat a sub-ILM hemorrhage

Results: A 52 years-old woman presented to the emergency department with a sudden visual loss in the left eye (OS) on the same day. There was no history of trauma, evident Valsalva maneuver or other symptoms. Aside from controlled systemic hypertension and an history of OS amblyopia due to congenital astigmatism with intracorneal ring segment implantation, the patient was apparently healthy. Visual acuity was counting fingers in the left eye. Anterior segment and intraocular pressure were unremarkable, apart from a well-positioned ring segment in the left cornea. Fundoscopy showed an apparent preretinal hemorrhage involving the macula in OS with few flame-shaped hemorrhages near the proximal vascular arcades. The optic disc was apparently normal and the remaining retina was attached and without lesions. Macular optical coherence tomography confirmed a large subhyaloid and sub-ILM hemorrhagic collection. Study for blood dyscrasia was normal. The patient was submitted to PPV to clear the hemorrhage and for ILM peeling. The hemorrhage was effectively cleared with fast visual recovery.

Conclusion: Sub-ILM hemorrhages can be observed only, but care must be taken for large collections unlikely to clear quickly. In these cases, a PPV can be performed in order to prevent irreversible retinal damage.