LETTER TO THE EDITOR

Expulsive total iridodialysis through microincision phacoemulsification wound

Iridodialyse expulsive totale par phacoémulsification en micro-incisions avec exposition complète des procès ciliaires

Two weeks after microincision cataract surgery, a 74-year-old patient was seen in our center for pain and visual acuity (VA) loss after blunt orbital trauma. He presented with VA of light perception and localized pain. Slit lamp examination revealed total hyphema (Fig. 1), negative Seidel sign, eyelid swelling and intraocular pressure (IOP) of 38 mmHg. Echography ruled out retinal detachment or involvement of the intraocular lens (IOL) and orbital CT scan showed fractures of the inferior and nasal wall of the orbit without muscle involvement. The patient was treated with acetazolamide 250 mg, potassium supplements, timolol + brimonidine, atropine and dexamethasone drops.

After several follow up visits that allowed for progressive weaning of medications, the work-up showed complete resolution of the hyphema, revealing a 360° absence of the iris and blood debris inside the corneal incision (Fig. 2). The IOL, lens capsule, Zinn’s zonules and ciliary processes were all intact (Figs. 3, 4). The VA reached 0.4 Snellen and the IOP was 12 mmHg.

Several hypotheses have been proposed to explain the few cases found in the literature [1–9]. They include macrophage phagocytosis, iris ejection through a new traumatic wound and iris ejection though a quick opening of the surgical incision. In our case, a sudden increase of intraocular pressure consecutive to blunt trauma could have produced a valve mechanism ejection through the corneal incision.

Figure 1. Slit lamp examination revealed complete hyphema.

Figure 2. Retroilumination using slit lamp shows resolution of the hyphema, complete absence of the iris. Ciliaty processes are visible.

Figure 3. Gonioscopy of the inferior quadrant revealing a 360° absence of the iris. IOL, lens capsule, Zinn’s zonules and ciliary processes were all intact.
Figure 4. Gonioscopy of the temporal quadrant revealing a 360° absence of the iris. IOL, lens capsule, Zinn’s zonules and ciliary processes were all intact.

Disclosure of interest

The authors declare that they have no competing interest.

References


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