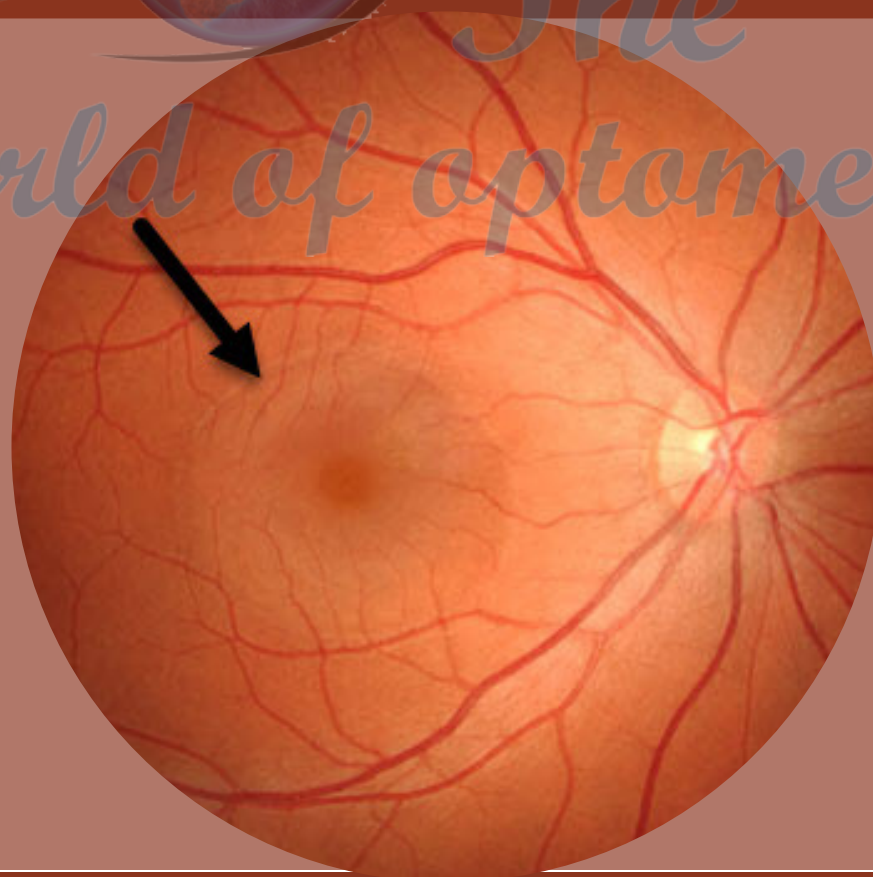




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# Two Case Study

## Age Related Macular Degeneration



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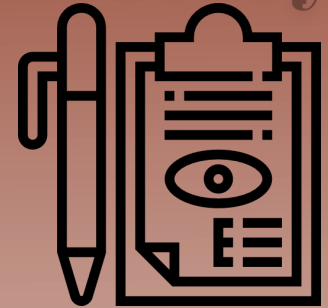


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# Patient History

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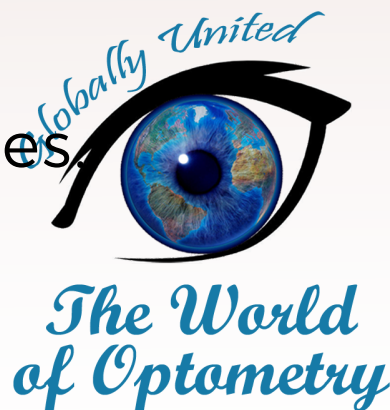


**CHIEF COMPLAINTS:** 58 years old, Female, no history of wearing spectacles, Stopped wearing spectacles after retirement, 3 years ago and given 11 years ago. % Progressive Diminishing Vision

**OCULAR HISTORY:** Known DM for 14 yrs, under management

**PAST MEDICAL HISTORY:** None

**FAMILY HISTORY:** Not known hx of ocular diseases.



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# Ocular Examination

## Visual Acuity

- O/E V/A OD 0.25 OS 0.3 Near 20/160

## Objective Refraction

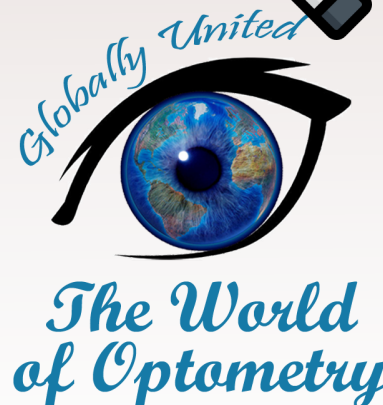
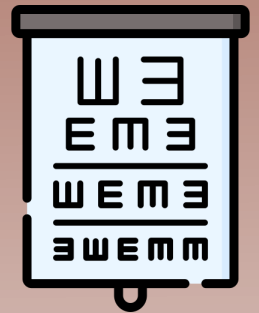
- OD -1.25/-0.75 x 120 OS -1.75/-1.00 x 60  
Add +3.00  
Aided VA No significant vision improvement

