

# NONARTERITIC ANTERIOR ISCHEMIC OPTIC NEUROPATHY FOLLOWING CATARACT EXTRACTION: CASE REPORT

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## PURPOSE

Cataract extraction is the most commonly performed ophthalmic surgery. Although is not free of complications. Nonarteritic anterior ischemic optic neuropathy (NAION) is one of the worst complications that can occur. Two distinct categories of cataract extraction-associated NAION have been reported: Immediate type, which occurs within hours to days after surgery, and delayed type, which occurs weeks to months after surgery, without prior visual involvement. Approximately one occurrence of NAION is expected in every 2000 cataract extractions, and a history of this disease in the fellow eye may be an additional risk factor. (2,3)

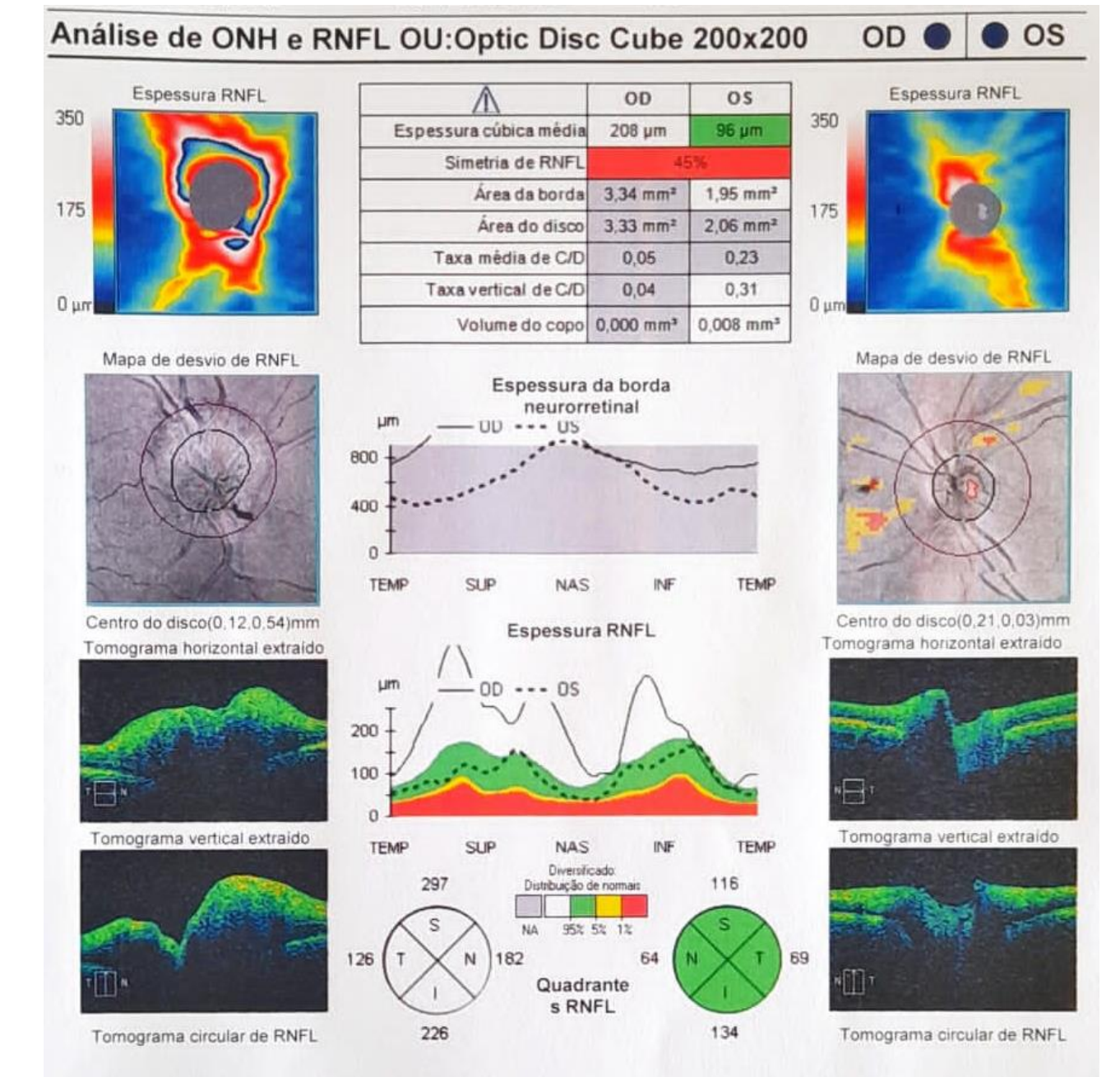
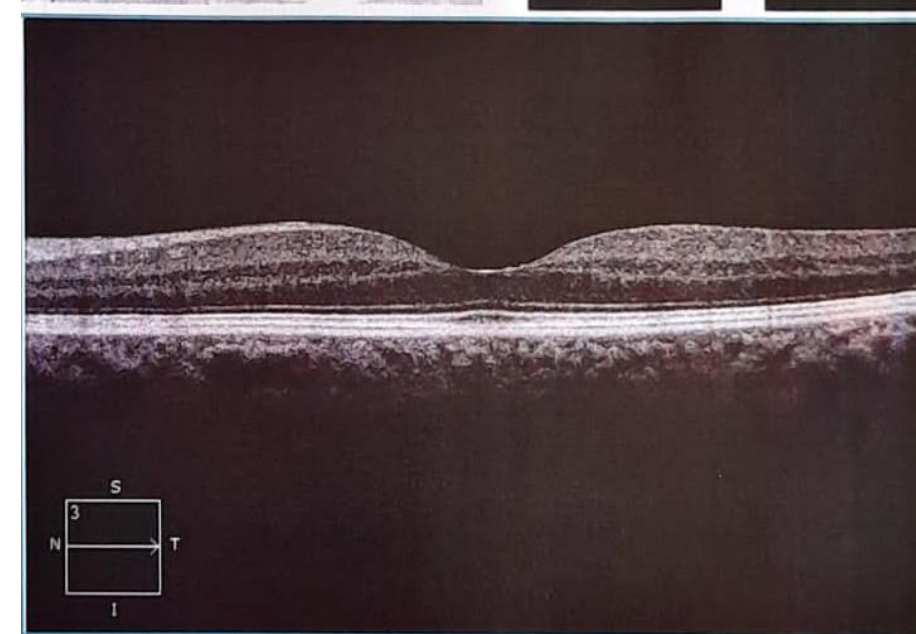
