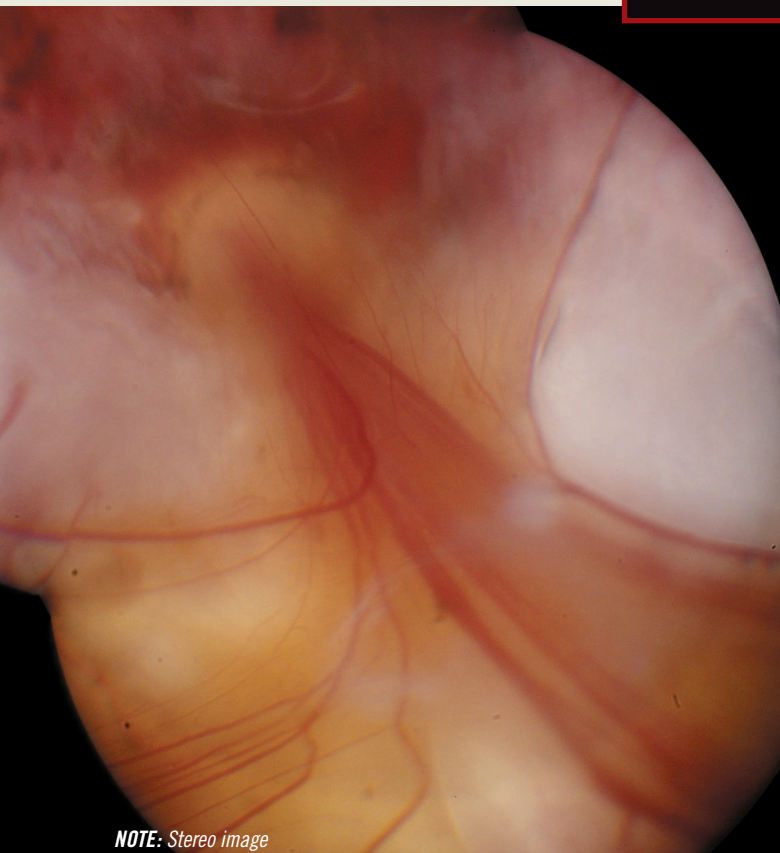
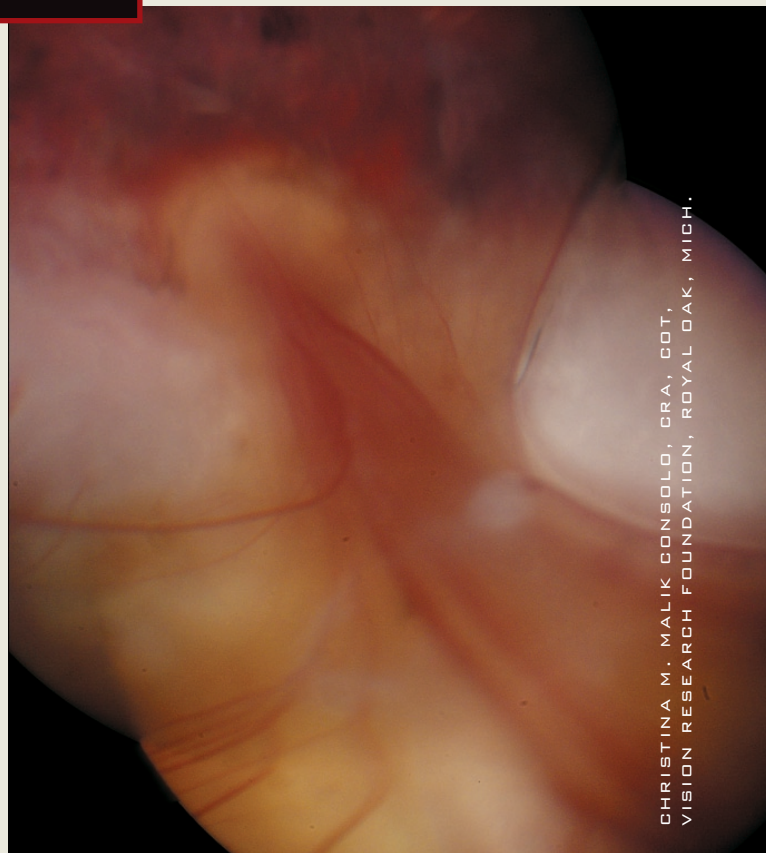


# Blink



NOTE: Stereo image



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WHAT IS THIS MONTH'S MYSTERY CONDITION? Find the answer in the next issue or go online now at [www.eyenetmagazine.org](http://www.eyenetmagazine.org).

## LAST MONTH'S BLINK

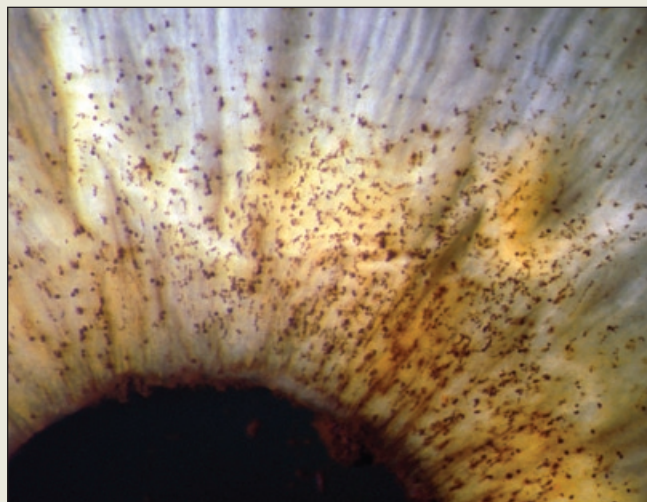
# Pigment Dispersion

**A** 57-year-old Caucasian man was referred for persistent iritis associated with glaucoma in both eyes. He was taking loteprednol (Lotemax), timolol maleate (Istalol) and bimatoprost (Lumigan) in both eyes and brimonidine tartrate (Alphagan) in his right eye only. The patient reported a history of fever blisters consistent with previous herpetic infection.

Visual acuity was 20/25 in the right eye and 20/20 in the left. IOP was 20 mmHg in the right eye and 14 mmHg in the left. Gonioscopy showed a 40-degree open angle in each eye with 3+ pigment in the right eye and 1+ pigment in the left. Slit-lamp examination revealed 1+ cell in the right eye and a quiet anterior chamber in the left. Each iris demonstrated geographic transillumination defects. Corneas were clear. Each lens was also clear with some pigment clumping on the lens capsule.

The patient was diagnosed with bilateral inflammatory glaucoma and nongranulomatous iritis possibly secondary to herpes.

Bimatoprost was discontinued, and the patient was treated with loteprednol, valacyclovir hydrochloride (Valtrex) and dorzolamide hydrochloride-timolol maleate (Cosopt) in both eyes and brimonidine tartrate in his right eye only. One month later, visual



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acuity was 20/20 and IOP was 14 mmHg in both eyes. There were still cells in the anterior chamber of the right eye.

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