

What is ectopia lentis?





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Displacement of the lens from its normal anatomic position



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With regard to lens 'displacement'—what do the following terms mean? --Sublux(at)ed:

--Lux(at)ed:



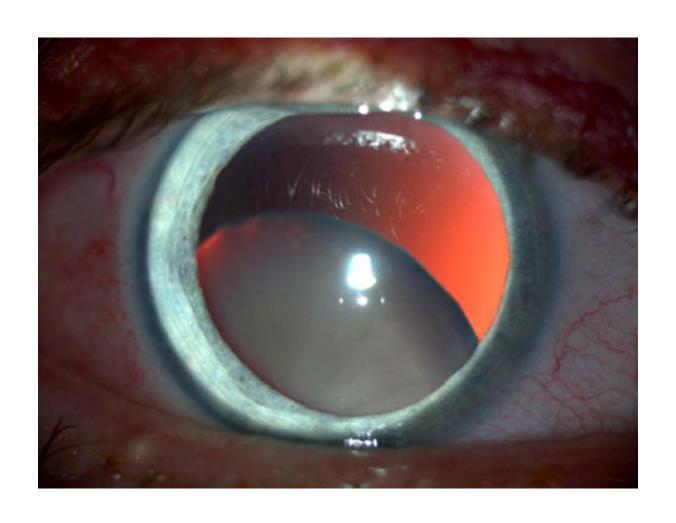


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Subluxed lens



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What iris finding is classic for a subluxed lens?

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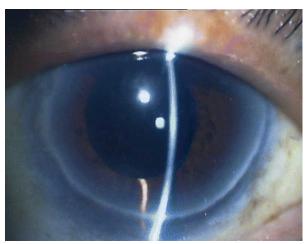


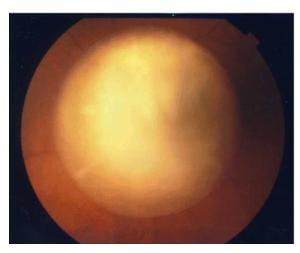
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Aphakic

Lens resting on the retina

b-scan: lens on ONH

Luxated lens





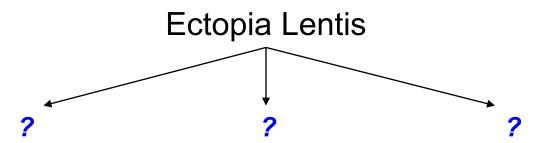
The *Peds* book also uses

What i the term ectopic here

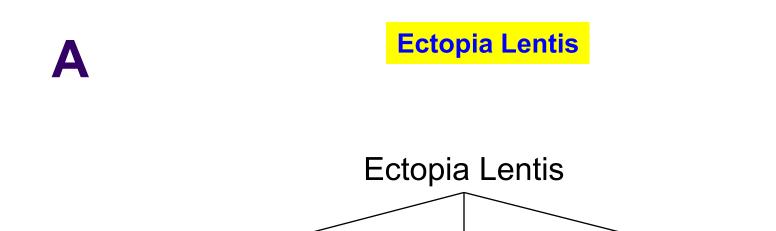
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The BCSC series divides ectopia lentis into three categories:



Congenital

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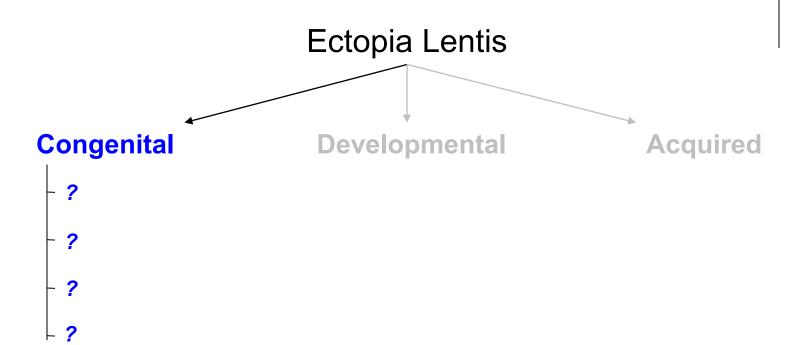
Developmental



Acquired



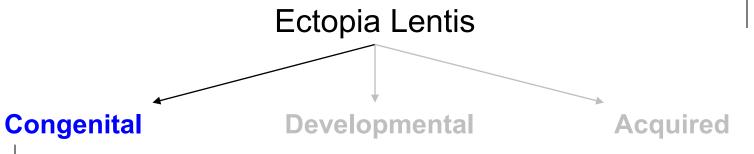




What are the four congenital causes covered in the BCSC?







Marfan

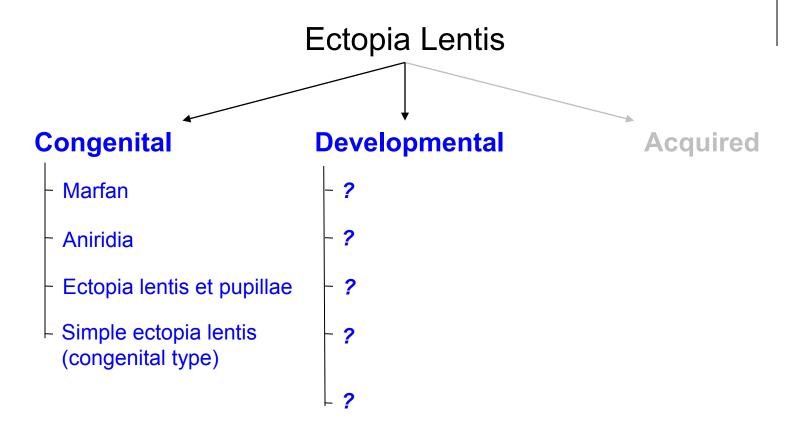
Aniridia

Ectopia lentis et pupillae

 Simple ectopia lentis (congenital type)

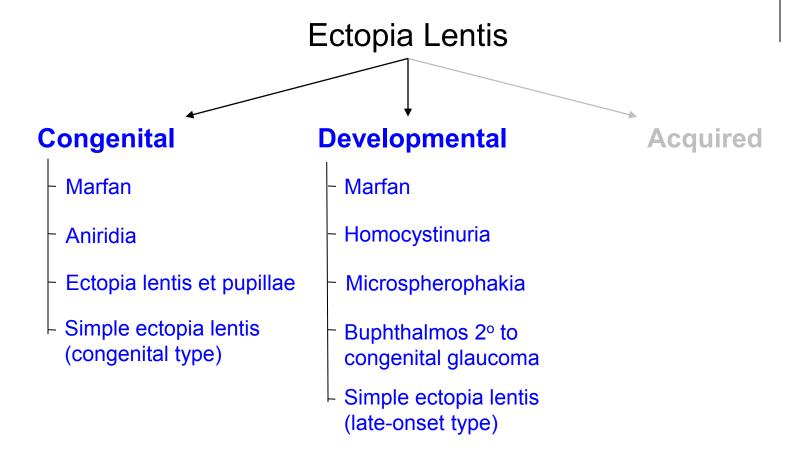
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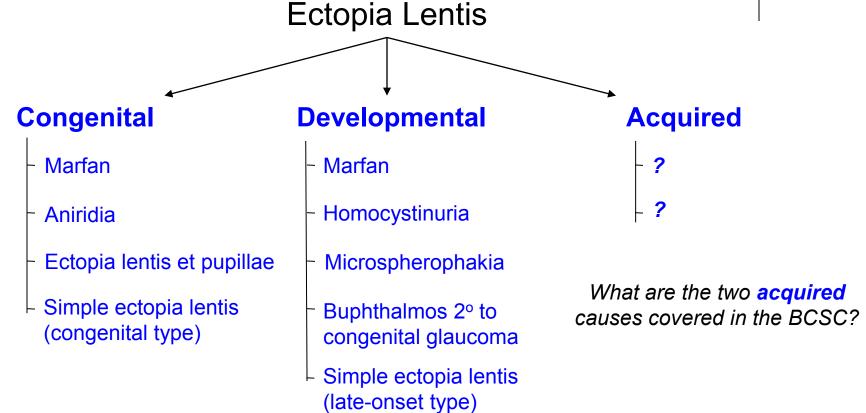
What are the five developmental causes covered in the BCSC?



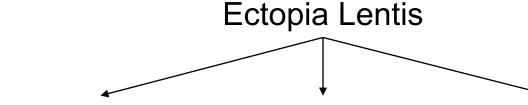


What are the five developmental causes covered in the BCSC?









Congenital

Marfan

Aniridia

Ectopia lentis et pupillae

Simple ectopia lentis (congenital type)

Developmental

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Homocystinuria

Microspherophakia

Buphthalmos 2° to congenital glaucoma

 Simple ectopia lentis (late-onset type)

Acquired

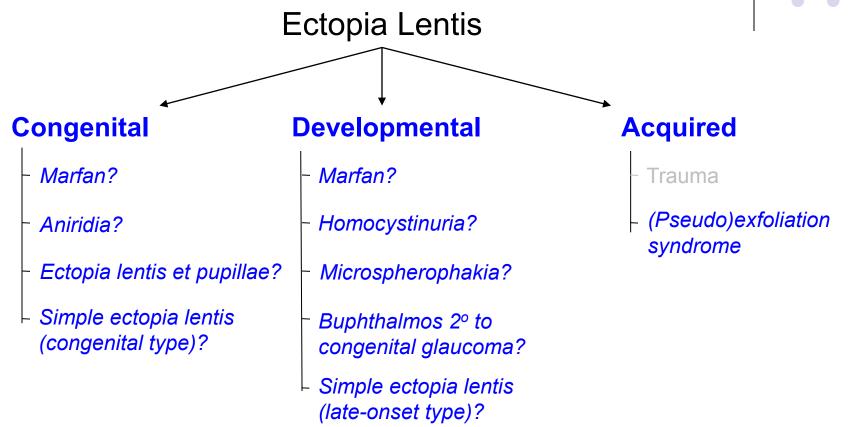
Trauma

(Pseudo)exfoliation syndrome

What are the two acquired causes covered in the BCSC?



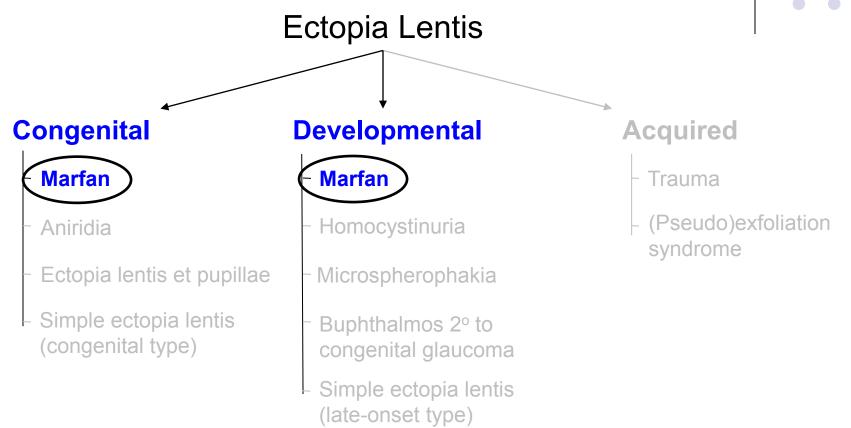




Which is the most common heritable cause of ectopia lentis?

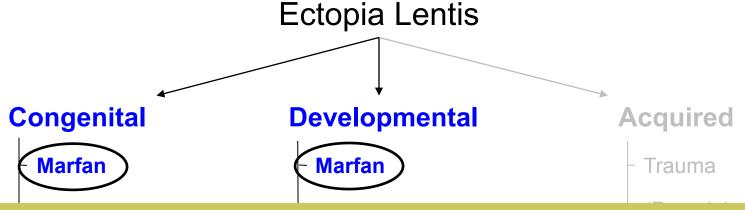






Which is the most common heritable cause of ectopia lentis? Marfan





By the way—why does Marfan appear under both Congenital and Developmental headings?

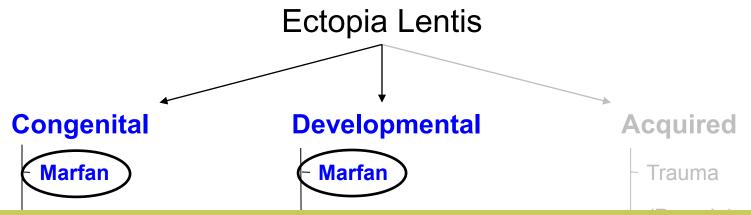
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 Simple ectopia lentis (late-onset type)







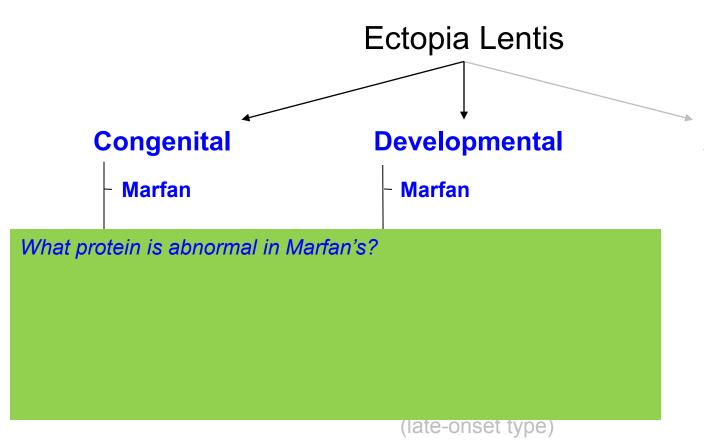
By the way—why does Marfan appear under both Congenital and Developmental headings? Because although ectopia lentis in Marfan is clearly a developmental issue, it is believed to be present at birth—ie, congenital—in the majority of cases

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Buphthalmos 2° to congenital glaucoma

 Simple ectopia lentis (late-onset type)



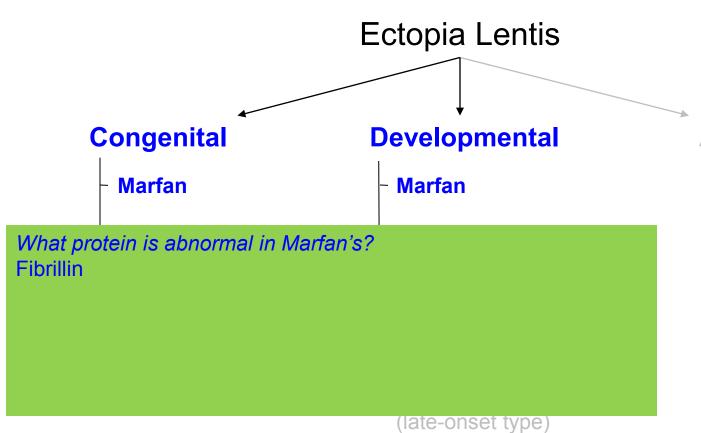


Acquired

Trauma



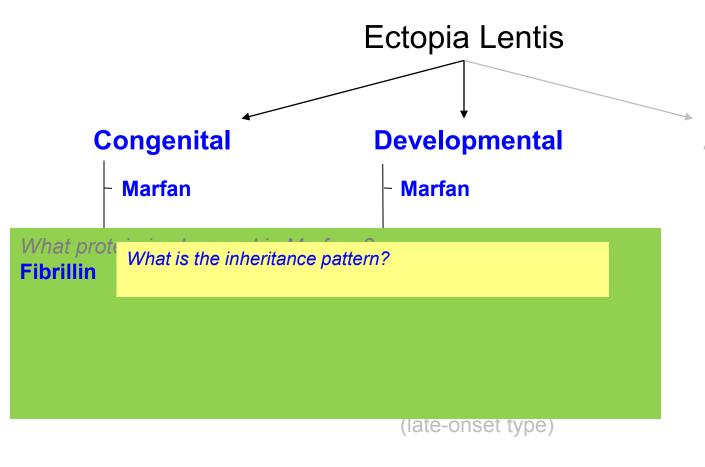




Acquired

Trauma



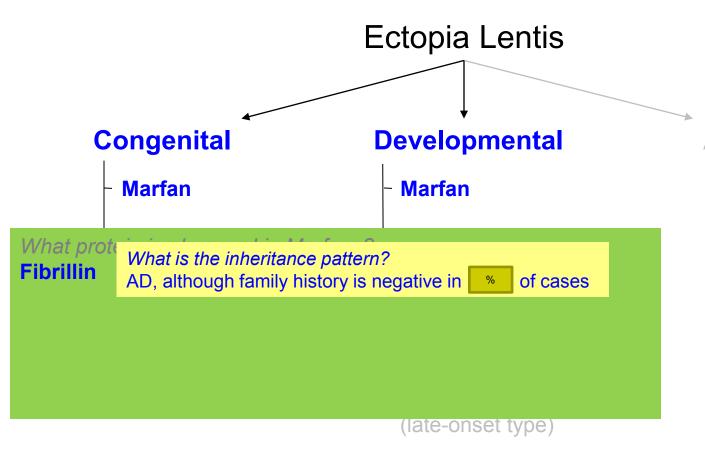


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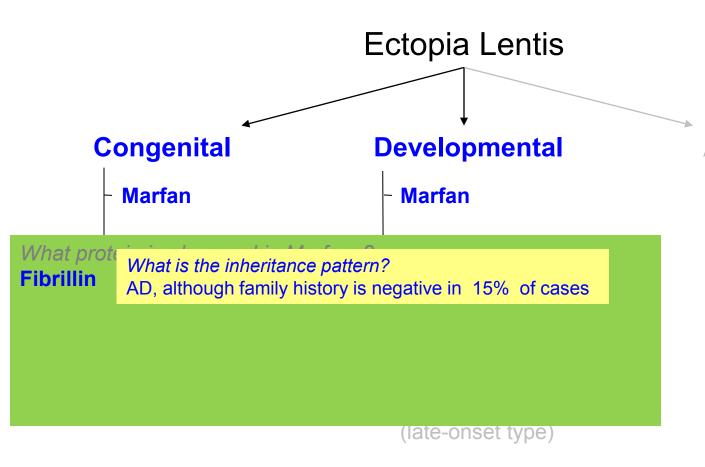


