



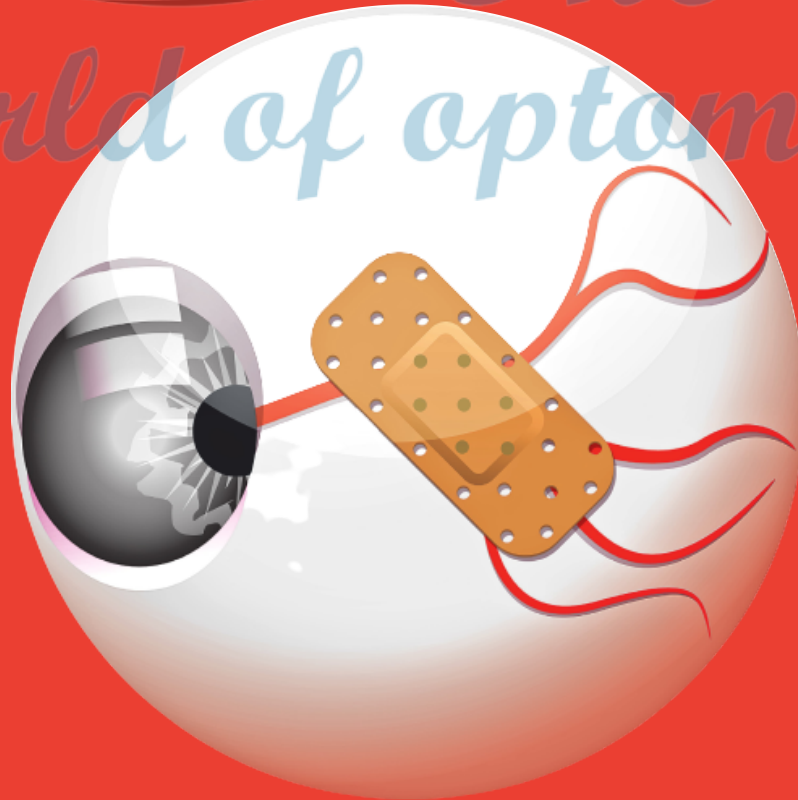
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Twop Case Study

Proliferative Diabetic Retinopathy

LOW VISION APPROACH

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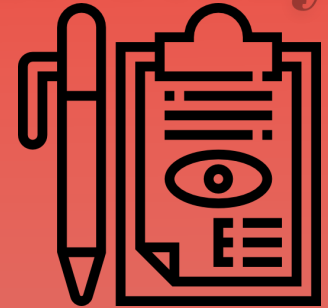
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Patient History



CHIEF COMPLAINTS: 52 year old male presented to the clinic with his sibling c/o progressive blurry vision with tearing and gritty sensation. Patient reported difficulty of reading.

OCULAR HISTORY: Wears spectacles for 12 years.

LOW VISION HISTORY: Used magnifiers (3.5 x and 5.0 x) for 2 years. Inconsistent use.

MEDICAL HISTORY: Diabetes and hypertension. Under insulin medication.

FAMILY HISTORY:

Accompanying sibling is having retinitis pigmentosa.



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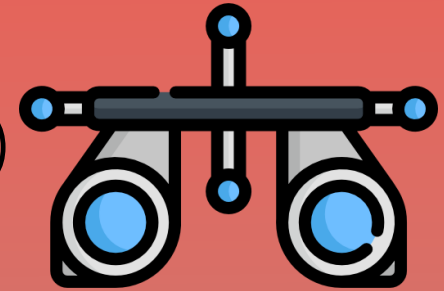


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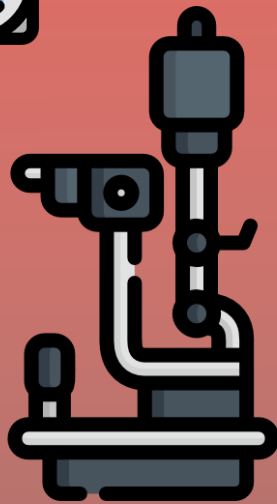
Ocular Examination

