Figure

Perimetry testing and CT imaging

Chiasmal visual loss after retinal detachment

(A) Perimetry testing demonstrated reduced sensitivity in the temporal field of the left eye (contralateral to the retinal detachment). (B, C) A CT scan revealed gas within the right globe, tracking through the right optic nerve into the optic chiasm (arrows). Gas was also present in the lateral ventricles.

A 52-year-old man developed severe vision loss in the right eye due to a large retinal detachment. Vitrectomy was performed in that eye, with 15% C3F8 perfluoropropane gas injected into the posterior chamber. He transiently regained hand-motion acuity. Posterior chamber paracentesis was performed for elevated intraocular pressure; endophthalmitis was treated with intraocular antibiotics. After 1 week, blurred vision occurred in the left eye, with intact central acuity and a temporal field deficit (figure). CT imaging demonstrated migration of intraocular gas into the optic nerve and chiasm. Chiasmal visual loss is a rare complication of pneumatic retinopexy.

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 Chan CK, Lin SG, Nuthi AS, Salib DM. Pneumatic retinopexy for the repair of retinal detachments: a comprehensive review (1986–2007). Surv Ophthalmol 2008;53:443–78.



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