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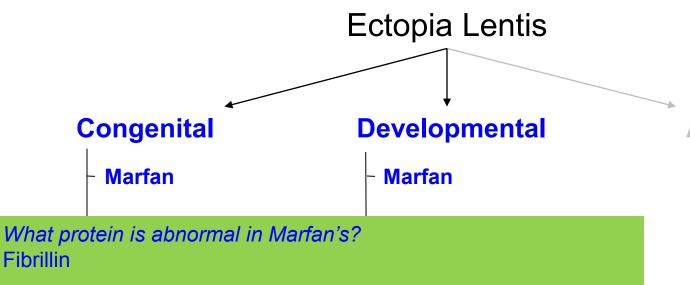




Acquired

Trauma





Acquired

Trauma

(Pseudo)exfoliation syndrome

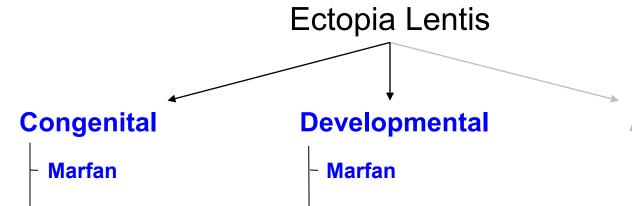
What three structures/systems manifest abnormalities in Marfan's?

- --The eye (duh)
- --
- --

(late-onset type)







What protein is abnormal in Marfan's? Fibrillin

What three structures/systems manifest abnormalities in Marfan's?

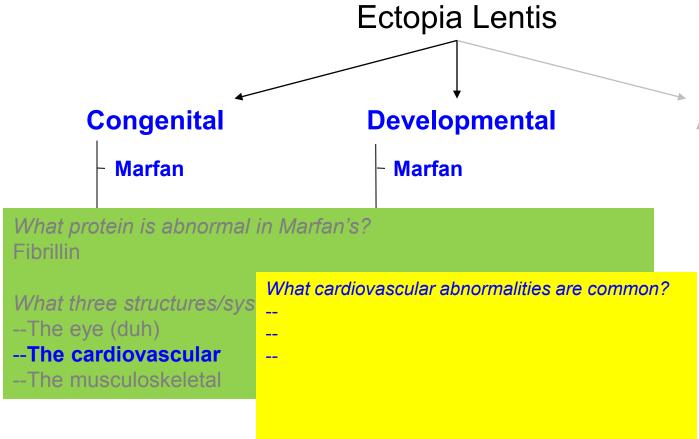
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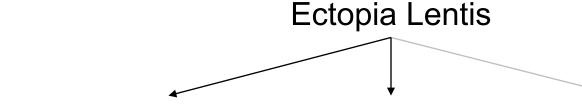


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Marfan

Developmental

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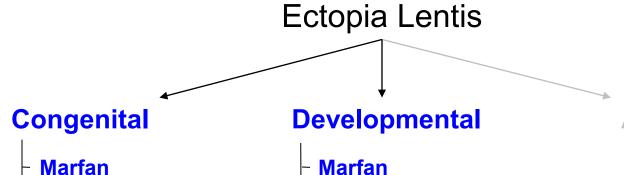
What cardiovascular abnormalities are common?

- --Dilatation of the aortic root and descending aorta
- --Aortic aneurysms
- --Mitral valve prolapse

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Are these abnormalities clinically significant? Indeed they are—they are responsible for the significantly shortened lifespan of Marfan pts

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Quite. The life-expectancy of Marfan pts is about that of the so-called normal population.

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Acquired

Trauma



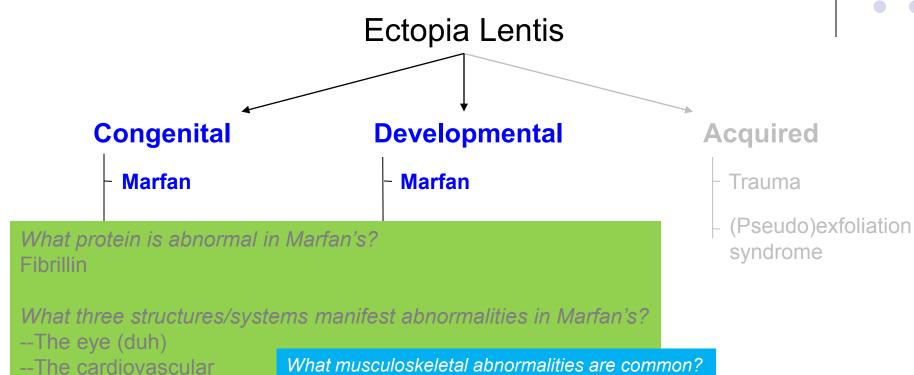


Marfan syndrome: Aortic dissection

-- The musculoskeletal

Ectopia Lentis



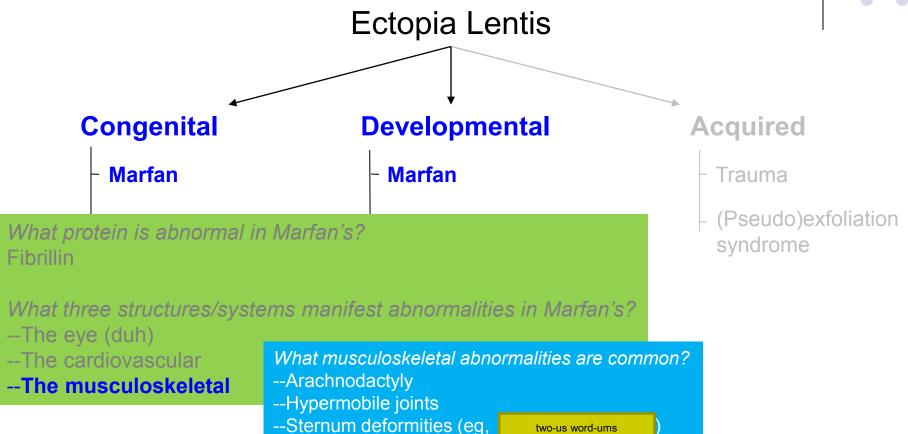


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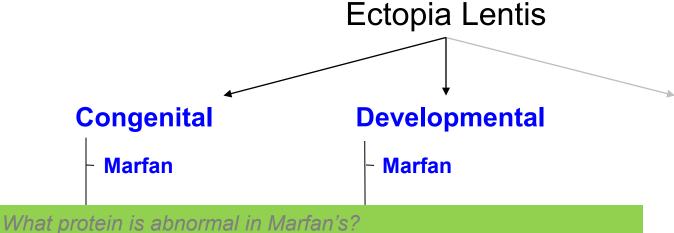












Acquired

Trauma

(Pseudo)exfoliation syndrome

Fibrillin

What three structures/systems manifest abnormalities in Marfan's?

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What musculoskeletal abnormalities are common?

- --Arachnodactyly
- --Hypermobile joints
- --Sternum deformities (eg, pectus excavatum)





Arachnodactyly



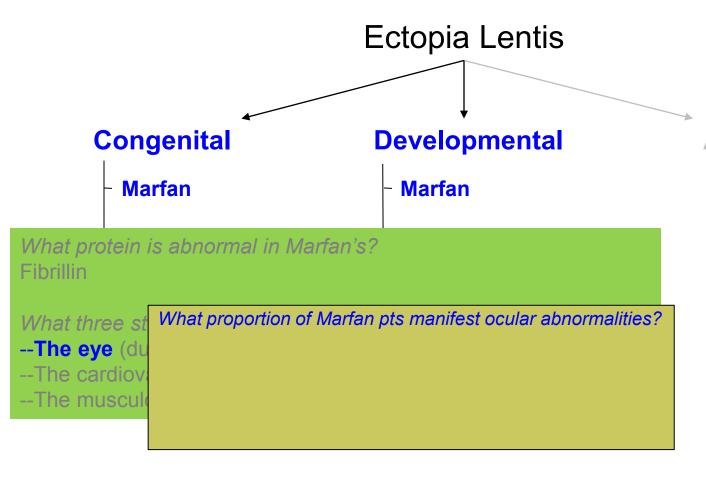
Hypermobile joints



Pectus excavatum

Marfan syndrome



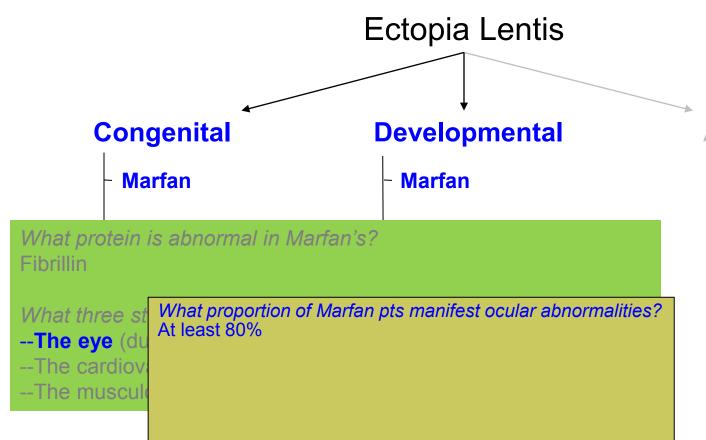


Acquired

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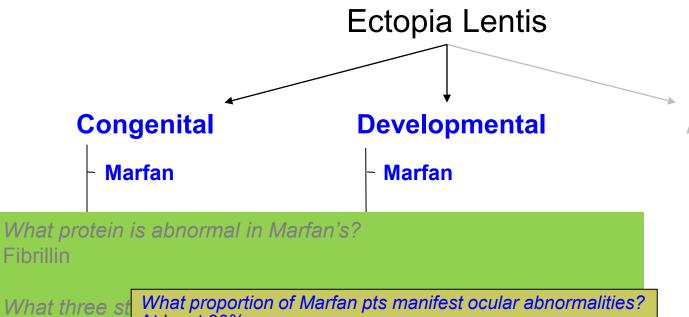
Trauma

--The eye (du --The cardiova

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Ectopia Lentis





Other than ectopia lentis, what ocular structural abnormalities

At least 80%

are often present?

Acquired

Trauma







Congenital

Marfan

Developmental

Marfan

What protein is abnormal in Marfan's? Fibrillin

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What proportion of Marfan pts manifest ocular abnormalities? At least 80%

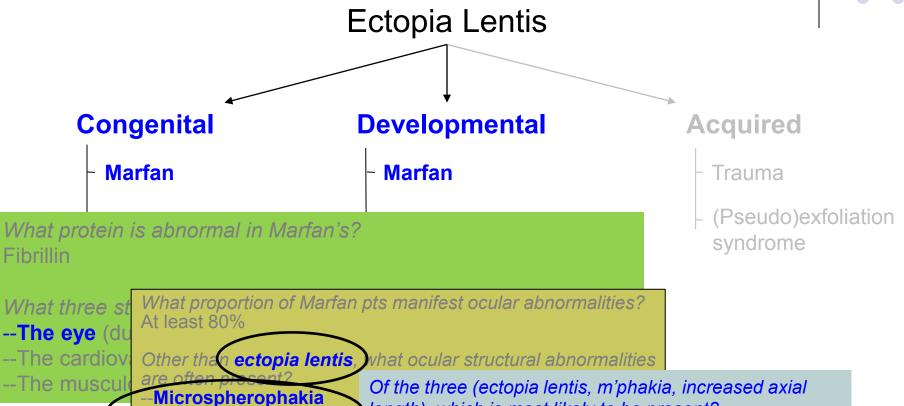
Other than ectopia lentis, what ocular structural abnormalities are often present?

- --Microspherophakia
- --Increased axial length

Acquired

Trauma



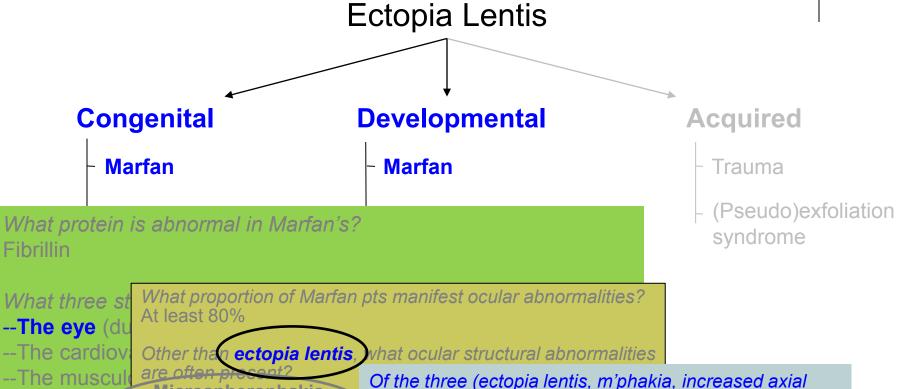


--Increased axial length

length), which is most likely to be present?







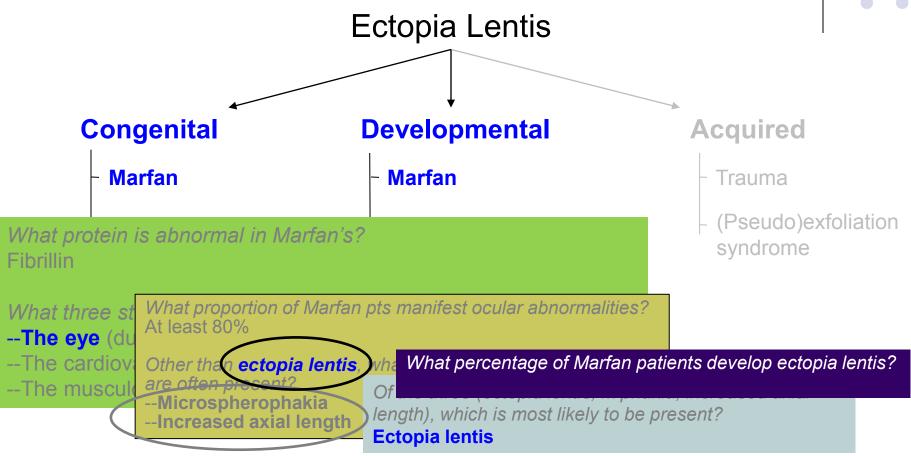
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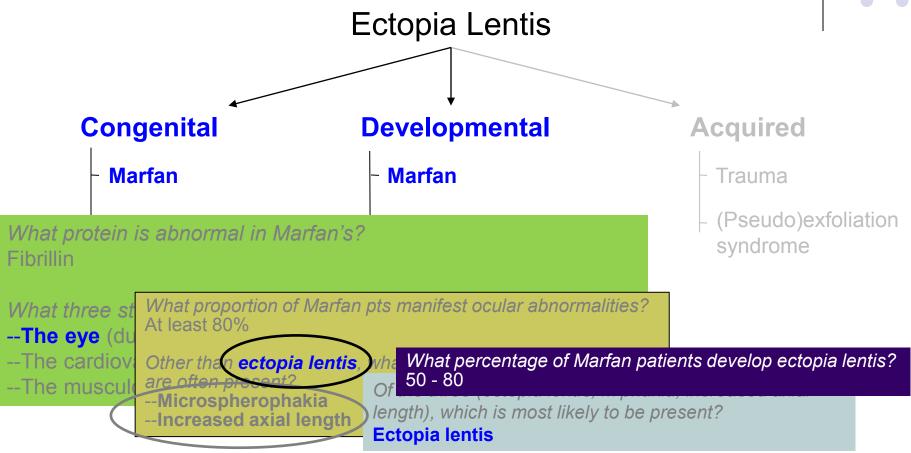
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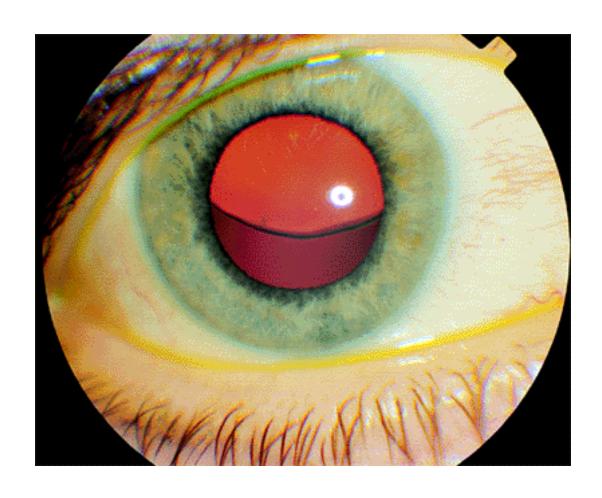












Marfan syndrome: Ectopia lentis



Marfan pts tend to be high myopes. Give three reasons why.