Visual Acuity: RE: HM (PH: 0.015 LogMAR)
LE: HM (PH: CF @ 2 m)



Spectacle RX: RE: -14.25 DS / -7.00 DC x 30
LE: -12.75 DS / -10.25 DC x 140

IOP (Tonopen): RE: 9 mmHg LE: 21 mmHg



SLE: BE: Developing Pterygium, Immature Cataracts, shrunken vessels, Retinal bleeding with 90D.



Fundoscopy: BE: Diabetic spots on retina, CDR 0.8 at RE, 1.0 at LE, Slight Pigmentosa.



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Outpatient Review

Blood Glucose: 11 mmol/L

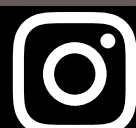
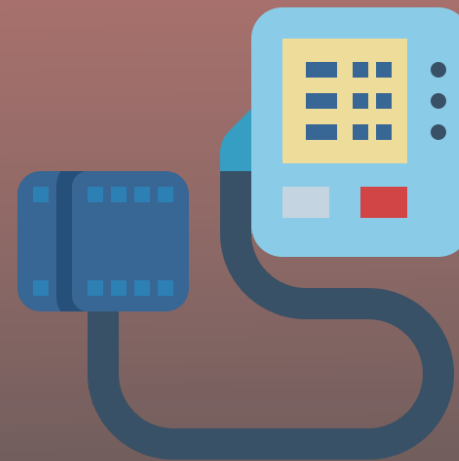
- [Normal: < 7.8 mmol/L]

Systolic / Diastolic Pressure:

145/90 mmHg

- [Normal: 120/80 mmHg]

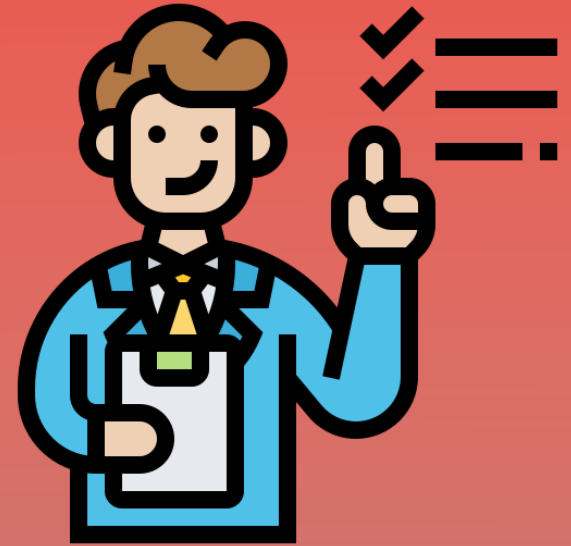
Heart Pulse Rate: 74 beats per minute



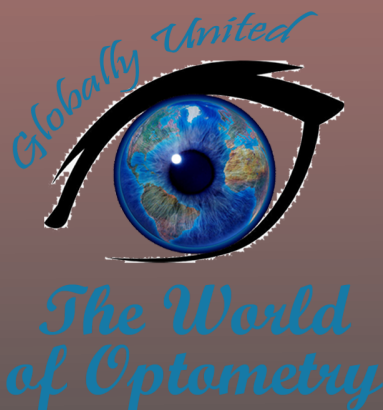
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Diagnosis



PROLIFERATIVE DIABETIC
RETINOPATHY



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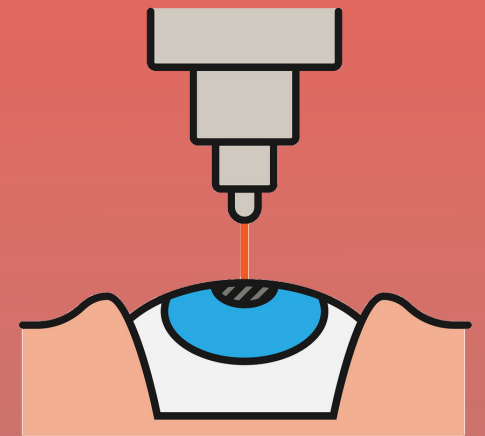


