

Valsalva Retinopathy

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Introduction/Purpose: Valsalva Retinopathy is defined as a preretinal hemorrhage secondary to a sudden rise in intrathoracic or intra-abdominal pressure, which reduces venous return to the heart and increases venous system pressure, leading to rupture of superficial retinal capillaries. Our purpose is to present a Valsalva retinopathy case in a young adult after weight training.

Case Report: A 26-year-old healthy male with a history of sudden and painless reduction of the temporal visual field of the right eye after intense weightlifting (bench press). He had no medical problems or previous ocular diseases.

His visual acuity was 20/20 bilaterally, and confrontation visual field detected right eye temporal deficit. The anterior segment was normal in both eyes. Fundus examination of the right eye revealed extensive preretinal hemorrhage with upper fluid level nasal to the optic disc (Figure 1). The left eye was normal. On OCT 5-line (Figure 2), there was an interface sub-ILM.

Due to the location and maintenance of visual acuity, a conservative approach (observation) was assumed. After four months, the patient presented clinical improvement of the symptoms with spontaneous gradual regression of the lesion (Figures 3-4).

Discussion: Valsalva retinopathy has an excellent prognosis with spontaneous resolution of bleeding in almost all cases, justifying the conservative approach. Depending on factors such as laterality, location, size, duration, and urgency for good vision, more invasive procedures are available, such as Neodymium-doped yttrium aluminum garnet hyaloidotomy, intravitreal gas injection for a pneumatic displacement of hemorrhage and pars plana vitrectomy. However, it is essential to consider the surgical risks and possible complications that include a macular hole, retinal detachment, epiretinal membrane, and cataract formation.