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I made this term up; a better name is spherical-aberration myopia

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57

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- -- Increased corneal curvature? No!

Congenital

What about the cornea in Marfan pts--does it contribute to their high myopia? No—in fact, the cornea in Marfan tends to be **flatter** than normal

Marfan

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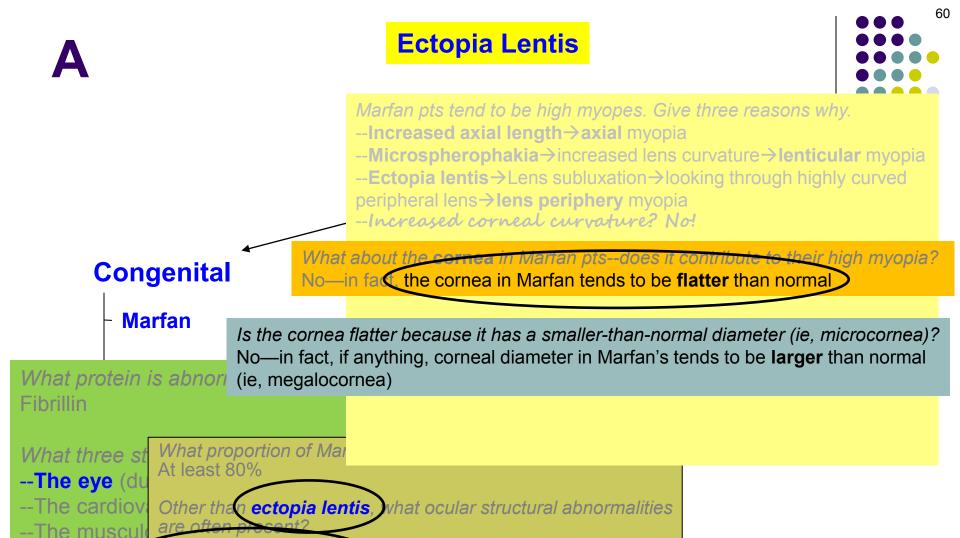
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Re managing Marfan's: Poor accommodation implies what?

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Why not just bust up in there and do a clear lens extraction with IOL?

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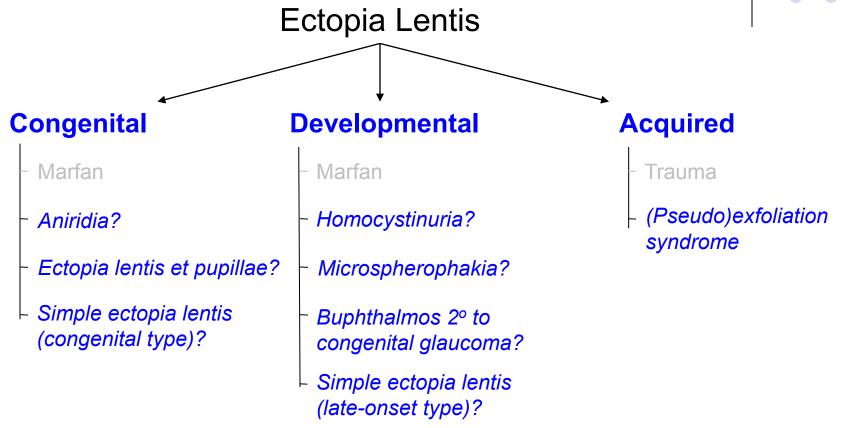
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Re managing Marfan's: Poor accommodation implies what? Bifocals may be needed at an early age

Why not just bust up in there and do a clear lens extraction with IOL? Marfan patients are at very high risk for vitreous loss as well as retinal detachment



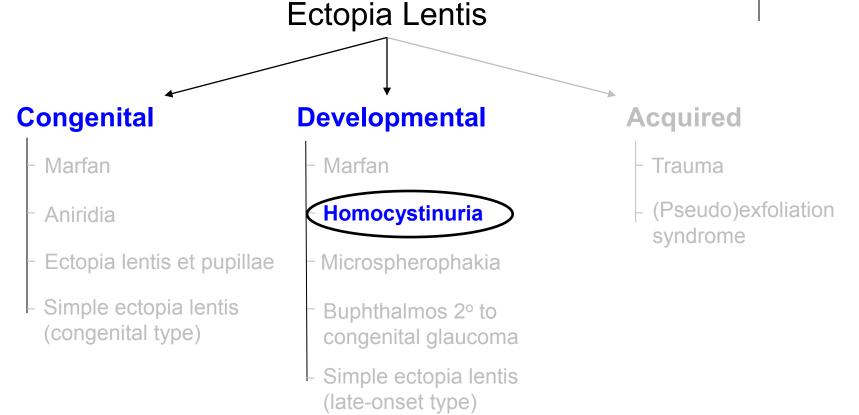




Which is the most common heritable cause of ectopia lentis?



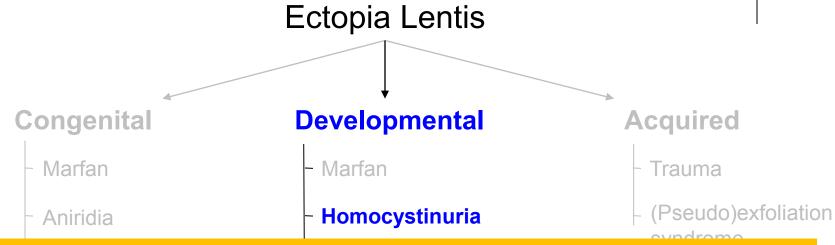




Which is the most common heritable cause of ectopia lentis? Homocystinuria



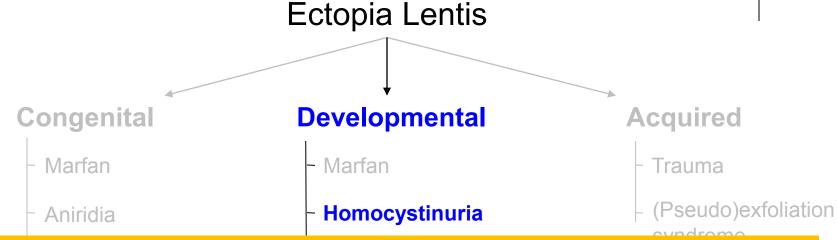




Homocystinuria is due to faulty metabolism for what amino acid? (hint: it's not cysteine)



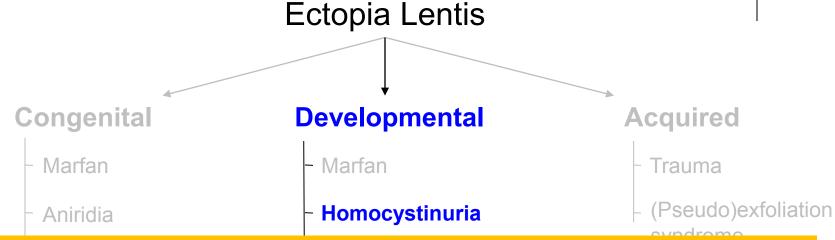




Homocystinuria is due to faulty metabolism for what amino acid? (hint: it's not cysteine) Methionine





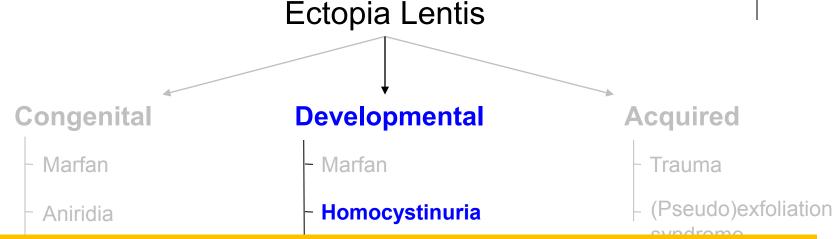


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Then why isn't it called 'methioninuria'?







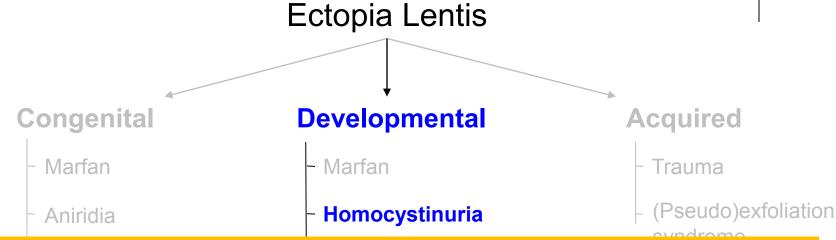
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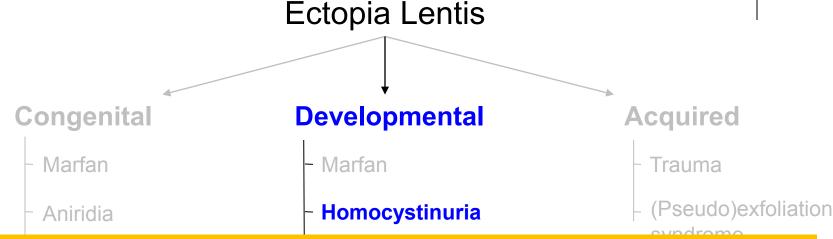
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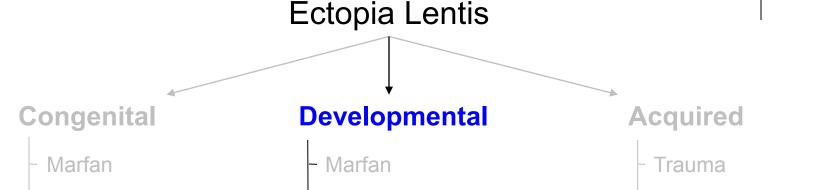
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- --The musculoskeletal
- --The CNS



(Pseudo)exfoliation



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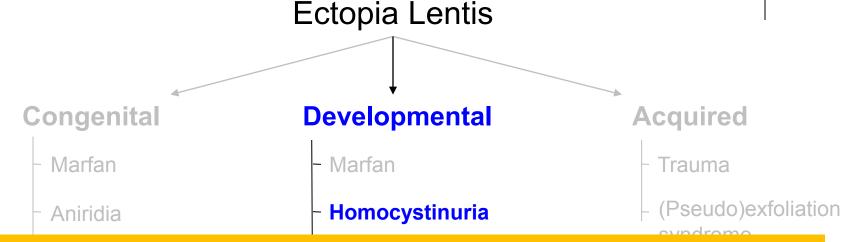
Aniridia

- --The musculoskeletal
- --The CNS

Note that these were the three structures/systems affected in Marfan







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Congenital

Marfan

- Aniridia

Developmental

Marfan

Homocystinuria

Acquired

Trauma

(Pseudo)exfoliation

yndromo

Homocystinuria is due to faulty metabolism for what amino acid? (hint: it's not cysteine)

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What is the classic habitus in homocystinuria?

Tall and thin, with arachnodactyly and sternum abnormalities

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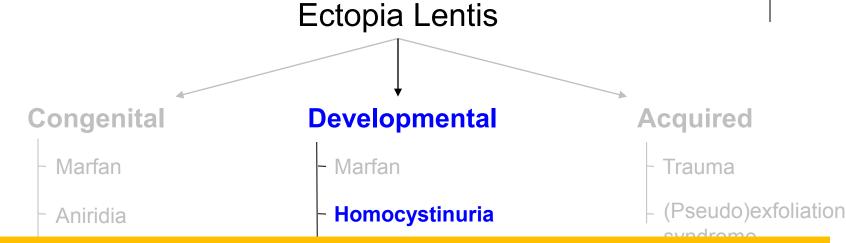




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Congenital

- Marfan

- Aniridia

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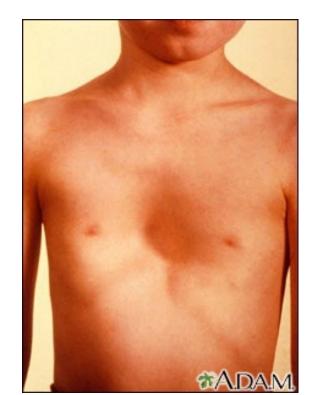
How about their coloration?

They tend to be fair-skinned and fair-haired

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- --The eye (duh)
- --The cardiovascular
- --The musculoskeletal
- --The CNS

Note that these were the three structures/systems affected in Marfan





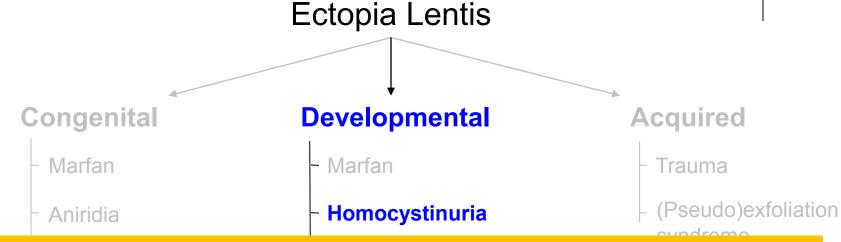




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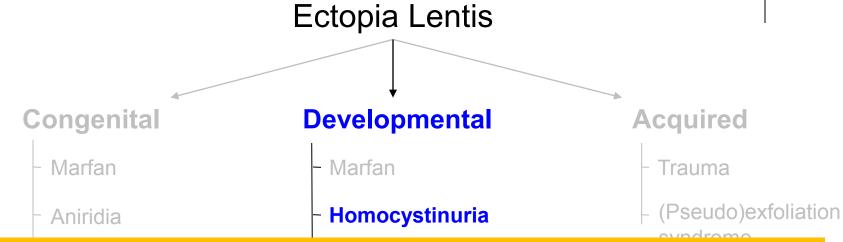
What four str

- --The eye (di
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What proportion of homocystinuria pts manifest ocular abnormalities?







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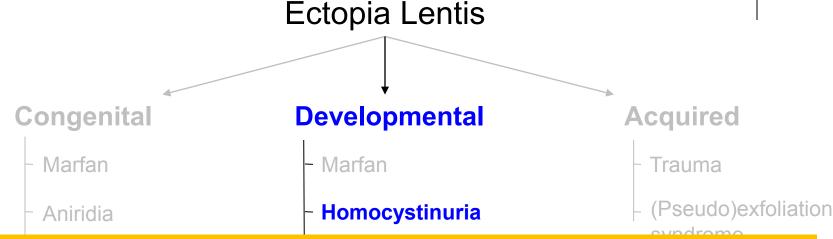
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What proportion of homocystinuria pts manifest ocular abnormalities? About 80%

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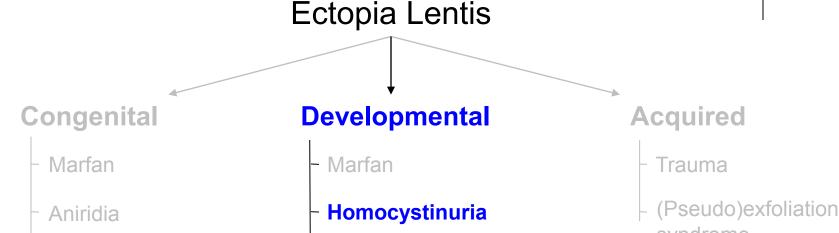
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Other than ectopia lentis, are other ocular structural abnormalities often present?







