



NONARTERITIC ISCHEMIC OPTIC NEUROPATHY AFTER CATARACT SURGERY

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Case Report

A 73 years old male patient, diabetic, complained of superior hemifield scotoma in the left eye (LE), beginning 14 days after cataract surgery, sudden and painless onset, when he woke up. Already submitted to cataract surgery in both eyes.

Ophthalmological examination:

- Best Visual Acuity

RE: 20/20

LE: 20/25 (raising the head)

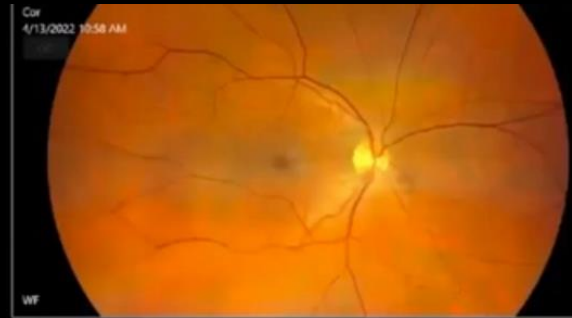
- Biomicroscopy and IOP normal in both eyes.

Case Report:

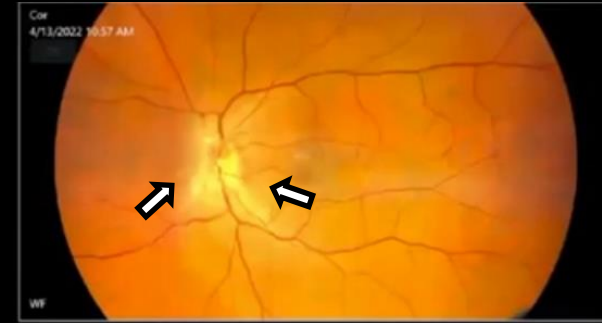
- Fundoscopy:

RE: normal

LE: optic disc edema inferiorly, no macular changes



OD

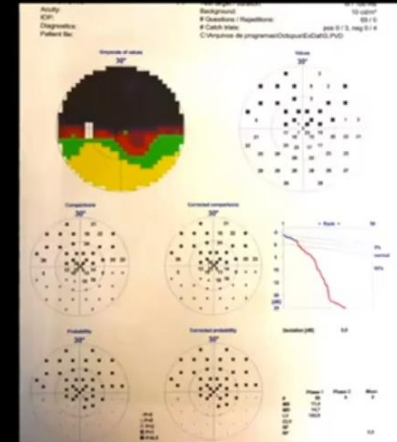
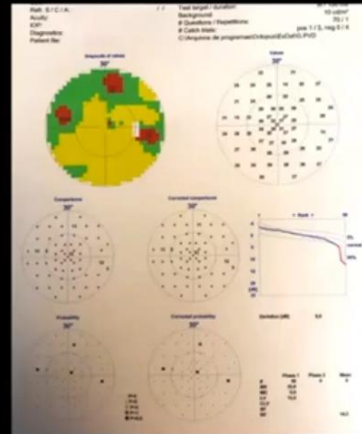


OE

- Computerized Visual Field:

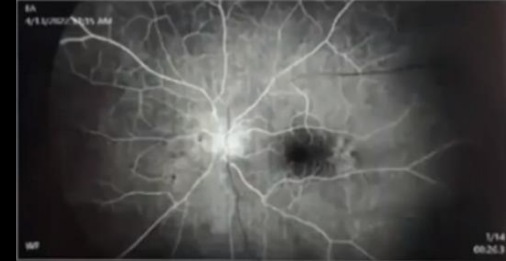
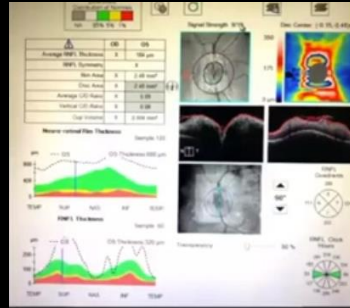
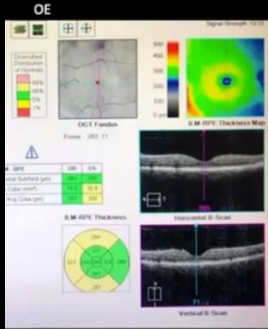
RE: unspecific findings

LE: altitudinal defect superiorly



Case Report:

- Complementary imaging exams in left eye



OCT: no macular alterations; thickening of the nerve fiber layer of the disc consistent with edema

Fluorescein angiography: optic disc hyperfluorescence due to leakage

Laboratorial exams, ABPM, carotid doppler and magnetic resonance of the skull and orbits: Without significant alterations

Non-arteritic Ischemic Optic Neuropathy after Cataract Surgery

- Most frecuente cause of acute injury to the optic nerve head
- **Pathophysiology:** circulatory insufficiency due a non-inflammatory vasculopathy or hypoperfusion
- **Clinical presentation:** sudden and painless loss of monocular vision, usually on awakening, as a result of a decrease in visual acuity and/or a perimetric defect.
- **Risk factors:**

Systemic

- Vasculopathy (SAH, DM, dyslipidemia and smoking)
 - Obstructive sleep apnea
 - Nocturnal systemic hypotension
 - Hypercoagulability
- **Treatment:** risk factor control, oral steroids
 - **Prophylaxis:** Aspirin administration (100-325 mg/day) can reduce the short-term frequency of second eye involvement

Ocular

- Anatomy: small and crowded optic disc
- Anterior segment surgeries
- One NAION is expected to occur in every 2000 cataract extractions
- Previous NAION increases risk in the contralateral eye