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Case report: Tilting of foldable PCIOL masquerading as malignant glaucoma

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Abstract: Two females reported to us with complaints of blurred vision & pain along with signs suggestive of malignant glaucoma post cataract surgery, operated elsewhere. B-scan showed posterior segment within normal limits, so we treated them first with YAG laser peripheral iridotomy (PI) & peripheral anterior hyaloidotomy through PI with antiglaucoma medications (AGM) & topical Atropine but in follow up, anterior chamber (AC) was found to be shallow with one haptic of foldable posterior chamber intraocular lens (PCIOL) in sulcus tilting forward seen in dilated pupil under the effect of topical atropine responsible for causing condition masquerading as malignant glaucoma. Then, the cases were treated by redialing of IOLs in bag in both the cases. Post redialing, there was improvement of visual acuity (VA) along with reformation of AC with normal depth & Goldmann applanation intraocular pressure (GAT IOP) was also under control.

Case 1: VA - 2/60, very shallow AC, GAT IOP - 54 mmHg with AGM, presented to us 2 months after cataract surgery, operated elsewhere. Patent PI with peripheral anterior hyaloidotomy through PI was done. Redialing of IOL & trabeculectomy with small ostium done due to presence of peripheral anterior synechiae > 200 degrees & GAT IOP - 68 mmHg, did 6 months after cataract surgery as patient followed to us late due to some systemic problem. After 6 weeks best corrected visual acuity (BCVA) - 6/18, AC well formed, IOL in bag, IOP-15 mmHg without any AGM, fundus - disc C:D 0.6.

Case 2: VA - 2/60, shallow AC, GAT IOP - 30 mmHg reported to us 20 days after cataract surgery, operated elsewhere. Patent PI and peripheral anterior hyaloidotomy through PI was done. Post redialing of IOL, after 4 weeks BCVA - 6/9, AC well formed, IOL in bag, GAT IOP-17 mmHg without any AGM.

Conclusion: Tilting of foldable IOL can masquerade as malignant glaucoma, so assess case carefully and do management accordingly.

Biography

Shakun Gupta is recently working in Indira Gandhi Eye Hospital and Research Centre, Lucnow, Uttar Pradesh, India.

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