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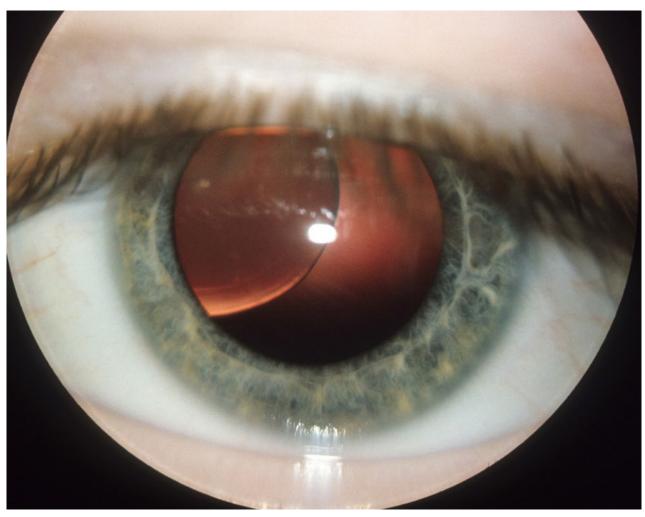
What proportion of homocystinuria pts manifest ocular abnormalities? About 80%

Other than ectopia lentis, are other ocular structural abnormalities often present?

--The muscu Nah—ectopia lentis is pretty much it



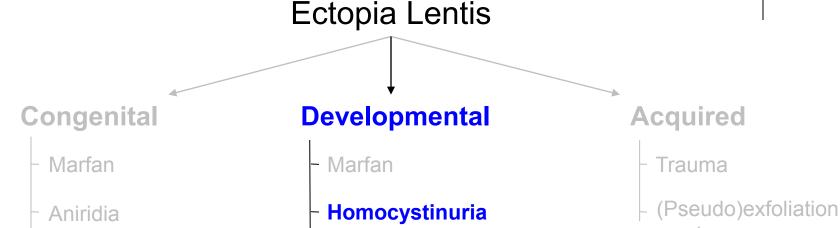
85



Homocystinuria: Ectopia lentis







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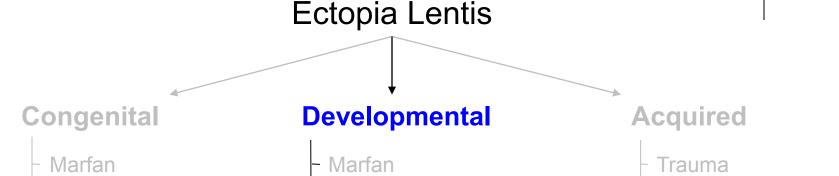
Nah-ectopia lentis is p

During which stage of life does subluxation typically occur?





(Pseudo)exfoliation



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Aniridia

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During which stage of life does subluxation typically occur? Childhood (in most cases prior to age 10 years)







Congenital Marfan

Developmental

Marfan

Homocystinuria

Acquired

Trauma

(Pseudo)exfoliation

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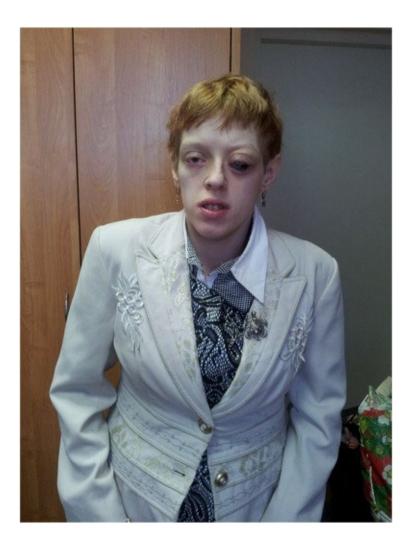
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During which stage of life does subluxation typically occur? Childhood (in most cases prior to age 10 years)



90

Buphthalmos in a homocystinuria pt with ectopia lentis







Congenital

Marfan – Marfan

Aniridia

Developmental

Homocystinuria

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For more on secondary angle-closure glaucoma stemming from ectopia lentis, see slide-set G16

cocular abnormalities?

-- The eye (al

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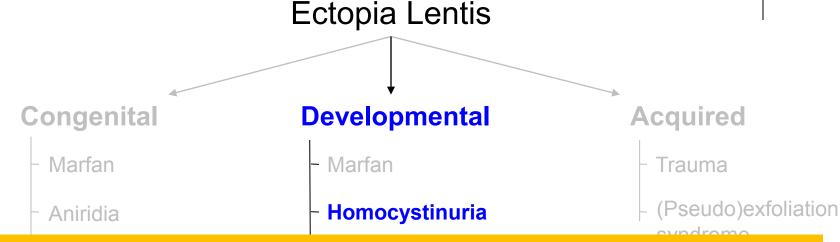
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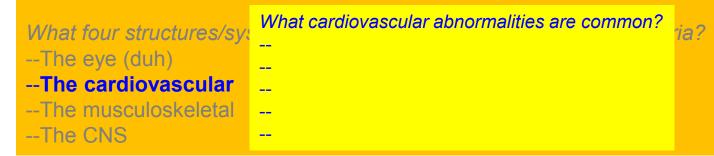




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What cardiovascular abnormalities are common?

--HTN

-- Cardiomegaly

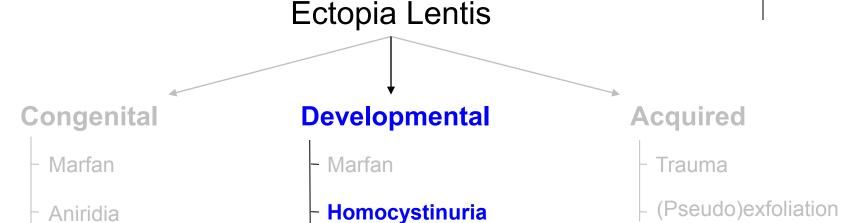
--Thromboembolism

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Congenital

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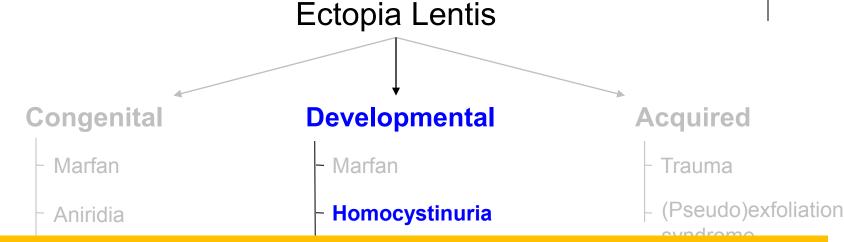
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What proportion of untreated homocystinurics will experience a significant vascular event prior to age 30? An astonishing 50%! (And the majority will experience it prior to age 20)





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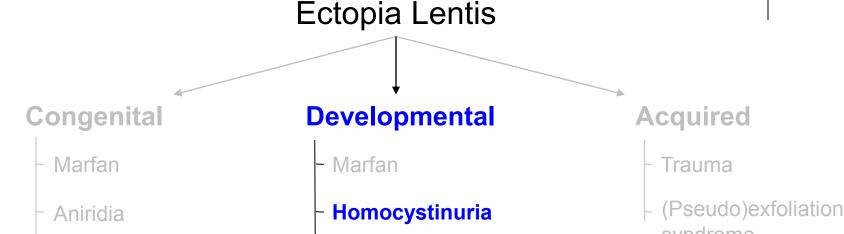
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What cardiovascular abnormalities are common?



What relatively common medical event greatly increases the risk of a thromboembolic event?





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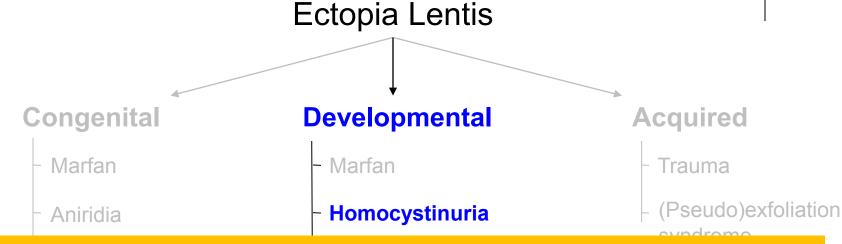


--CVA

What relatively common medical event greatly increases the risk of a thromboembolic event?

General anesthesia. It is vital to identify homocystinurics prior to surgery!





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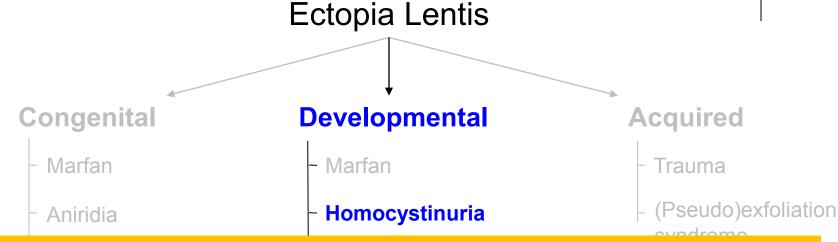
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In addition to arachnodactyly and sternum deformities, there is a musculoskeletal abnormality classic for homocystinuria. What is it?







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Early osteoporosis



--The CNS

Ectopia Lentis





Congenital **Developmental Acquired** Marfan Marfan Trauma (Pseudo)exfoliation **Homocystinuria** Aniridia

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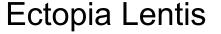
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How early are we talking about? What four structu --The eye (duh) ties, there --The cardiovascular is a musculoskeletal abnormality classic for homocystinuria. -- The musculoskeletal **Early osteoporosis**









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What four struct:

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How early are we talking about?

Crazy early. Osteoporotic changes are common in childhood (and have been reported in toddlers)

ties, there

--The cardiovascular

--The musculoskeletal

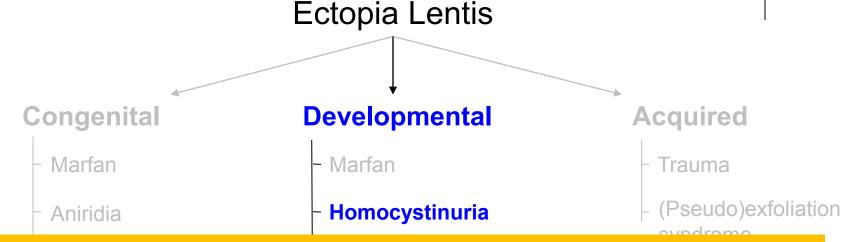
--The CNS

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--The cardiovas What CNS abnormalities are common?

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Congenital Developmental Acquired

- Marfan

- Aniridia - Homocystinuria - (Pseudo)exfoliation

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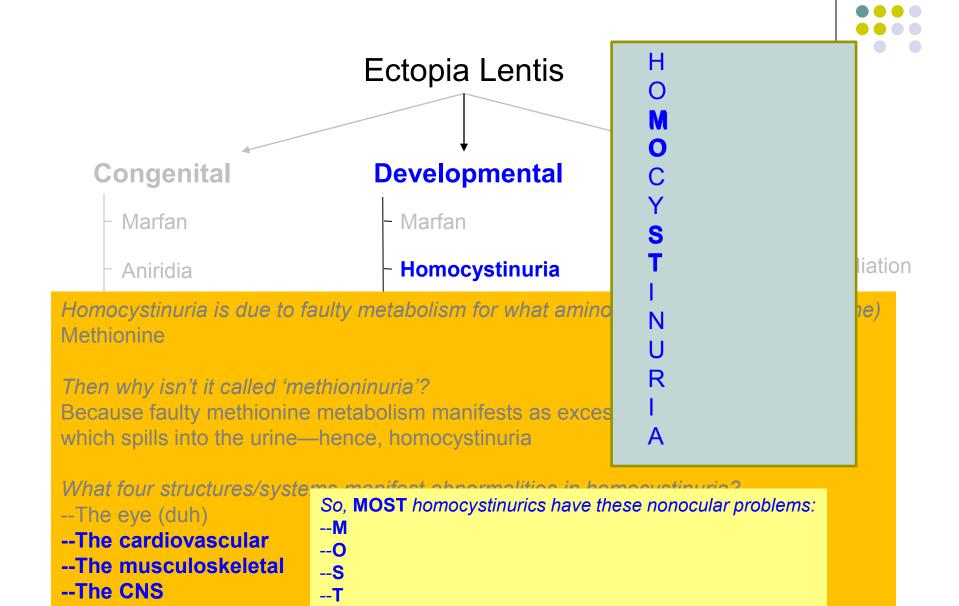
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- --The cardiovas

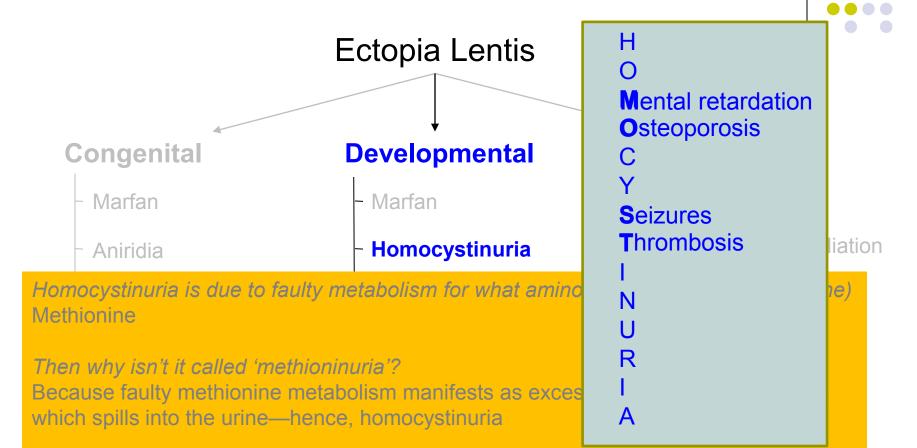
What CNS abnormalities are common?

- --The musculos --Seizures
- --The CNS
- --Mental retardation

104



105



What four structures/systems manifest abnormalities in homosystinuria?

- --The eye (duh)
- --The cardiovascular
- -- The musculoskeletal
- --The CNS

- So, **MOST** homocystinurics have these nonocular problems:
- -- Mental retardation
- --Osteoporosis --Seizures
- --Thrombosis of the systemic vasculature







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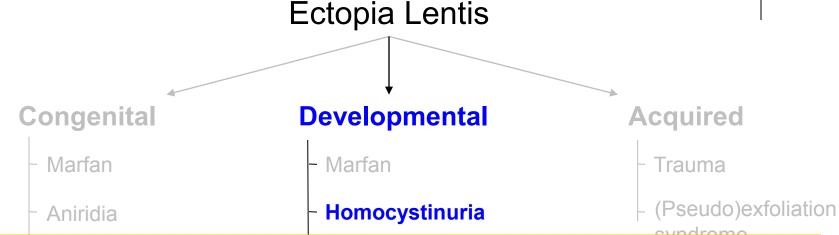
Because **faulty methionine metabolism** manifests as excessive serum homocysteine, which spills into the urine—hence, homocystinuria

Are there steps that can be taken to mitigate the effects of the faulty methionine metabolism?

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- --The musculoskeletal
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Are there steps that can be taken to mitigate the effects of the faulty methionine metabolism? Indeed there are. A diet low in amino acid (and high in amino acid), along with supplemental vitamin, can significantly reduce the rate of ectopia (and systemic probs as well)

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- -- The musculoskeletal
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Congenital Developmental Acquired

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- -- The cardiovascular
- --The musculoskeletal
- -- The CNS

Marfan syndrome

Homocystinuria



As is likely apparent by now, Marfan and homocystinuria share a number of features—but not all. Let's run through them and see which are which.

Q

Ectopia Lentis

110

Marfan syndrome

Homocystinuria

(Start here, work down the list) →

↑ risk thromboembolism

Lens subluxes up

Lens subluxes down

Divvy up the characteristics.

Some go both ways.

