

Clinical Image

Small Halo in Big Eyes

Aparna Rao* and Debanand Padhy

LV Prasad Eye Institute, India

***Corresponding author:** Aparna Rao, Glaucoma Services, LV Prasad Eye Institute, Patia, Bhubaneswar 751024, India**Received:** August 20, 2014; **Accepted:** September 17, 2014; **Published:** September 19, 2014**Clinical Image**

A 12 year old female presented with gradual decrease in vision in both eyes since 3 years. She was wearing glasses (-18dioptre sphere in both eyes) since 4 years. On examination, she was thin built female with no normal higher mental functions and no systemic abnormalities. Ocular examination revealed best corrected visual acuity of 20/30 in both eyes; raised intraocular pressure of 32mm hg in both eyes with enlarged corneal diameter with no evident limbal stretching, deep anterior chamber (Table1), gross iridodonesis (shakiness of the iris) and phacodonesis (shakiness of the lens) with clear lens in both eyes. Dilated fundus evaluation revealed a small clear lens (AP diameter 3.1mm and 3.2mm).The equator of the lens was visible in the undilated state with intact but long zonules. Fundus evaluation showed small discs with minimal glaucomatous cupping in the right eye. Paediatric evaluation ruled out other systemic associations. Uncontrolled IOP warranted augmentation of medical therapy. Close follow up is mandatory to look for glaucomatous changes in the optic nerve and subluxation of the lenses anteriorly or posteriorly which may precipitate acute angle closure in these eyes.

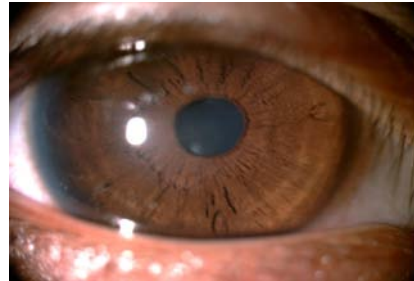


Figure 1: Slit lamp photograph showing large corneal diameter with no limbal stretching.



Figure 2: Slit lamp photograph showing a small globular clear lens (halo) with equator of the lens easily visible through dilated pupils.