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Management

- Referred patient for laser photocoagulation in March.
- July- OCT examination post surgery
- RE: Posterior bleeding stopped
- LE: Hazy reflex
- TCA: 5/12 for adequate healing process in relation to patient's age



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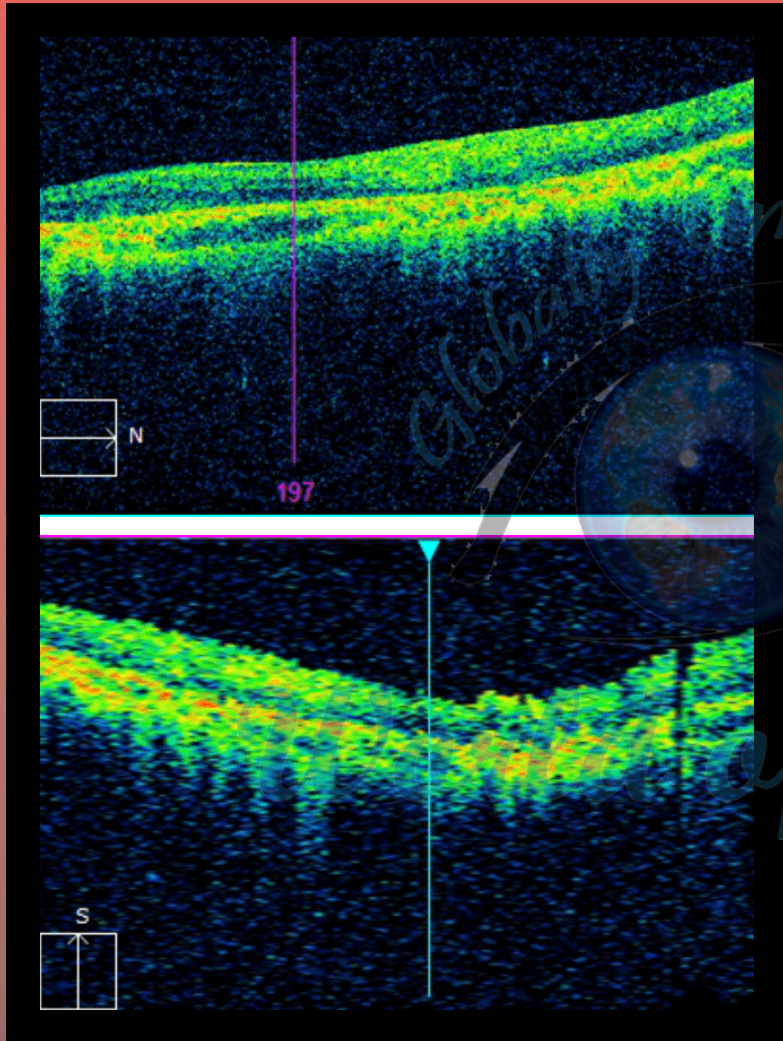


