

Lamellar Hole with Foveal Schisis

Category(ies): Retina, Vitreous

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88-year-old male referred for evaluation of an epiretinal membrane and lamellar hole in the right eye. Patient had a history of a stroke with secondary visual field defects (quadrantanopsia). No acute vision changes. No metamorphopsia. No pain or irritation. No other complaints.

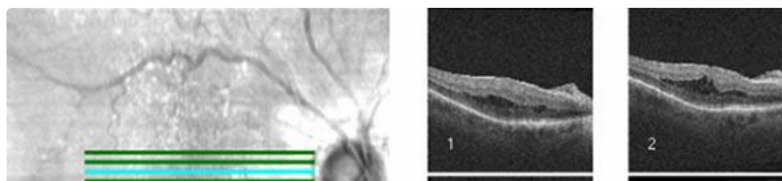
- BCVA cc: OD 20/50; OS 20/25
 - IOP: 19 and 21
 - SLE: PCIOL OU

Discussed surgery versus observation. The patient elected for observation of his epiretinal membrane and lamellar hole.



Figure 1: OD: clear media; optic nerve cupping with peripapillary pigment; multiple intermediate and large drusen throughout macula and periphery; small lamellar hole at the fovea center and an epiretinal membrane worse between the fovea and superior arcades.

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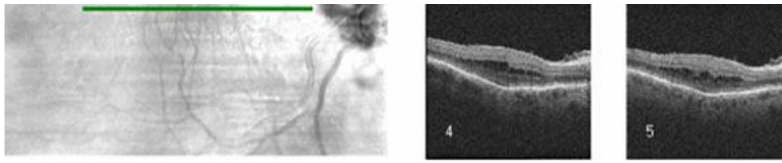


Figure 2: Cirrus OCT OD: epiretinal membrane with lamellar hole and foveal schisis.

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Lamellar Holes

- A lamellar hole represents an aborted (or partial thickness) macular hole.
- Seen on slit lamp biomicroscopy as a round central inner retinal defect without thickening, cystic change, or subretinal fluid.
 - An overlying operculum is often seen (but not present in this case).
- Mechanism is secondary to vitreofoveal separation with loss of the inner retinal layers, but with a preserved and intact outer photoreceptor layer.
- Vision is usually good (20/20-20/30) and patients are often asymptomatic, when no other confounding variables such as an epiretinal membrane are present.
 - Fluorescein angiography shows no abnormal fluorescence.

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