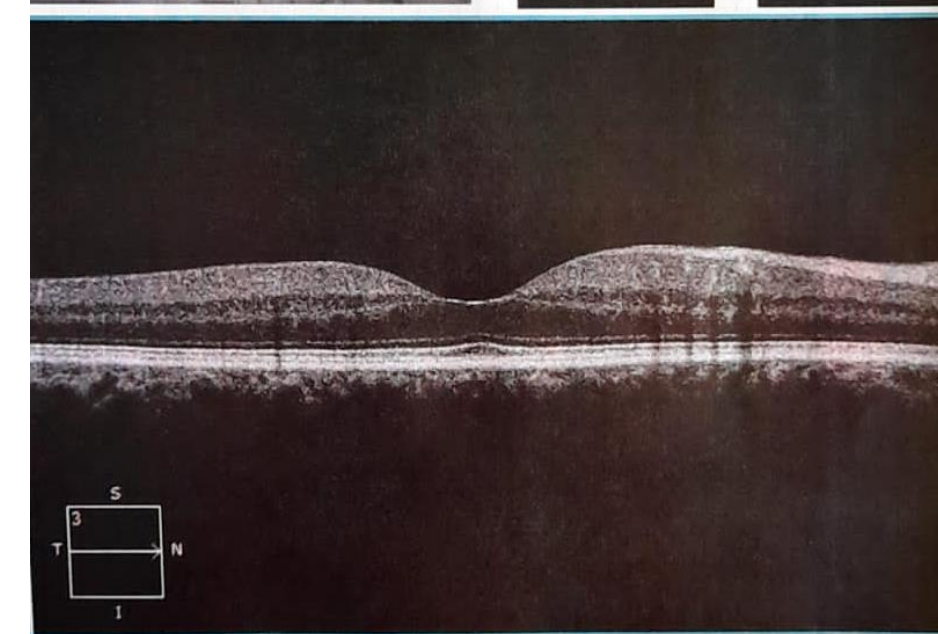
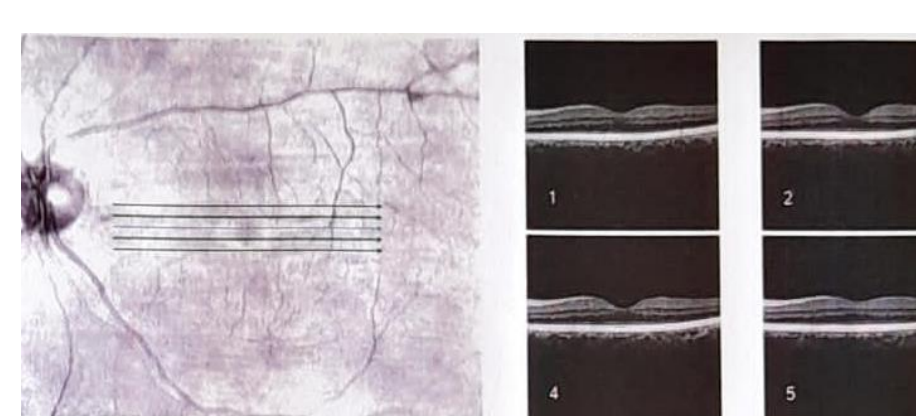
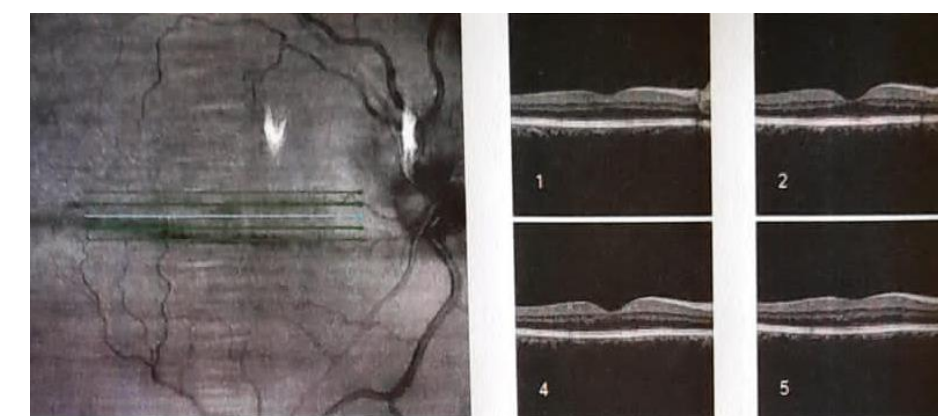
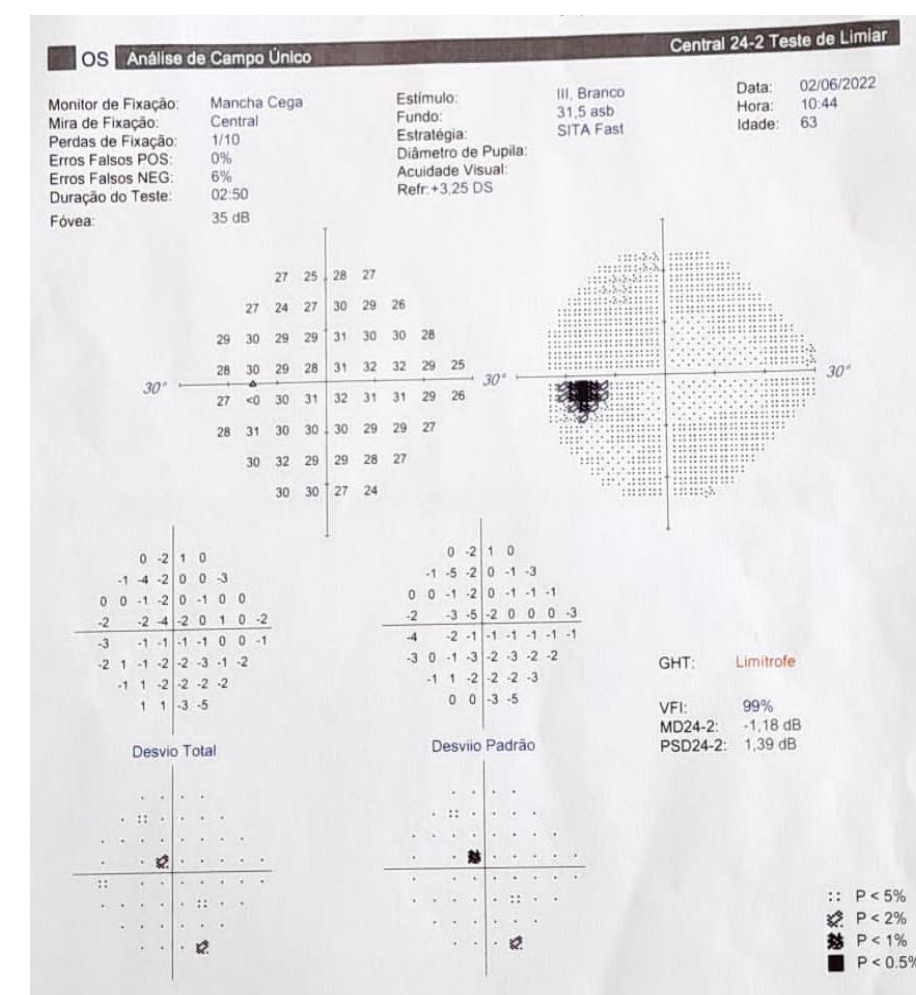
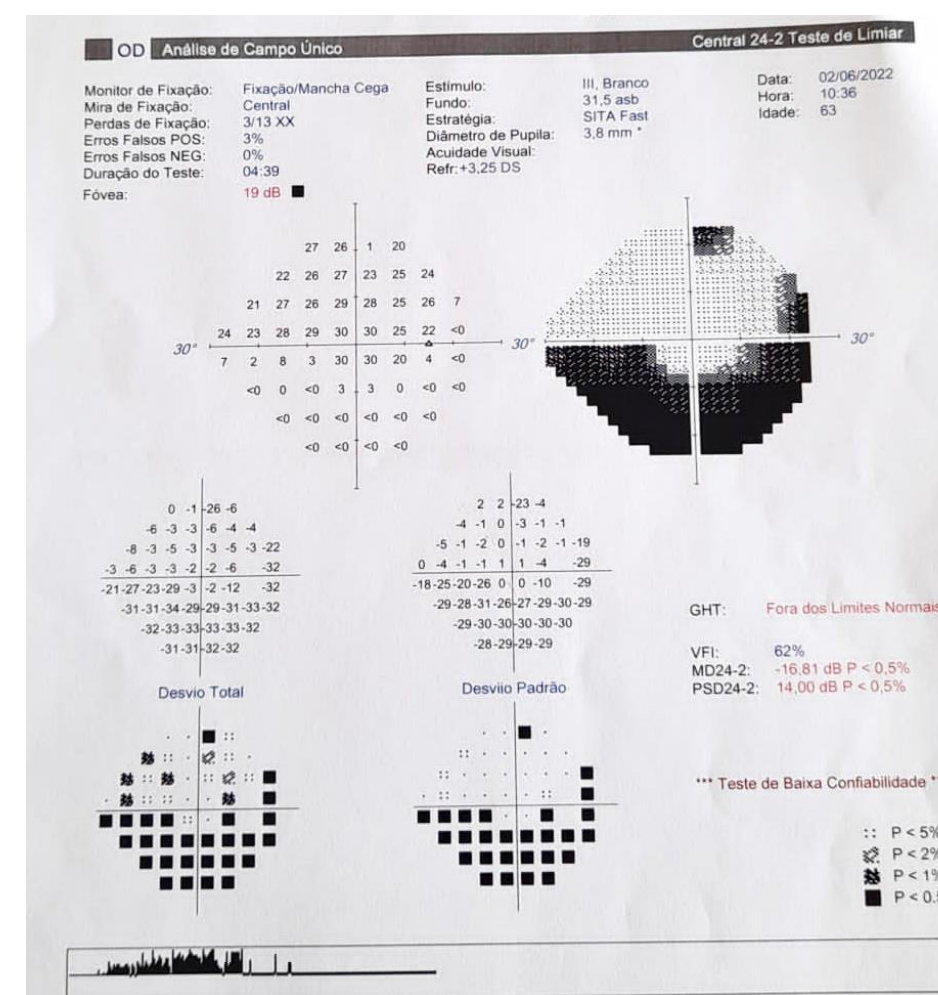
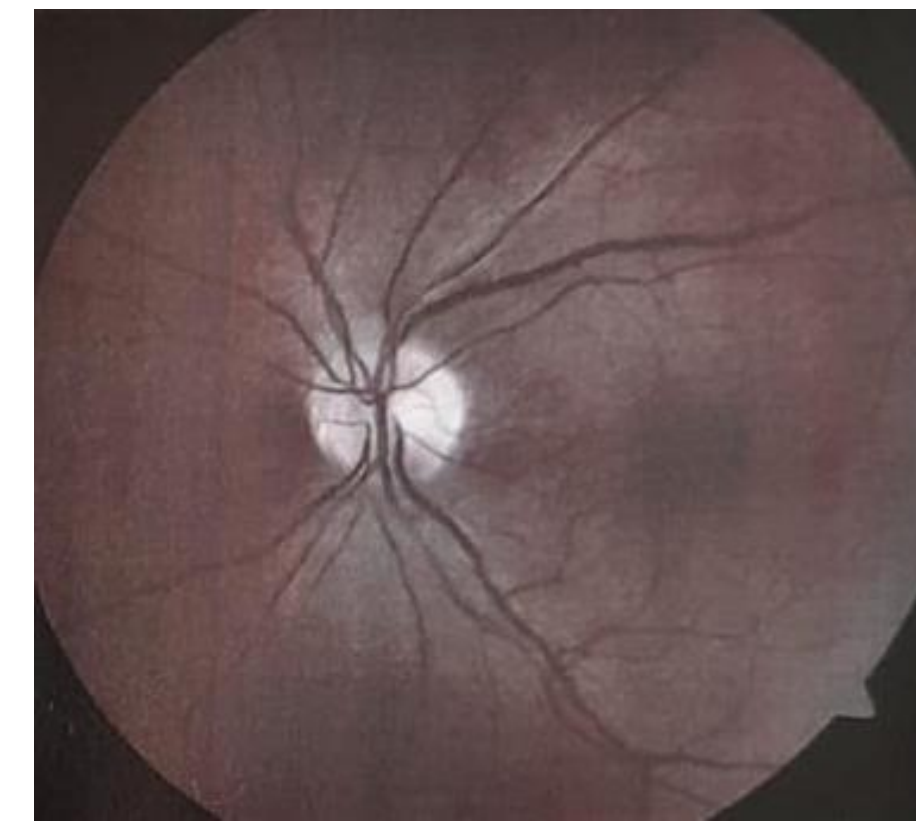
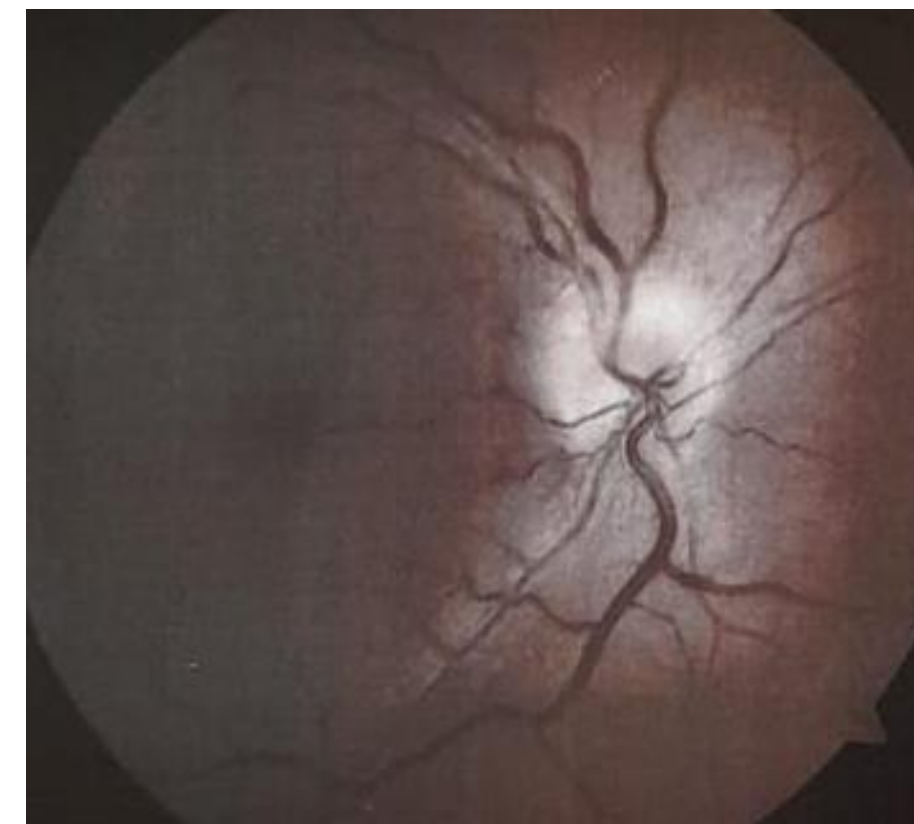
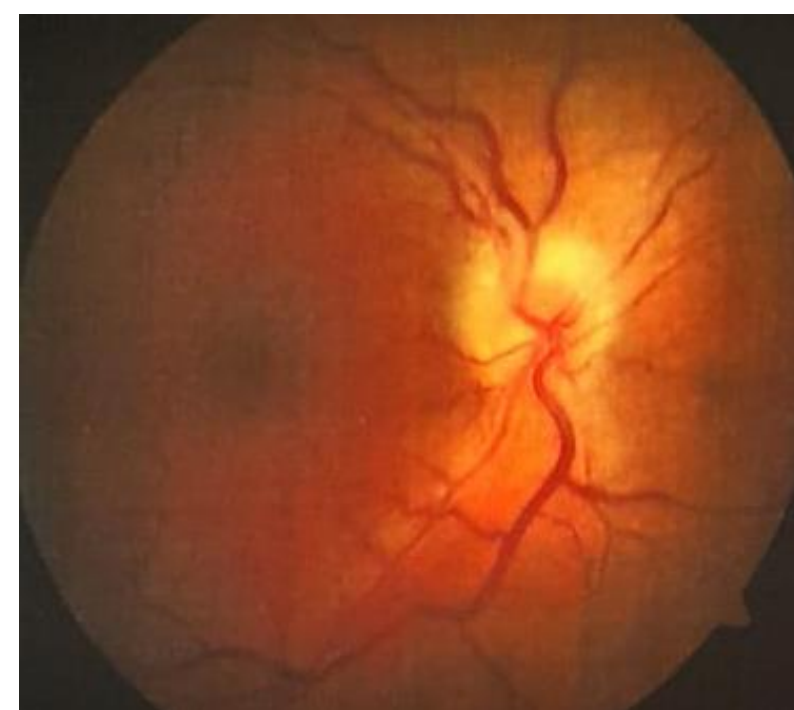
## METHODS

Analysis of medical records from the Brazilian Center for Vision (CBV), interview with the patient and literature review.

## RESULTS

A 63 years, female, examined at (CBV) for removal of a mature cataract of her right eye. No medical and ophthalmologic past history. BCVA was 0.79 in both eyes. Biomicroscopy reveals mature cataract. Ophthalmoscopy demonstrated optic nerve with normal cup, without other relevant findings in both eyes. The phacoemulsification was performed uneventfully, evolving with BCVA 1.0. After 1 month she returns reporting a brown spot on the operated eye upon waking up presenting a BCVA 0.63. Prednisone 60mg per day was started with gradual weekly weaning. Evolving with total recovery of BCVA but field sequel.

## IMAGES



## DISCUSSION

In this case report we present a patient who had delayed-type NAION following uncomplicated cataract extraction. The most accepted hypothesis suggests that the surgical insult causes an inflammatory reaction, causing optic disc edema and progressive ischemic damage resulting in NAION. Due to the fact that some studies have not shown an association between systemic arterial hypertension or small cupping of the optic nerve in the contralateral eye and spontaneous NAION, phacoemulsification seems to be an isolated risk factor (2).

## REFERENCES

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