

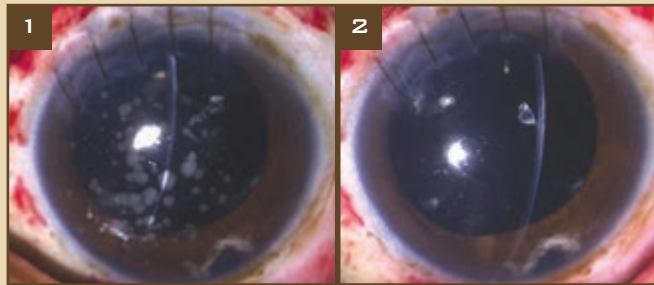
LAST MONTH'S BLINK

A Rare Complication of Emulsified Silicone Oil

A 50-year-old woman presented with diminished vision in the left eye following blunt trauma. On examination, best-corrected visual acuity (BCVA) in the right eye was 20/40 with light perception in the left. Intraocular pressures were 10 mmHg in the right eye, 6 mmHg in the left. On slit-lamp biomicroscopy, the right eye was normal. In the left eye, there was posterior dislocation of her intraocular lens (IOL) with rhegmatogenous retinal detachment.

Pars plana vitrectomy (PPV) with IOL explantation and silicone oil tamponade was performed. At the second post-operative day, the BCVA was counting fingers at 3 inches and IOP was 20 mmHg.

She was lost to follow-up until six weeks postop, when she presented again with BCVA of counting fingers at 3 feet and IOP of 32 mmHg in the left eye. Slit-lamp biomicroscopy revealed multiple large, fluffy, grayish-white corneal deposits (Fig. 1). At first, they appeared as corneal infiltrates or mutton-fat keratic



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precipitates, but there was no associated ocular inflammation. On repeated careful examination, we discovered a bandage contact lens (BCL) in situ that had been applied at the end of the PPV surgery for healing of debrided corneal epithelium. The BCL was removed, and, surprisingly, the corneal deposits disappeared immediately (Fig. 2). We speculated that those corneal deposits were silicone oil that had seeped underneath the BCL, become emulsified, and precipitated on the posterior surface of the BCL.

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