## Fundus Evaluation

- Cotton wool spots. Mild blood spots noted, macula oedema, Left Eye signs of Diabetic Retinopathy at the Nasal Superior part.

## Slit Lamp Findings

- Mild proptosis and age related ptosis, Senile Conjunctival Xerosis, Slight pigmentation and injection. Arcus Senulis marginal not severe doesn't interfere with vision. Quiet Anterior chamber, Active pupil, small cataract

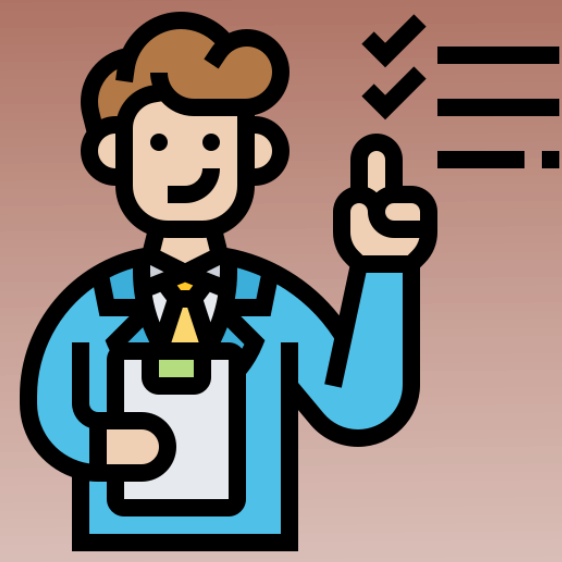


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DRAG TO THE SIDE

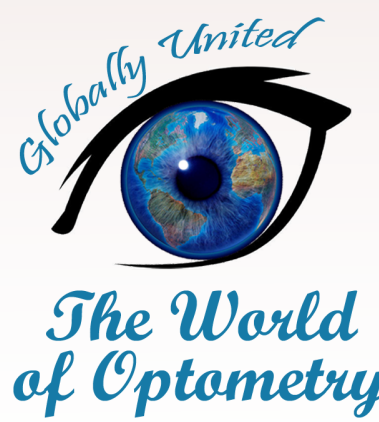
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# Diagnosis

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# AGE RELATED MACULAR DEGENERATION



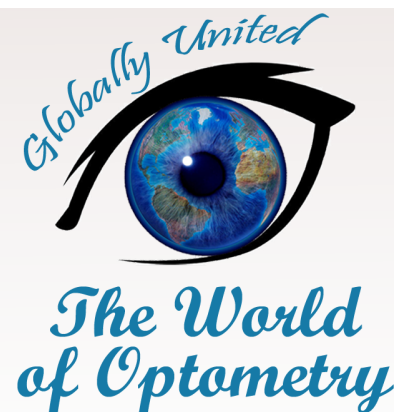
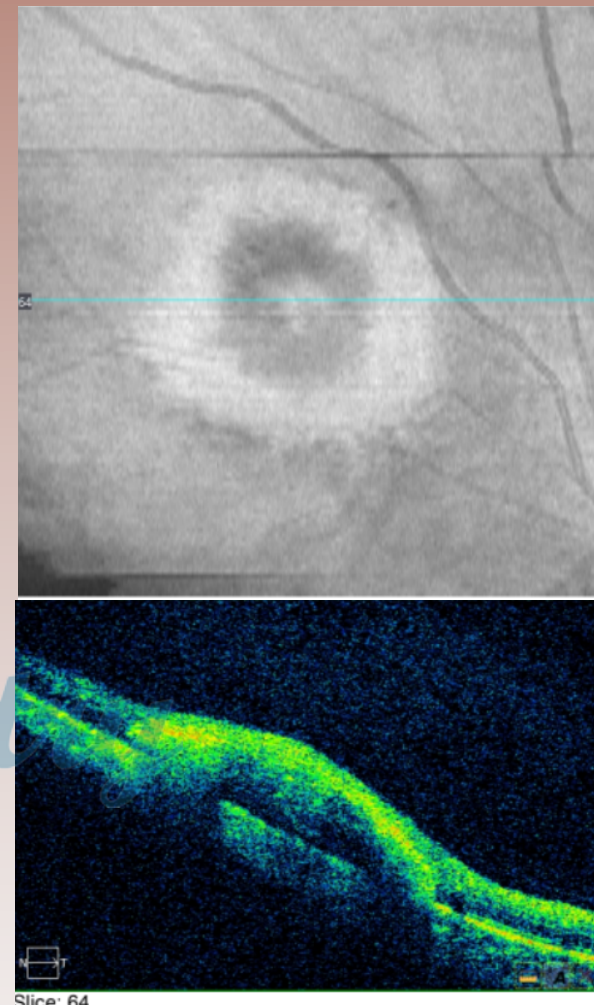
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# Discussion