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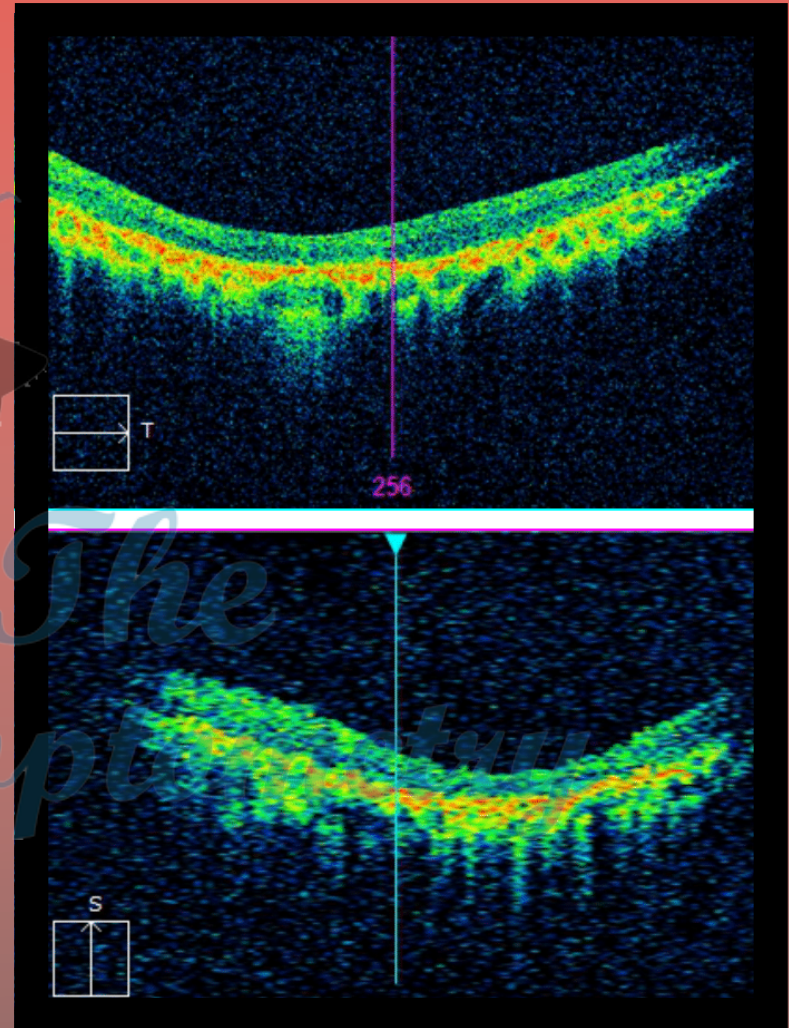
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OCT Imaging



Right Eye



Left Eye



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F/up Examination Findings & Management

- **SLE:** Retina cleared with laser spots in BE

- **Objective RX:**

RE: -5.00 DS / -4.25 DC x 40

LE: -4.75 DS / -1.75 DC x 140



- **Subjective RX:**

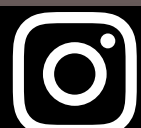
RE: -4.75 DS / -4.00 DC x 35 (VA: 0.50 LogMAR)

LE: -4.75 DS / -1.75 DC x 150 (VA: 0.10 LogMAR)

Near Vision: 20/160 with and without +2.25 D.

- Patient preferred without ADD.

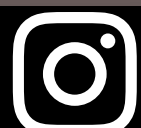
- **Remarks:** Neutral retinoscopy in BE



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Management

- Artificial tears for xerosis.
- Monitor glaucomatous changes.
- Advise patient to continue on diabetic medication.
- Advise on 3 month routine eye examination for monitoring diabetic changes.

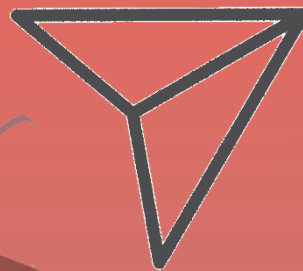




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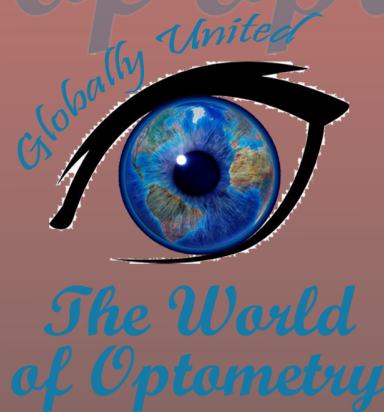


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