

**TABLE 1 STAGES AND CHARACTERISTICS OF MACULAR HOLES**

Stage	Characteristics
1-A (impending)	<ul style="list-style-type: none"> <li>• Loss of the foveal depression and a yellowish foveal spot (100–200 µm in diameter)</li> <li>• Localized shallow detachment of the perifoveal vitreous cortex with persistent adherence to the foveola</li> <li>• Vitreofoveolar traction may horizontally separate (split) the retina at the fovea (pseudocyst) that corresponds to the yellow spot<sup>21</sup></li> <li>• Epiretinal membranes are uncommon</li> <li>• Visual acuity ranges from 20/25 to 20/80</li> <li>• Surgical intervention is not recommended</li> </ul>
1-B (impending)	<ul style="list-style-type: none"> <li>• Yellow ring 200–350 µm in diameter</li> <li>• Posterior extension of the pseudocyst with disruption of the outer retinal layer<sup>21-23</sup></li> <li>• The retinal roof remains intact with persistent adherence of the posterior hyaloid to the retina<sup>21-23</sup></li> <li>• Epiretinal membranes are uncommon</li> <li>• Visual acuity ranges from 20/25 to 20/80</li> <li>• Surgical intervention is not recommended</li> </ul>
2	<ul style="list-style-type: none"> <li>• Small full-thickness (&lt;400 µm in diameter) retinal defect</li> <li>• Epiretinal membranes are uncommon</li> <li>• Visual symptoms include metamorphopsia and decreased vision</li> <li>• Visual acuity 20/25 to 20/80</li> </ul>
3	<ul style="list-style-type: none"> <li>• Full-thickness hole ≥400 µm in diameter</li> <li>• The posterior hyaloid is separated from the macula but may remain attached at the optic disc and be attached more peripherally<sup>21</sup></li> <li>• An operculum or a flap is present on the posterior hyaloid over the hole and is visible clinically or by means of optical coherence tomography</li> <li>• A cuff of subretinal fluid may be detected along with intraretinal edema and cysts</li> <li>• Drusen-like deposits* may be occasionally seen in the base of the hole</li> <li>• A rim of retinal pigment epithelium hyper/hypopigmentation is often present at the junction between edematous or detached retina and normal-appearing attached retina in long-standing cases<sup>24</sup></li> <li>• Epiretinal membranes may be present</li> <li>• Visual acuity usually ranges from 20/100 to 20/400<sup>17,24</sup></li> </ul>
4	<ul style="list-style-type: none"> <li>• A full-thickness hole with a diameter usually larger than stage 3 (&gt;400 µm in diameter)</li> <li>• A complete posterior vitreous detachment with a Weiss ring<sup>20,23</sup></li> <li>• A cuff of subretinal fluid, intraretinal edema, and cystoid changes are usually present</li> <li>• Drusen-like deposits* may be occasionally seen in the base of the hole</li> <li>• Epiretinal membranes are more frequent<sup>25</sup></li> <li>• Visual acuity is more profoundly decreased to 20/100 to 20/400<sup>17,24</sup></li> </ul>

\* Drusen-like or yellow deposits may represent macrophages at the level of the retinal pigment epithelium, suggesting chronicity of disease.