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## OCT?

In the image of the Macular hole, the same scan is represented in gray scale and color scale. An oval hole at the center of the fovea is visible surrounded by relatively regular cystic formations, elongated towards the center and inside the margins of the hole. Which are thickened margins because they intersect the ILM and the IS/OS junction which points towards one another.



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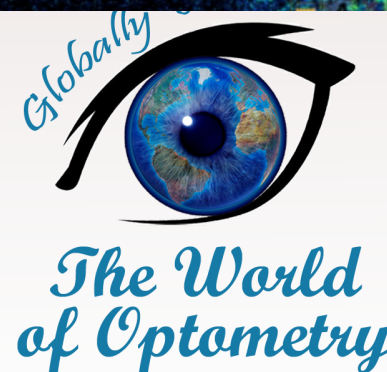
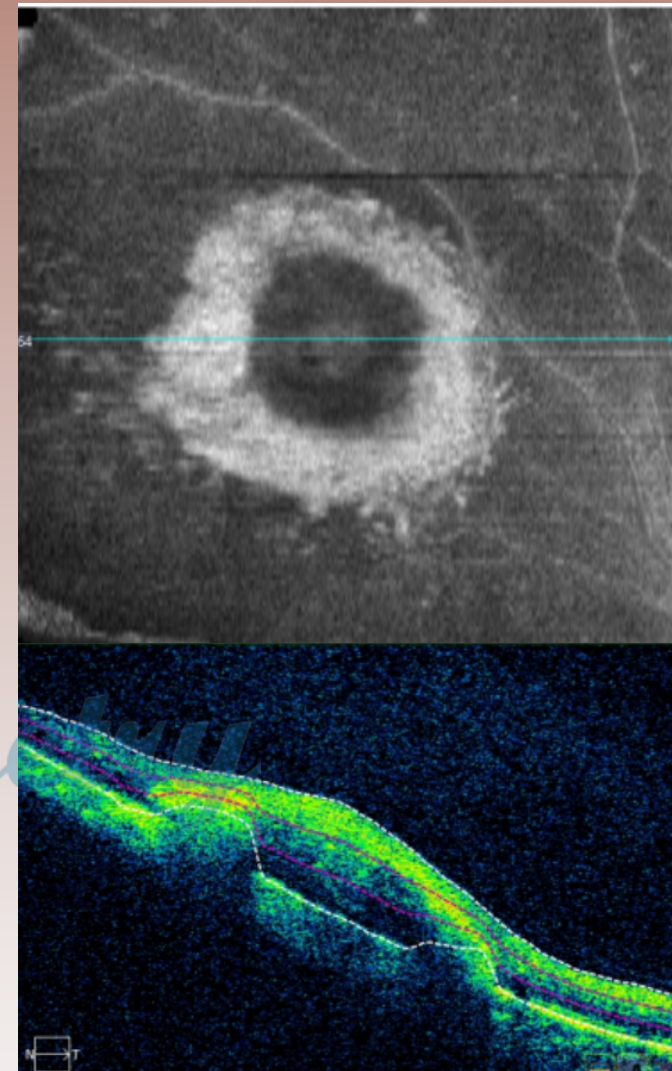