Tall

Thin habitus

Fair-haired

Zonules stretched

Zonules broken

Associated with microspherophakia

Ectopia usually bilateral and symmetric



111

Marfan syndrome

Homocystinuria

↑ risk *thromboembolism*

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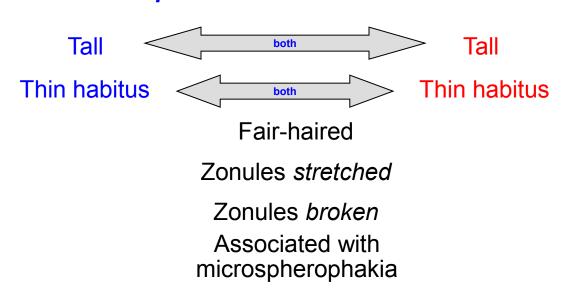
Marfan syndrome

Homocystinuria

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Lens subluxes up

Lens subluxes down



Ectopia usually bilateral and symmetric





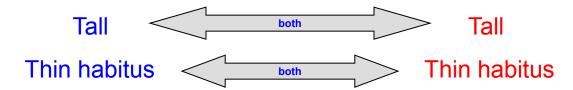
Marfan syndrome

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Lens subluxes up

Lens subluxes down



Fair-haired

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Zonules broken

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116

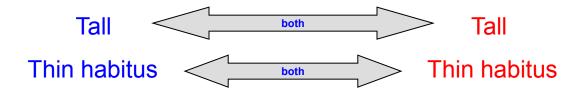
Marfan syndrome

Homocystinuria

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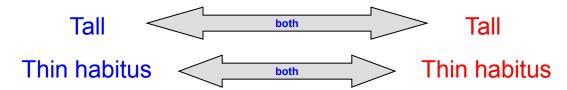
Marfan syndrome

Homocystinuria

↑ risk *thromboembolism*

Lens subluxes *up*

Lens subluxes down



Fair-haired

Zonules **stretched**

Zonules **broken**

Associated with microspherophakia



Associated with microspherophakia

Ectopia usually bilateral and symmetric





Marfan syndrome

Homocystinuria

↑ risk *thromboembolism*

Lens subluxes up

Lens subluxes down



Fair-haired

Zonules **stretched**

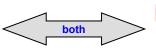
Zonules broken

Associated with microspherophakia



Associated with microspherophakia

Ectopia usually bilateral and symmetric



Ectopia usually bilateral and symmetric



119

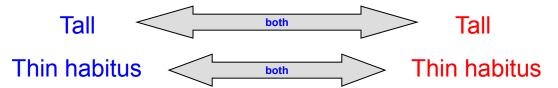
Marfan syndrome

Homocystinuria

↑ risk *thromboembolism*

Lens subluxes up

Lens subluxes down

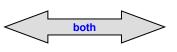


Fair-haired

Zonules **stretched**

Zonules **broken**

Associated with microspherophakia



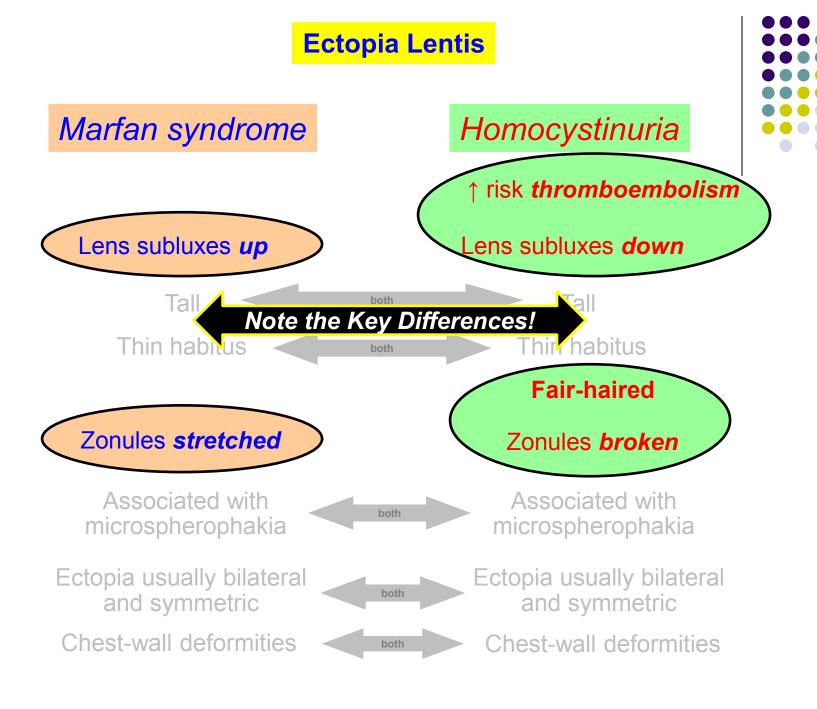
Associated with microspherophakia

Ectopia usually bilateral and symmetric

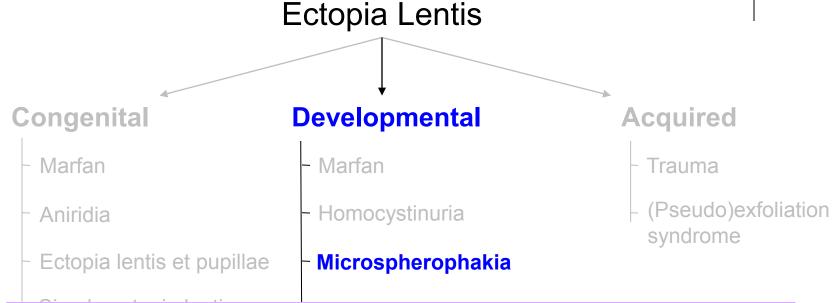
both

Ectopia usually bilateral and symmetric

Chest-wall deformities



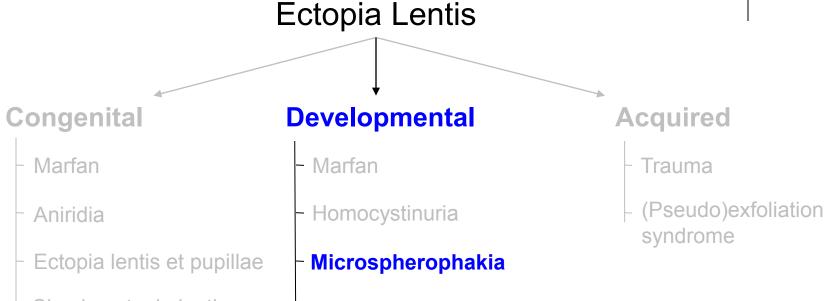




In a few words, how would you describe the shape of a microspherophakic lens?

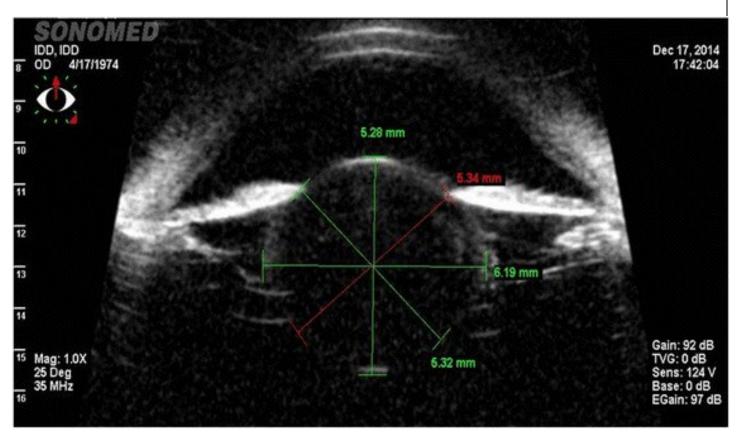






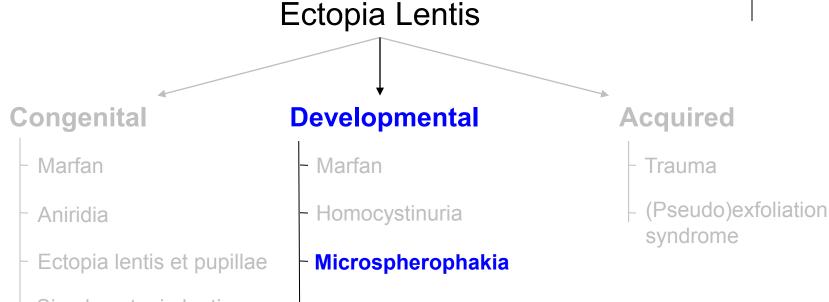
In a few words, how would you describe the shape of a microspherophakic lens? The name says it all: the lens is small ('micro') and round ('sphero')





Microspherophakia. Note the small size, extreme curvature of the lens



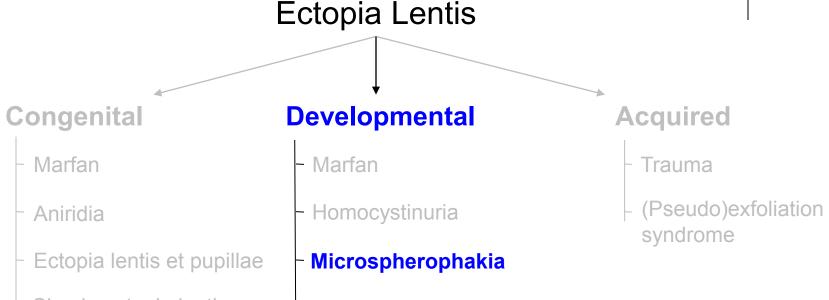


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What common slit-lamp observation owes to the lens' small size?







In a few words, how would you describe the shape of a microspherophakic lens? The name says it all: the lens is small ('micro') and round ('sphero')

What common slit-lamp observation owes to the lens' small size?

Typically, the entirety of the lens equator can be seen in the pupillary aperture when the pt is widely dilated





Microspherophakia. With mydriasis, the lens is able to fit through the pupillary aperture





Congenital

Marfan

Aniridia

Ectopia lentis et pupillae

Developmental

- Homocystinuria

Marfan

Microspherophakia

Acquired

Trauma

(Pseudo)exfoliation syndrome

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Pts with microspherophakia are almost always high myopes. Why?







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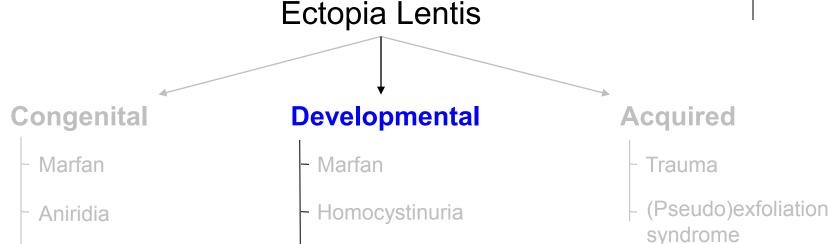
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Ectopia lentis et pupillae

Ectopia Lentis





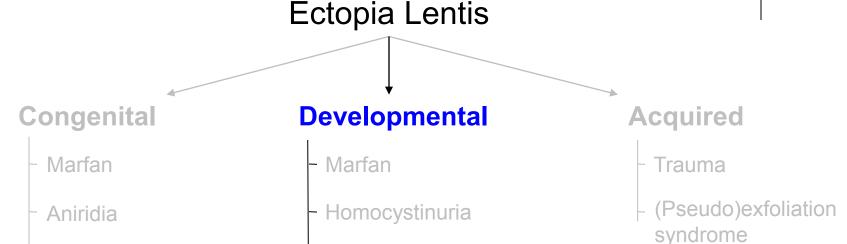
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Microspherophakia

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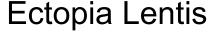
How does this differ from 'run of the mill' high myopia?

Ectopia lentis et pupillae

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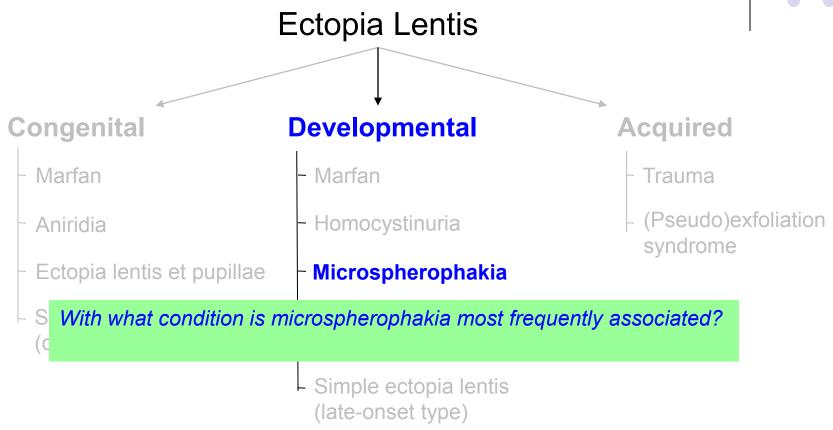
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Most cases of high myopia are due to excessive length of the optical axis (so-called 'axial myopia')

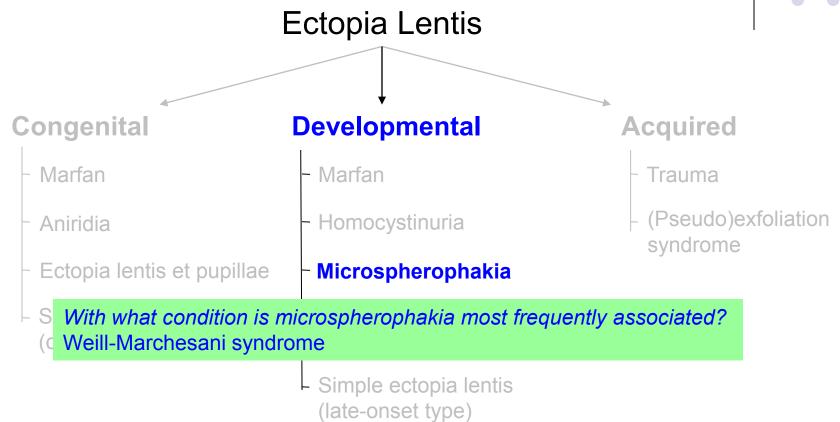
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Ectopia Lentis

Congenital

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Aniridia

Ectopia lentis et pupillae

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Microspherophakia

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With what condition is microspherophakia most frequently associated?

Weill-Marchesani syndrome

Simple actonia lantic

What are the findings in Weill-Marchesani?





Ectopia Lentis

Congenital Developmental Acquired

- Marfan - Marfan - Trauma

- Aniridia - Homocystinuria - (Pseudo)exfoliation syndrome

- Ectopia lentis et pupillae - Microspherophakia

- S With what condition is microspherophakia most frequently associated?

[6] Weill-Marchesani syndrome

What are the findings in Weill-Marchesani?
Patients with Weill-Marchesani have:
stature





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...short stature





Weill-Marchesani syndrome: Short stature





Ectopia Lentis

Congenital **Developmental** Marfan Aniridia

Ectopia lentis et pupillae

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fingers





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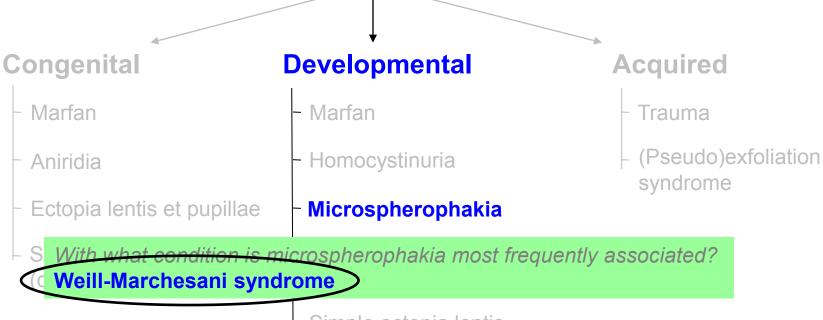


Weill-Marchesani syndrome: Short fingers





Ectopia Lentis



What are the findings in Weill-Marchesani?

