EYESIGHT TO INSIGHT: AN OPHTHALMOLOGICAL JOURNEY

Maliotis Neofytos, Mouskoidou Nikoleta, Korina-Maria Tzouda, Liampotis Nikos, Pavlakis Kosmas.

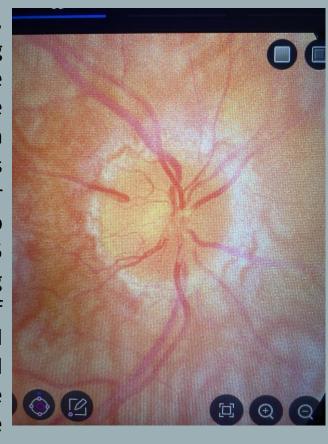
General Hospital of Nikaia – Peiraias "Agios Panteleimonas"

Purpose:

In the field of ophthalmology, the eyes often serve as windows to broader systemic health. This poster highlights the pivotal role ophthalmological examinations can play in early detection and in life-threatening intervention conditions. We introduce a case of a 69-year-old male patient who arrived at our emergency department with sudden vision loss in one eye. Through diligent examination, we identified a Hollenhorst plaque, a vascular embolus within the retina. This discovery triggered a series of events leading to a diagnosis that would ultimately save the patient's life.

Clinical Case:

The patient presented to our department with a brief, painless episode of vision loss in their right eye, lasting only minutes. He had reported visual difficulties in the right eye over the past month, but the recent episode resulted in a significant deterioration of vision. Upon initial examination, his visual acuity (VA) was measured at 4/10 for the right eye (OD) and 7/10 for the left eye (OS). Both pupils reacted appropriately to light, and intraocular pressure (IOP) readings were 15 mmHg for OD and 16 mmHg for OS. Following mydriasis, fundoscopy revealed the presence of multiple Hollenhorst plagues within the central retinal artery, accompanied by plaques in other retinal vasculature. Notably, the fundus did not display the typical "cherry macula" appearance due to the preserved function of the celioretinal artery.



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Clinical Case:

subsequently The patient was referred to the internal medicine and vascular surgery departments for further evaluation. Triplex imaging of the carotid arteries confirmed a complete right carotid artery occlusion. **Immediate** anticoagulation therapy was initiated, and the patient was admitted to the internal medicine facility for monitoring pending carotid endarterectomy. Throughout this period, we conducted several reexaminations, revealing an improved best-corrected visual acuity (BCVA) of 9/10 in both eyes. A visual field test and fundus photography further supported our initial diagnosis.



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In this exceptional case, the power of ophthalmology in safeguarding both vision and life becomes vividly apparent. The seemingly isolated vision issue led us to a hidden threat—a retinal embolus. Swift identification of the embolus, interdisciplinary collaboration, and timely intervention rescued the patient from a life-threatening condition. Our contribution transcended vision preservation; it protected life itself. This case exemplifies the profound impact of ophthalmology as a sentinel for systemic health, where a routine eye examination became the first line of defence against a potentially fatal embolus.

Acknowledgements: None

Conflicts of interest: None