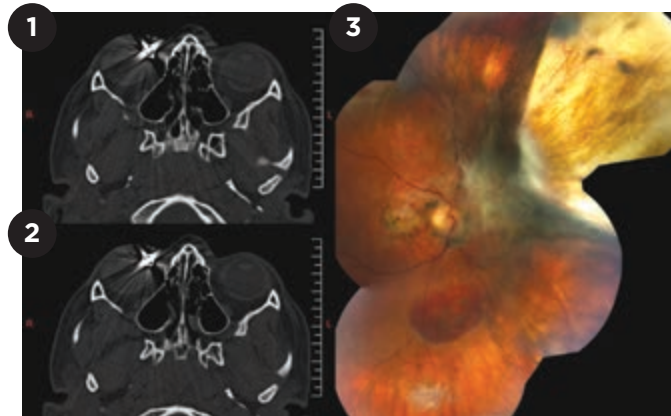


# Intraorbital Foreign Body Accompanied by Sclopetaria

**A** 12-year-old otherwise healthy boy presented following a BB pellet injury to the right eye, which had visual acuity of 20/400 and a relative afferent pupillary defect. Maxillofacial computed tomography (CT) showed the pellet lodged near the medial rectus insertion (Figs. 1, 2).

Although there was no globe rupture, the patient sustained a superonasal traumatic chorioretinal rupture (sclopetaria), a rhegmatogenous retinal detachment, retinal hemorrhages, and commotio retinae. Following surgical removal of the pellet and repair of the retinal detachment with scleral buckle and laser retinopexy, we noted extensive macular pigment changes, resolving hemorrhage, and fibrotic scar at the sclopetaria site superonasally (Fig. 3). Final visual acuity was counting fingers.

Sclopetaria is a full-thickness break of retina and choroid due to a high-velocity object striking



or passing close to, but not penetrating, the globe. Rapid deformation causes the chorioretinal unit to split and retract, exposing the sclera. Most cases are managed by observation and have a poor visual outcome. The bright appearance of the BB pellet is an artifact resulting from entrapped air and soft tissue near the pellet.