Patients with Weill-Marchesani have:

...short stature

...**short** fingers

joints





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- ...short stature
- ...short fingers
- ...stiff joints

(Think of it as the opposite of

syndrome)



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Weill-Marchesani syndrome

Simple actoria lantic

What are the findings in Weill-Marchesani? Patients with Weill-Marchesani have:

...**short** stature (**Tall** stature)

...short fingers (Long fingers)

...stiff joints (Lax joints)

(Think of it as the opposite of **Marfan** syndrome)



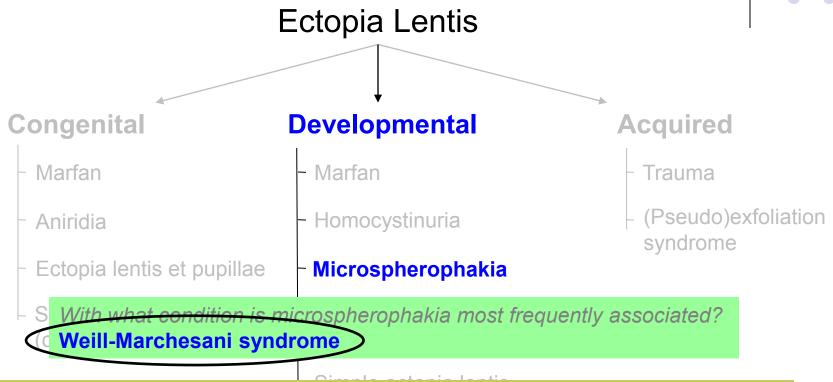


Weill-Marchesani syndrome



Marfan syndrome

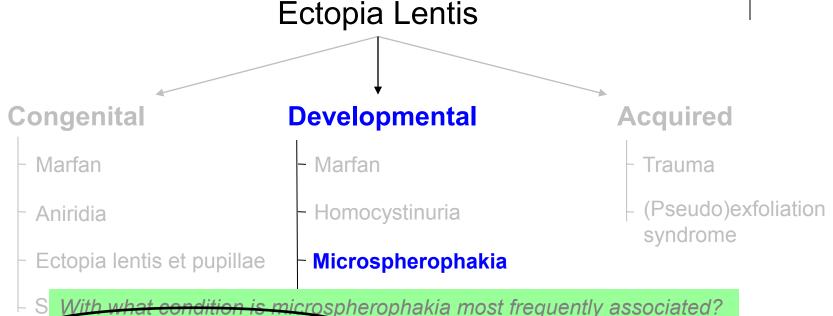




Weill-Marchesani is strongly associated with microspherophakia. With what conditions is microspherophakia occasionally associated?







Weill-Marchesani is strongly associated with microspherophakia. With what conditions is microspherophakia occasionally associated?

Weill-Marchesani syndrome

Congenital rubella, Lowe syndrome, Alport syndrome, Marfan syndrome and Peters anomaly



liation

Ectopia Lentis

Ruby LAMP is a mnemonic for the other conditions associated with microspherophakia:

Ruby = Rubella

Lowe syndrome

Alport syndrome

Marfan syndrome

Peters anomaly

OVEROITORIO.

Ectopia lentis et pupillae

Microspherophakia

S With what condition is microspherophakia most frequently associated?

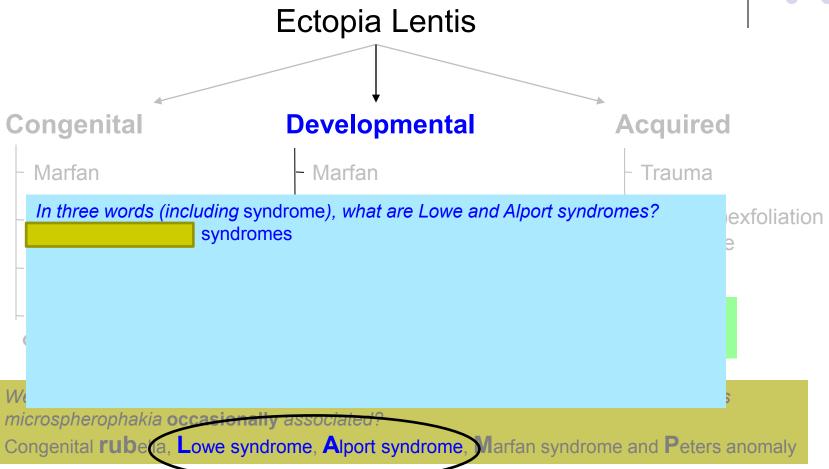
Weill-Marchesani syndrome

Circular a desciplination

Weill-Marchesani is strongly associated with microspherophakia. With what conditions is microspherophakia occasionally associated?

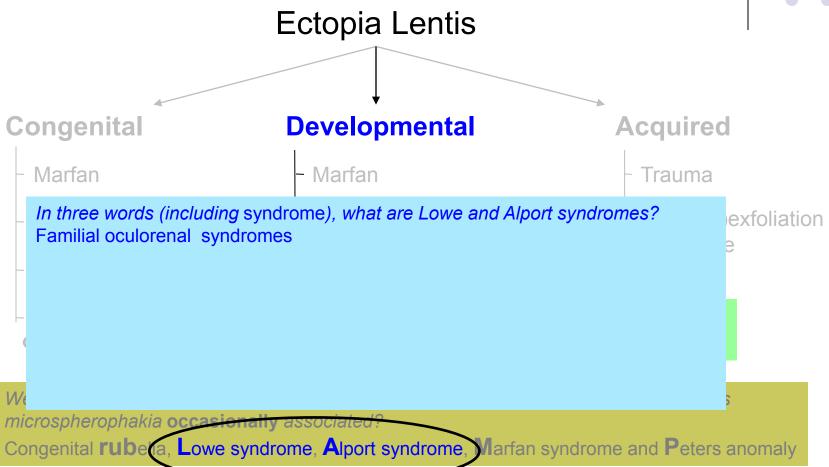
Congenital **rub**ella, **L**owe syndrome, **A**lport syndrome, **M**arfan syndrome and **P**eters anomaly



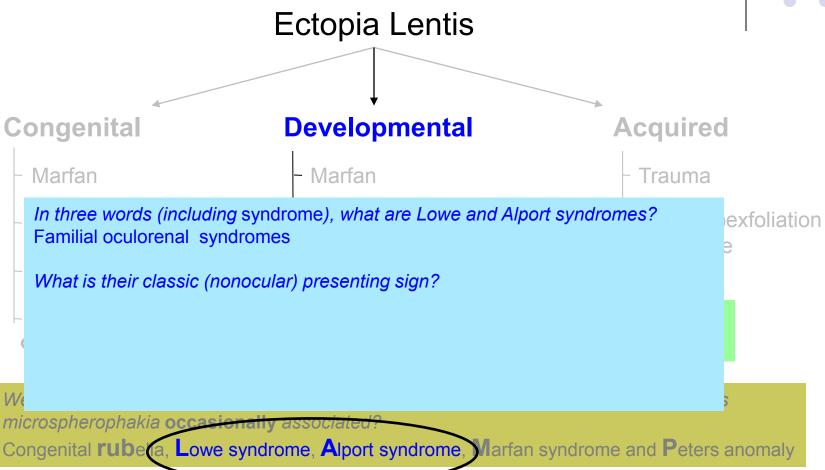






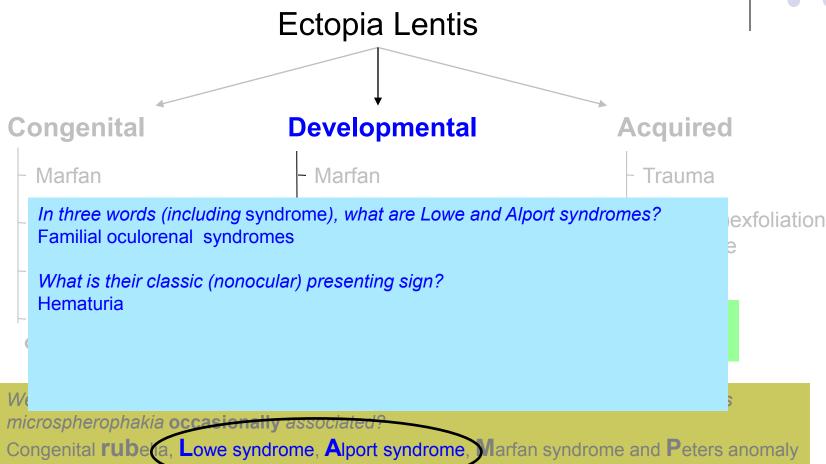




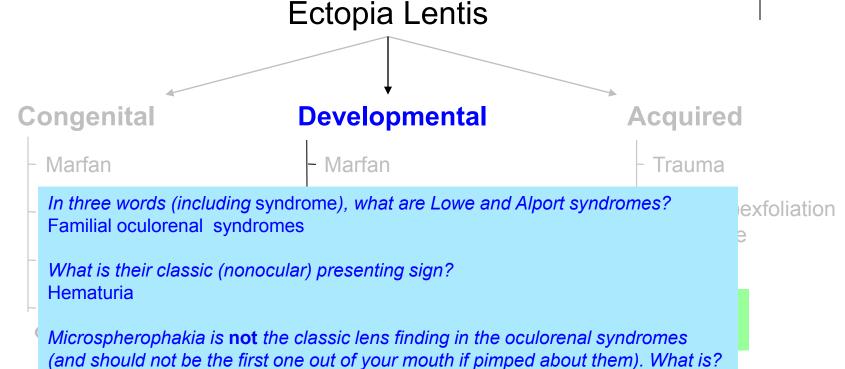












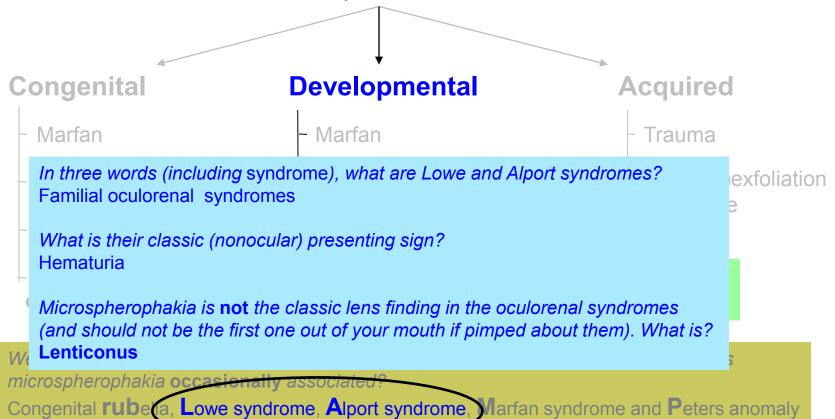
Congenital **rub**e a, **Lowe syndrome**, **Alport syndrome**, **Marfan syndrome and Peters anomaly**

microspherophakia occasionally associate

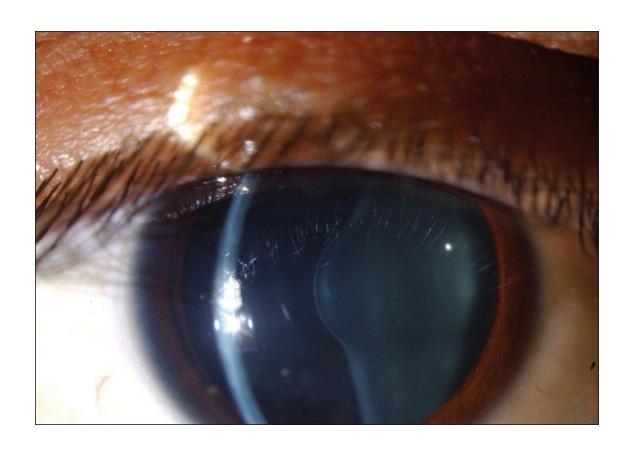








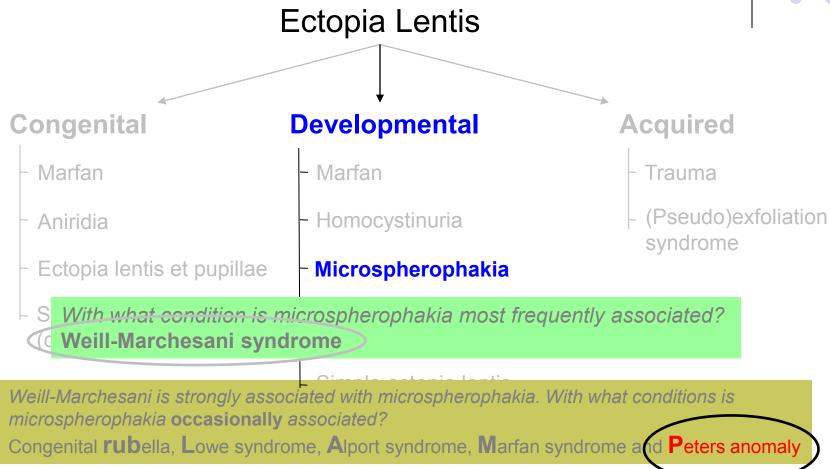




Anterior lenticonus in Alport syndrome





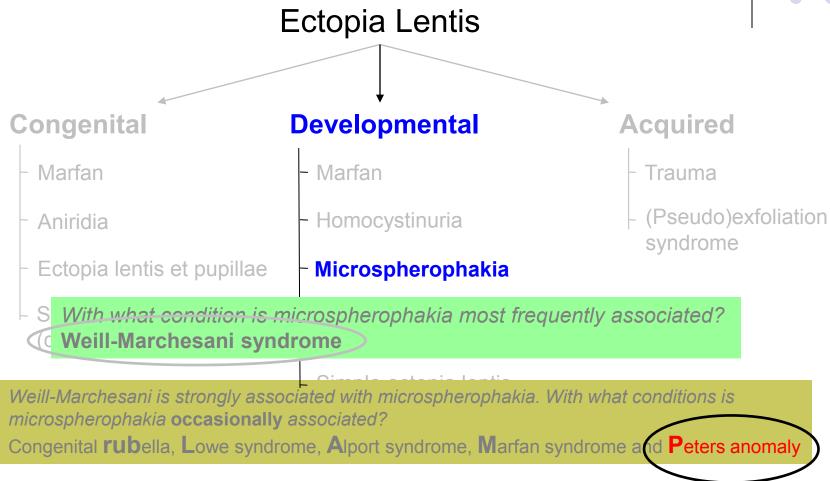


In three words (not including a form of), what is Peters anomaly?

