

Traumatic Anterior Dislocation of the Crystalline lens in a White Eye and its Surprising Post-operative Outcome

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Clinical Image

This is a case of a 66-year-old male who had sustained a blunt ocular trauma 15 days back, resulting in anterior dislocation of the crystalline lens and acute painful visual loss in the right eye (Figure 1). At presentation, visual acuity was HM+ and intraocular pressure was 28 mmHg in right eye. The patient was managed with antiglaucoma medications for secondary glaucoma, anterior vitrectomy and manual small incision cataract surgery (MSICS) was performed under 100 ml IV mannitol for cataract extraction. Since there was no capsular support, Aphakia was corrected by a scleral fixated intraocular (PCIOL) lens. On examination on post-operative day 1, IOL was stable and visual acuity was 6/6 in the right eye. Two months after the surgery, the best corrected visual acuity remained stable with 6/6 in right eye. The vision and retina remained stable in her follow-up examination

6 months later. With anterior lens luxation, the lens pushes into the iris or actually enters the anterior chamber of the eye [1]. This can cause severe complications like glaucoma, uveitis, or damage to the cornea, so that dislocated lens should be removed immediately [2,3]. Meticulous examination and timely intervention can salvage traumatic eyes and can result in excellent post-operative visual outcome.

References

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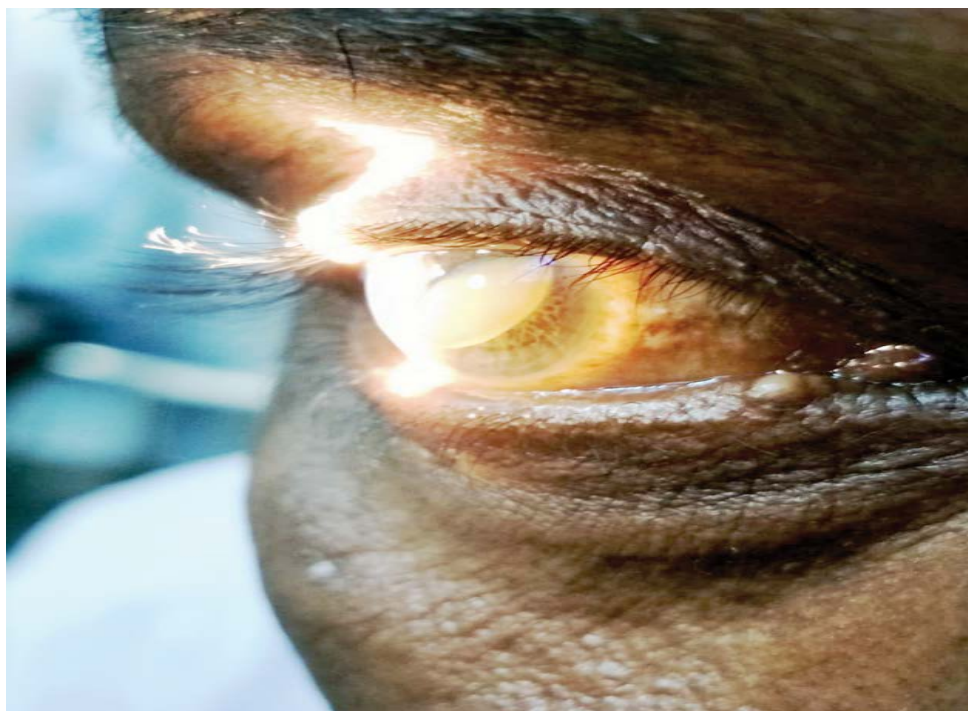


Figure 1: The anterior dislocation of the crystalline lens.

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