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# Discussion

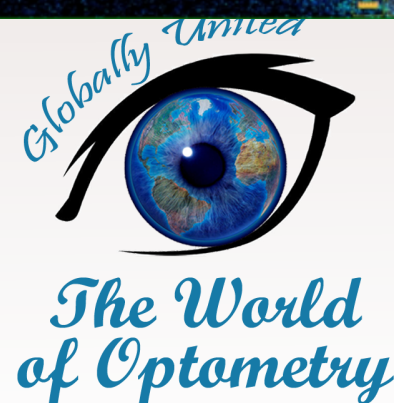
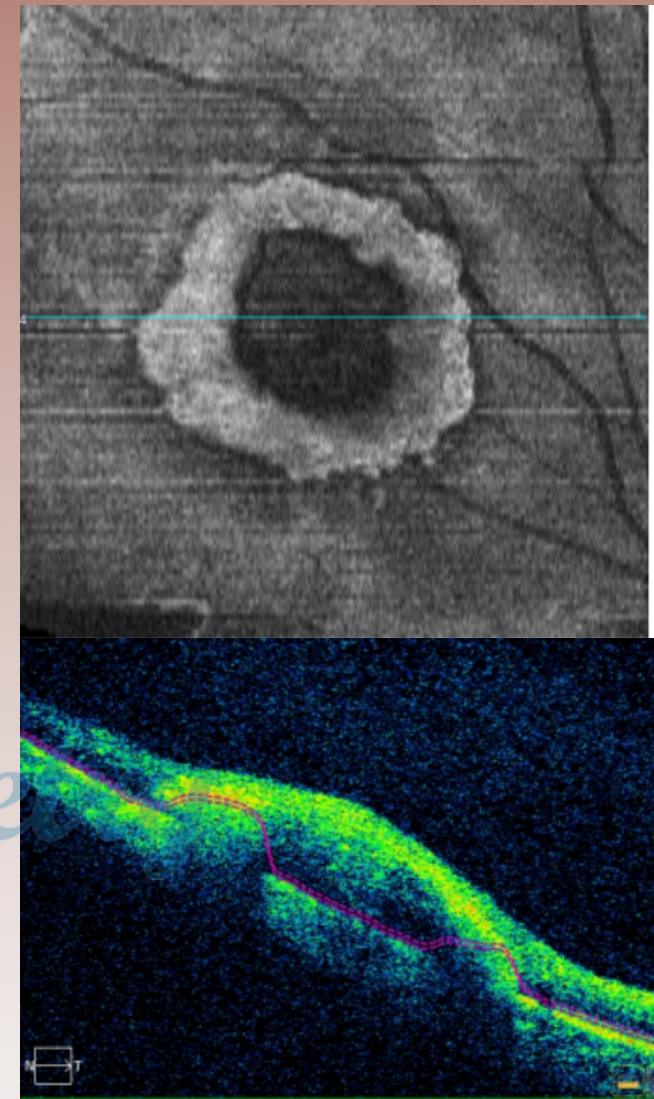
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- In this case of age related Macular degeneration, the neovascular membrane is elongated, fusiform and locates in front of the RPE. The lesions of the RPE and Buch's membrane can be distinguished. Note the slight detachment of the neuroretina and the diffuse edema that surround it. Pseudo cystic cavities of edema do not appear



# Discussion

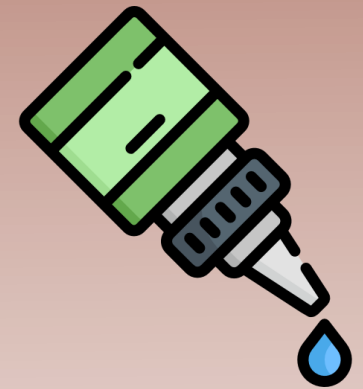
- Edema and detachment of the neuroretina are always present with active nerve fibre membrane, whether they're classic or occult
- Undulation and a localized increase in thickness of the RPE/choriocapillaris corresponding to Drusen can be seen. A medium reflective substance fills the drusen. Bruch's membrane may be visible as a thin line.



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# Management & Treatment

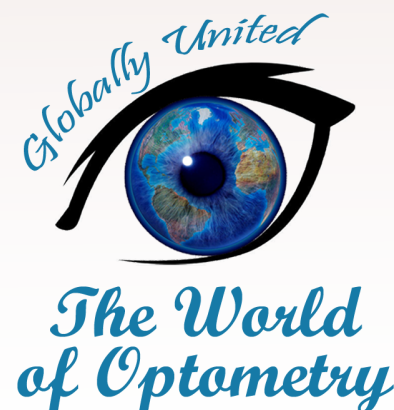
- Since there was no significant change in its refractive correction and patient only required assistance of immediate near vision requirement, we tried Hand Held Magnifier of x2.5 and x3 which improved near VA to 20/50



- Prescribed X2.5 Hand held Luminated magnifier



- Patient Advised to control DM and continue Clinical Management and TCA monthly for Low Vision Prevention clinical reviews since Vision is irreversible.







Wow, what a cool content



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