A form of

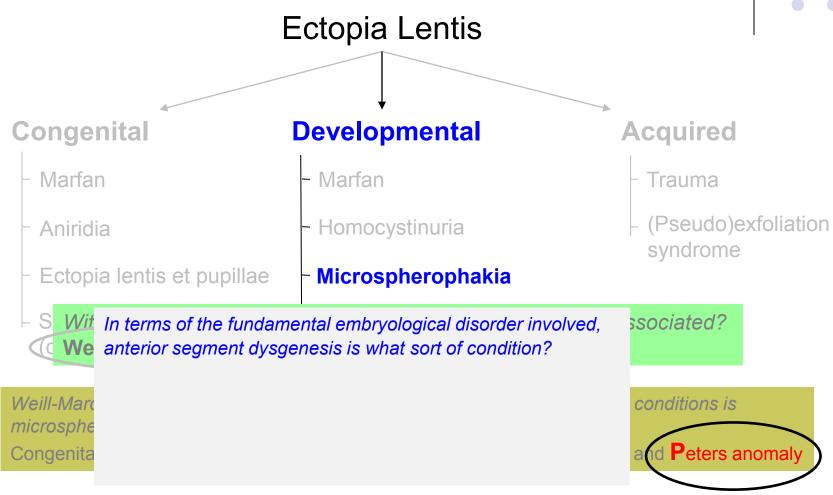






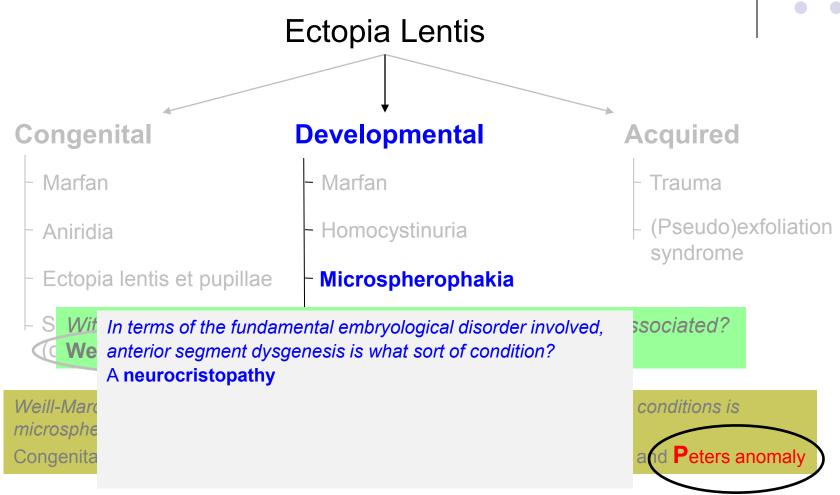






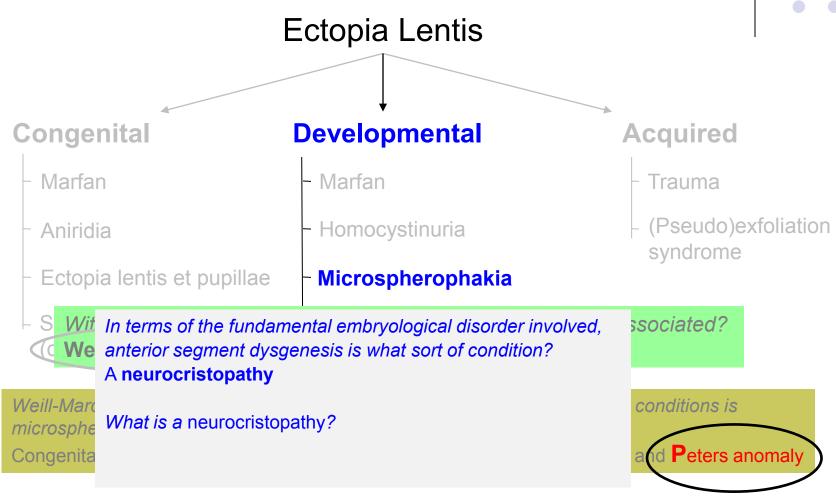






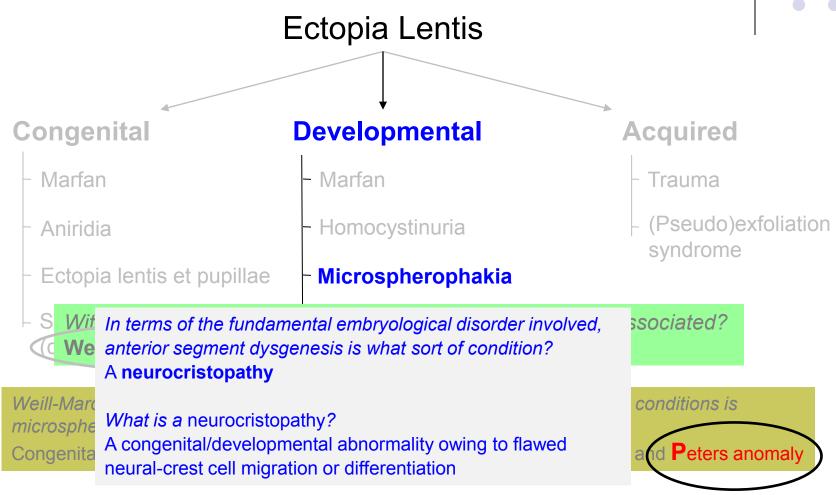
















Congenital

Marfan

Aniridia

Ectopia lentis et pupillae

Developmental

Marfan

- Homocystinuria

Microspherophakia

Acquired

Trauma

(Pseudo)exfoliation syndrome

How does Peters anomaly present?

ssociated?

and Peters anomaly







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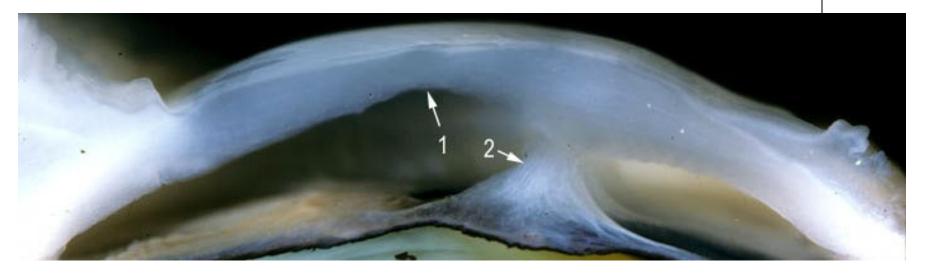
How does Peters anomaly present?

With a defect of the posterior central cornea, including the absence of Descemet's and subjacent endothelium. Adhesions extending from the iris to the posterior corneal defect are often present.

ssociated?



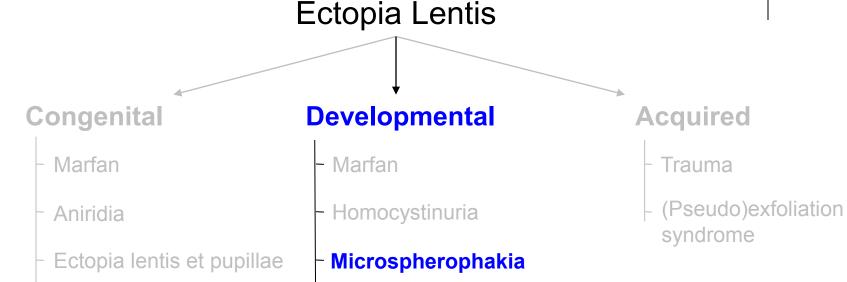




1. Defect of the posterior central cornea, including the absence of Descemet's and subjacent endothelium

2. Adhesions extending from the iris to the posterior corneal defect





How does Peters anomaly present?

With a defect of the posterior central cornea, including the absence of Descemet's and subjacent endothelium. Adhesions extending from the iris to the posterior corneal defect are often present.

What is the classic clinical scenario for Peters?

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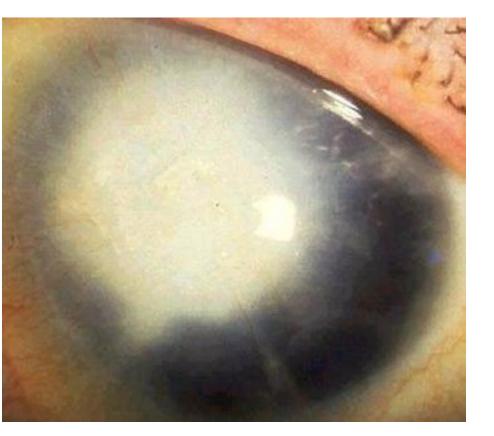
What is the classic clinical scenario for Peters?

A corneal opacity noted at birth (it's in the STUMPED mnemonic).

The opacity ranges in severity from a faint haze to an opaque, elevated and vascularized mess.

ssociated?

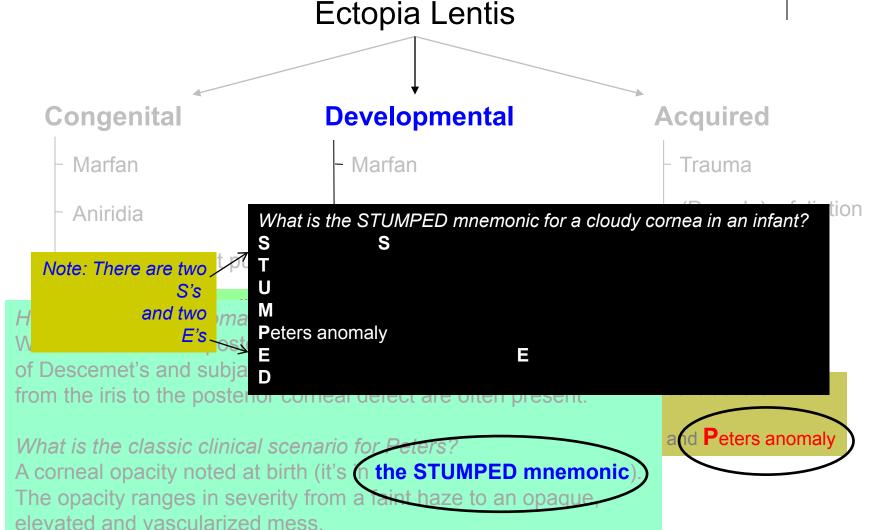






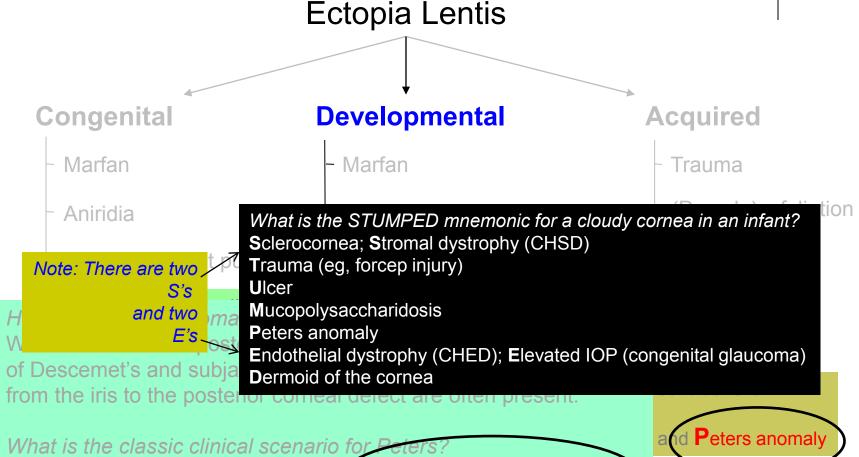
Peters anomaly: Hazy cornea











A corneal opacity noted at birth (it's n the STUMPED mnemonic)

The opacity ranges in severity from a faint haze to an opaque

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Q

Ectopia Lentis





Why is the term 'aniridia' technically a misnomer?

Congenital

Marfan

Aniridia

Ectopia lentis

Simple ectop (congenital ty

uired

auma

seudo)exfoliation indrome





Ectonia Lantic

Why is the term 'aniridia' technically a misnomer?

Because a rudimentary iris root is always present

Congenital

Marfan

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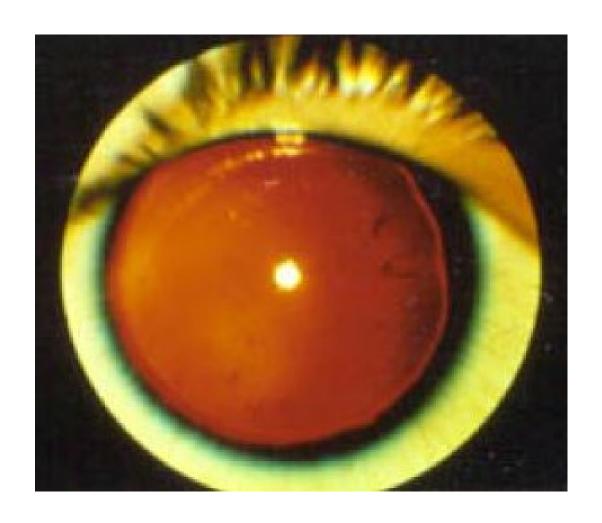
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Aniridia. Note the presence of an iris stub/root



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Foveal and optic nerve hypoplasia

(congenital ty

(...., po)



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With what developmenta

The WAGR complex

WAGR complex consists of:

W

Aniridia

G

R

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auma

ted?

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Ectonia Lantis

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With what developmenta

The WAGR complex

WAGR complex consists of:

Wilms tumor

Aniridia

Genitourinary abnormalities

Retardation

uired

auma

ted?

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The WAGR complex

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What is the noneponymous name for Wilms tumor (ie, what sort of tumor is it)?

WAGR complex consists of:

(······

Aniridia





Ectonia Lantic

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Yes

With what developmenta Wilms tumor

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ted?

What is the noneponymous name for Wilms tumor (ie, what sort of tumor is it)? **A nephroblastoma**

WAGR complex consists of:

Aniridia







WAGR complex: Wilm's tumor



Ectopia Lantic

Why is the term 'aniridia' technically a misnomer? Because a rudimentary iris root is always present

Congenital

Marfan

Aniridia

Ectopia lenti

Simple ectop (congenital ty

Is aniridia usually unilateral, or bilateral?

It is almost always bilateral

Is nystgamus commonly associated with aniridia?

Yes

With what developmental 'complex' is aniridia associated? The WAGR complex

Are all aniridia cases at risk for WAGR complex?

uired

auma

seudo)exfoliation mdrome





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sporadic vs familial uired

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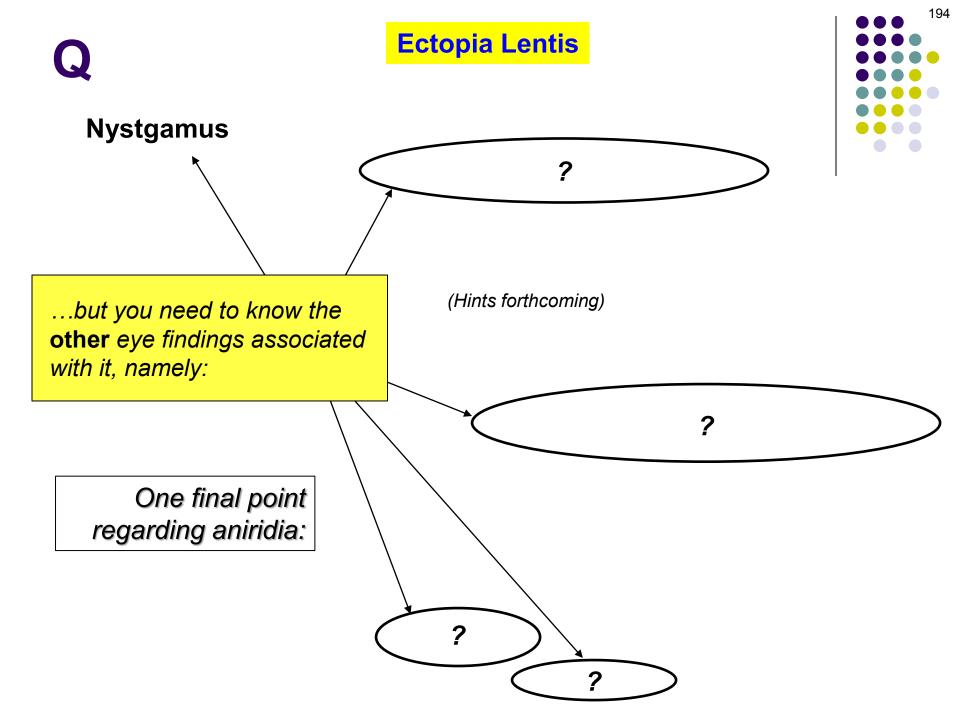
For more info on aniridia and/or the WAGR complex, see slide-set P17



We mentioned that aniridia is associated with nystagmus...

One final point regarding aniridia:









Nystgamus

A corneal issue

...but you need to know the other eye findings associated with it, namely:

One final point regarding aniridia:

Hypoplasia of two structures

Angle-related condition

Anterior seg issue

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Nystgamus

limbal stem cell deficiency

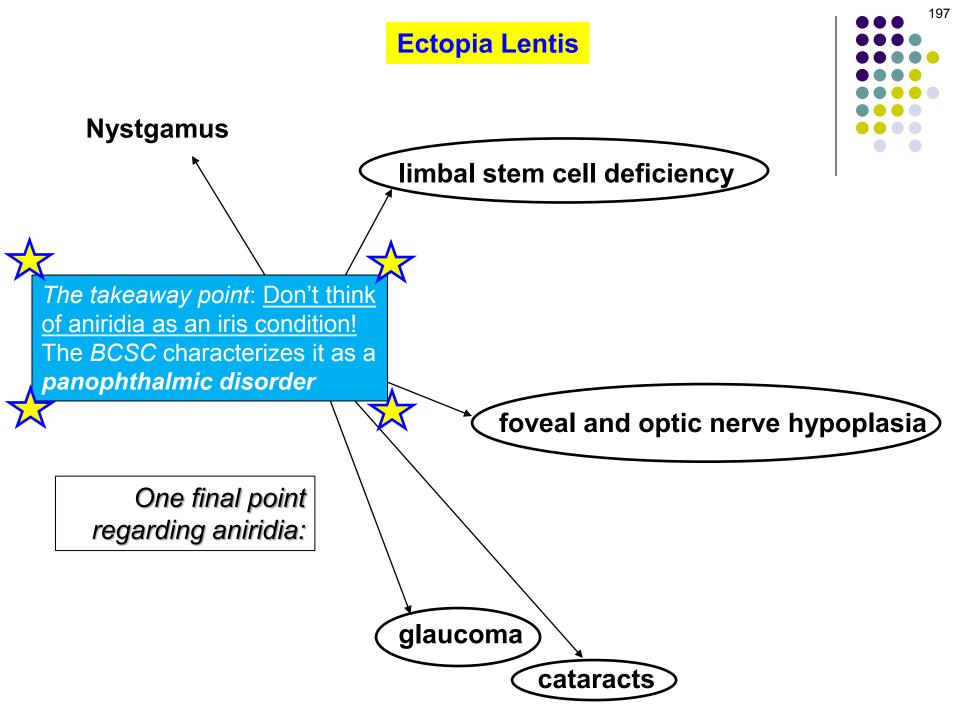
...but you need to know the other eye findings associated with it, namely:

One final point regarding aniridia:

foveal and optic nerve hypoplasia

glaucoma

cataracts





What is simple ectopia lentis?

