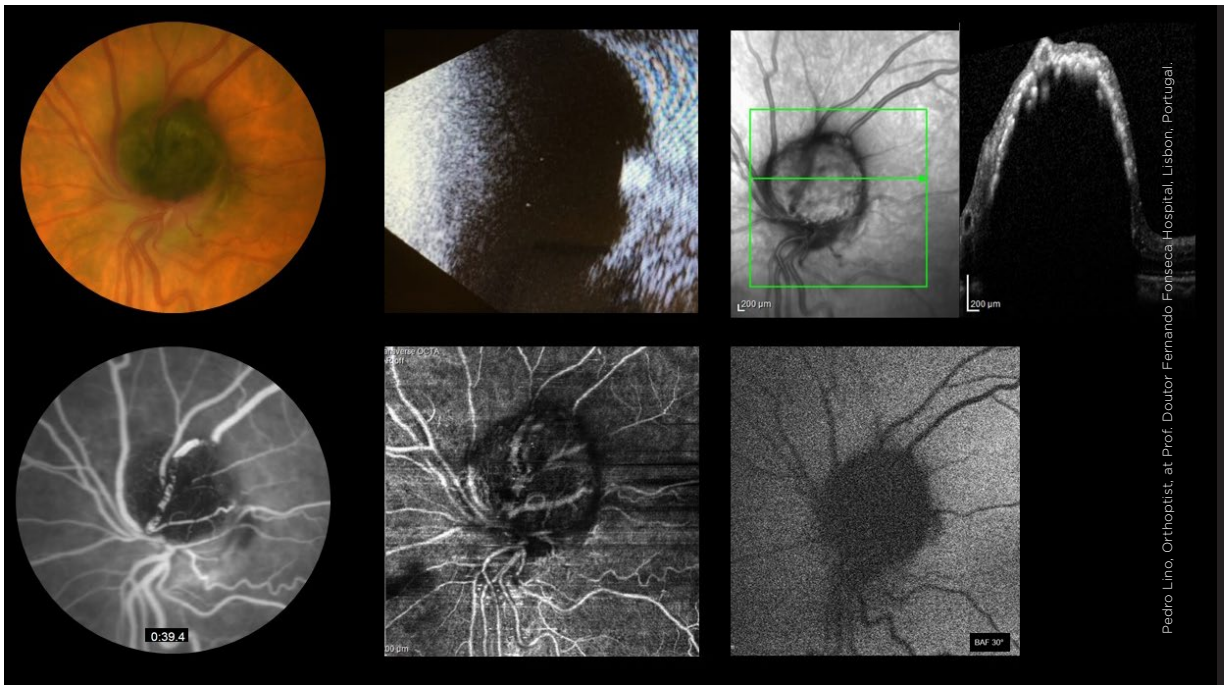
MYSTERY IMAGE

BLINK



Pedro Lino, Orthoptist, at Prof. Doutor Fernando Fonseca Hospital, Lisbon, Portugal.

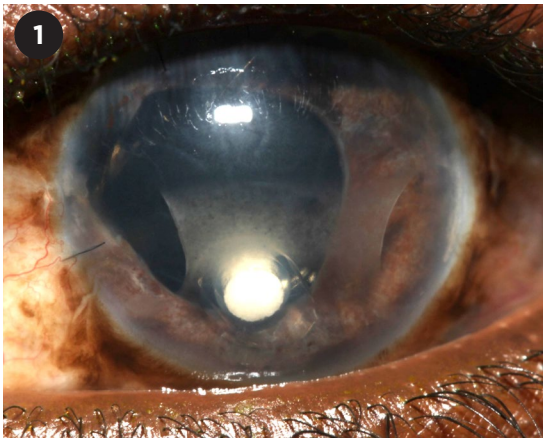
WHAT IS THIS MONTH'S MYSTERY CONDITION? *Visit aao.org/eyenet to make your diagnosis in the comments.*

LAST MONTH'S BLINK

Spontaneous Dislocation of Intravitreal Fluocinolone Implant

A 49-year-old woman with long-standing bilateral panuveitis presented with declining vision in her left eye. Her panuveitis was refractory to systemic treatments and had required multiple fluocinolone intravitreal implants: three times in the right eye, twice in the left. Vision was no light perception in the right eye and 20/125 in the left (down from 20/50 six months prior). On slit-lamp examination, the right eye showed band keratopathy and a dense pupillary membrane, while the left eye had early band keratopathy involving the visual axis and some corneal edema, as well as a fluocinolone implant (Retisert) settled inferiorly in the anterior chamber (Fig. 1).

The surgical retina service was consulted for removal of the dislocated implant. However, at the consult visit, the left cornea was stable, and the Retisert was no longer in the anterior chamber. We determined that the implant did not need to be removed, given the patient's monocular status and high risk of surgical complications. We planned for close follow-up, prompt device removal if the patient became symptomatic or was developing corneal decompensation, and referral to the cornea service for visually significant band keratopathy.



WRITTEN BY **ZUJAJA TAUQEER, MD, DPHIL,** AND **NIRALI BHATT, MD,** AT THE SCHEIE EYE INSTITUTE, UNIVERSITY OF PENNSYLVANIA, PHILADELPHIA. PHOTO BY **CHERYL DEVINE, BA, CRA.**