Figure 1 – October/2022

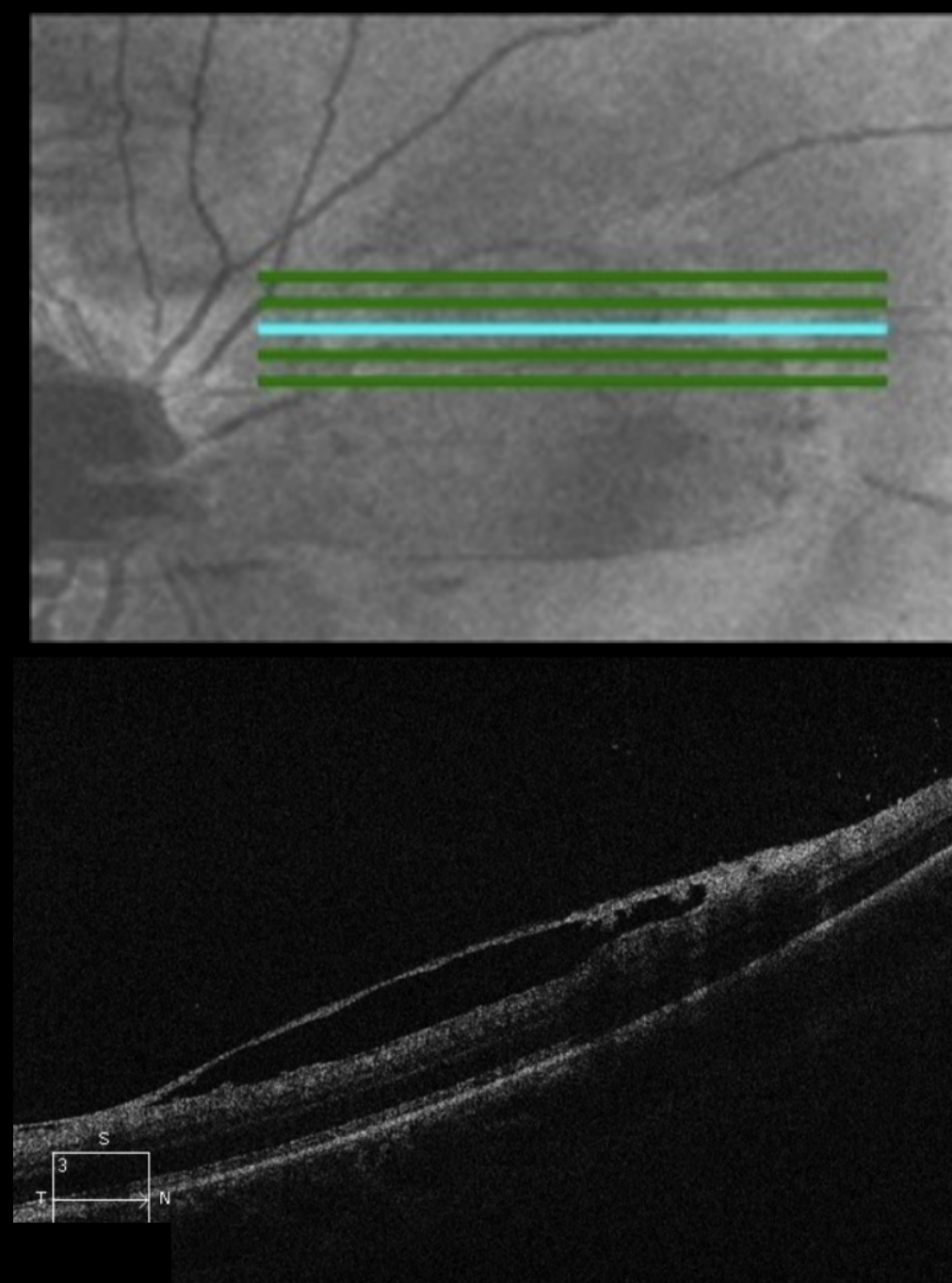


Figure 2 – OCT 5-Line (Jan/23)

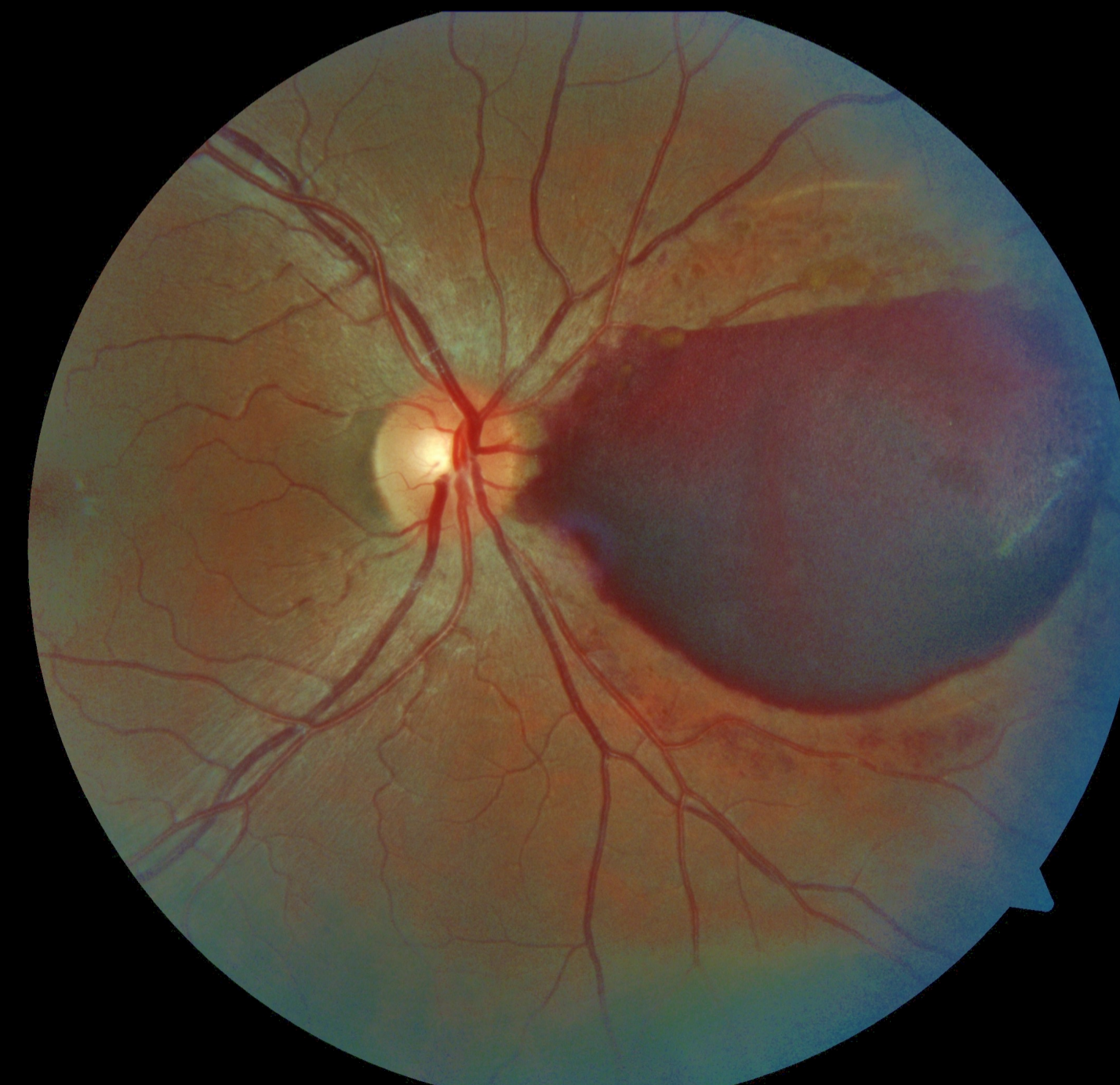


Figure 3 – November/2022



Figure 4 – January/2023