Congenital

Marfan

Aniridia

Ectopia lentis et pupillae

Simple ectopia lentis (congenital type)

congenital glaucoma





What is simple ectopia lentis?

A genetic condition the hallmark of which is subluxation of the lens

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congeniiai giaucoma



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In what direction are the lenses displaced?

congenital glaucoma

Simple ectopia lentis (late-onset type)

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In what direction are the lenses displaced? Superotemporal

Assuming the age-of-onset for the congenital type is birth [ed.note: it is], when does lens displacement occur in the late-onset type?

congenital diaucoma

Simple ectopia lentis (late-onset type)

Congenital

Marfan

Aniridia

Ectopia lentis et pupillae

Simple ectopia lentis (congenital type)





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How common is it?

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In what direction are the lenses displaced? Superotemporal

Assuming the age-of-onset for the congenital type is birth [ed.note: it is], when does lens displacement occur in the late-onset type? After age 20 years

congeniral glaucoma

Simple ectopia lentis (late-onset type)

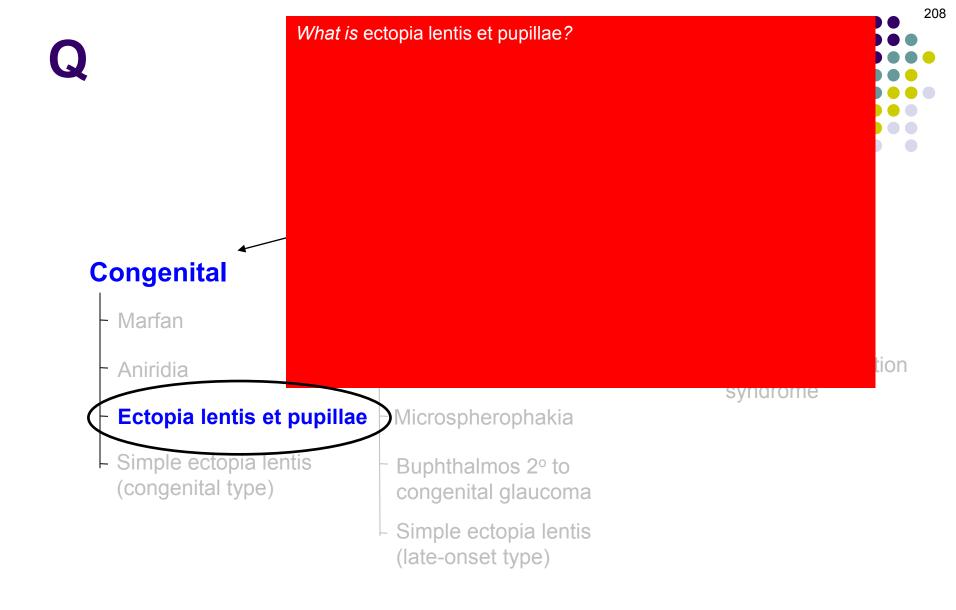
Congenital

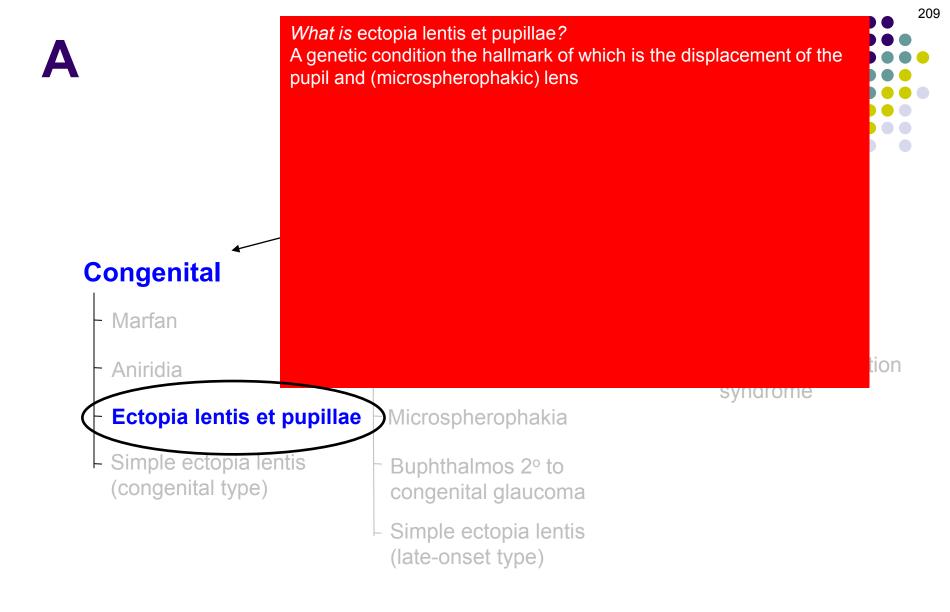
Marfan

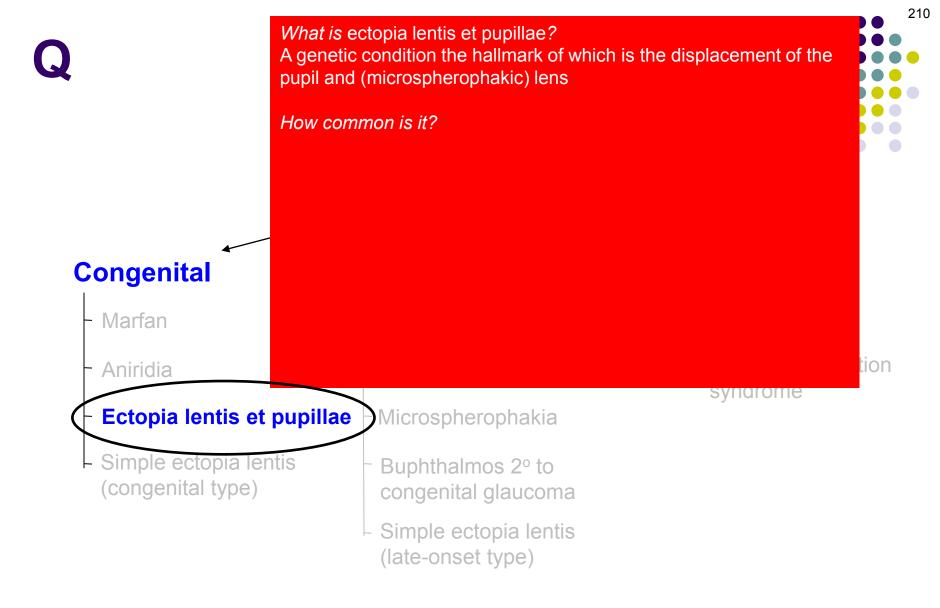
Aniridia

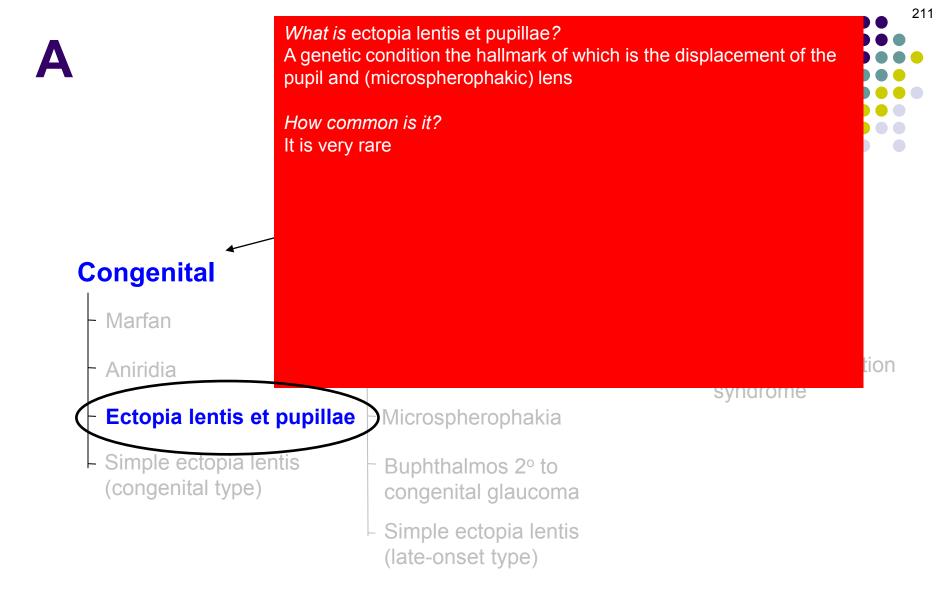
Ectopia lentis et pupillae

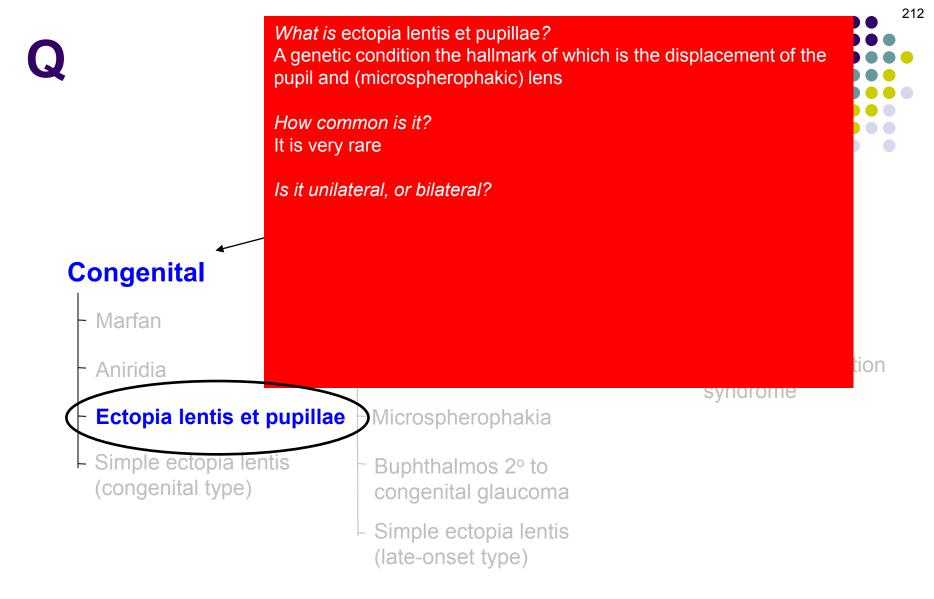
Simple ectopia lentis (congenital type)

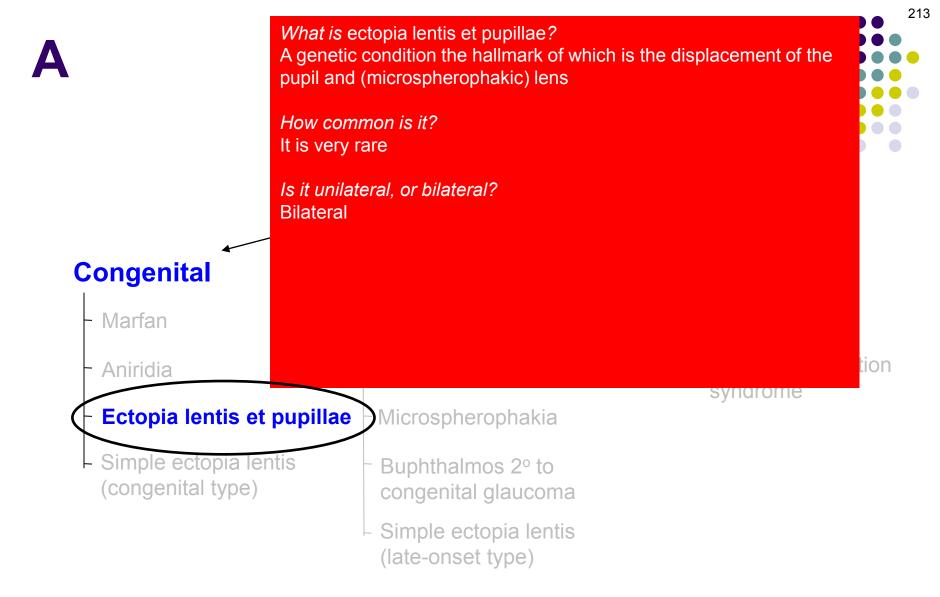












(late-onset type)

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What is ectopia lentis et pupillae? A genetic condition the hallmark of which is the displacement of the pupil and (microspherophakic) lens How common is it? It is very rare Is it unilateral, or bilateral? Bilateral The pupils typically have two further abnormalities—what are they? Congenital and dilate --They are very miotic vs dilated well vs poorly --? Marfan tion Aniridia synarome **Ectopia lentis et pupillae** Microspherophakia Simple ectopia lentis Buphthalmos 2° to (congenital type) congenital glaucoma Simple ectopia lentis (late-onset type)

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What is ectopia lentis et pupillae?
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Marfan

Aniridia

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Ectopia lentis et pupillae

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Microspherophakia

Buphthalmos 2° to congenital glaucoma

Simple ectopia lentis (late-onset type)

tion

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synarome



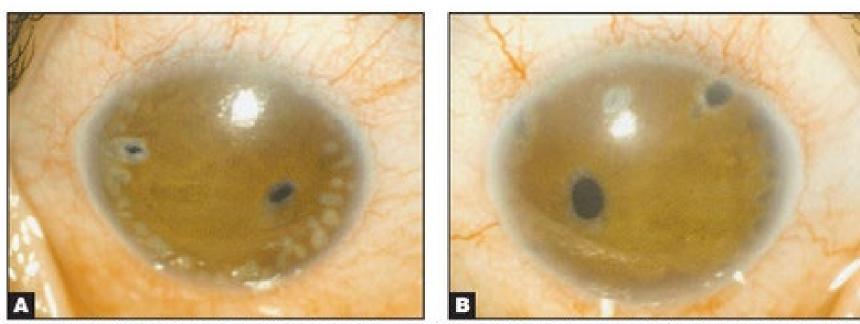


Figure 1. Preoperative view of both eyes in a patient with bilateral ectopia lentis et pupillae syndrome showing several lesions on the iris due to previous laser therapy. (A) Right eye. (B) Left eye.

Ectopia lentis et pupillae. Note the tee-tiny pupils (ignore the LPIs)

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Simple ectopia lentis (congenital type)

Buphthalmos 2° to congenital glaucoma

Simple ectopia lentis (late-onset type)

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Marfan

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The pupils typically have two further abnormalities—what are they?

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- --They are slit-like in shape

Ectopia lentis et pupillae

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Microspherophakia

Buphthalmos 2° to congenital glaucoma

 Simple ectopia lentis (late-onset type) tion

219

synarome







Ectopia lentis et pupillae: Bilateral inferonasal displacement of slit(ish) pupils

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In what direction are the pupils and lenses displaced?

Ectopia lentis et pupillae

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synarome



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Aniridia

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In what direction are the pupils and lenses displaced? In opposite directions—pupils _____, lenses

Ectopia lentis et pupillae

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synarome

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In what direction are the pupils and lenses displaced?
In opposite directions—pupils inferotemporal, lenses superonasal

synarome

Ectopia lentis et pupillae

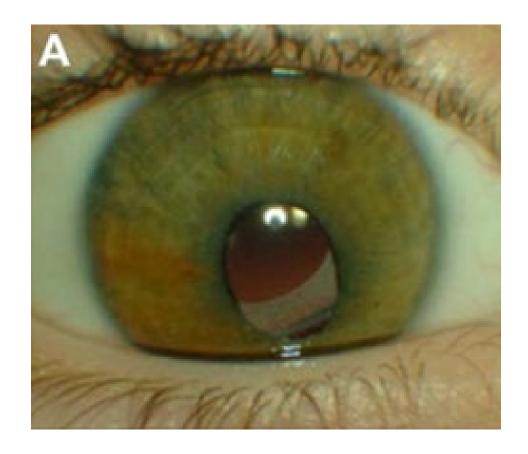
Simple ectopia lentis (congenital type)

Microspherophakia

Buphthalmos 2° to congenital glaucoma

Simple ectopia lentis (late-onset type)





Ectopia lentis et pupillae: Pupil displaced inferonasal; lens, superotemporal

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Conger

Next, let's review the direction of displacement for several causes of ectopia lentis

Marfan

Aniridia

In what direction are the pupils and lenses displaced?

In opposite directions—pupils inferotemporal lenses superonasal

synarome

Ectopia lentis et pupillae

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