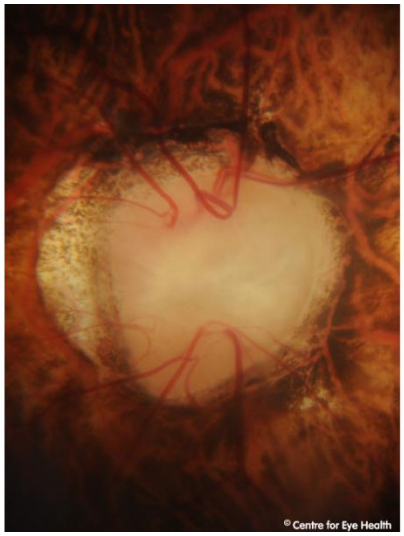
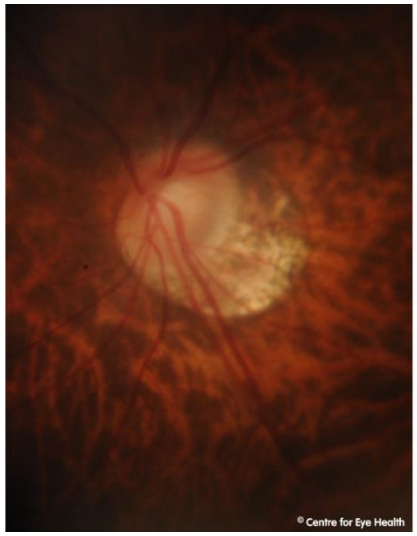
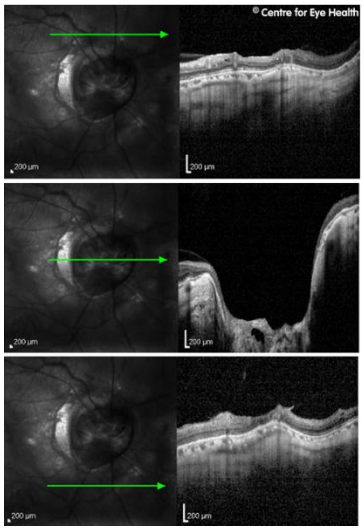
CFEH facebook Cases

CFEH Facebook Case #102

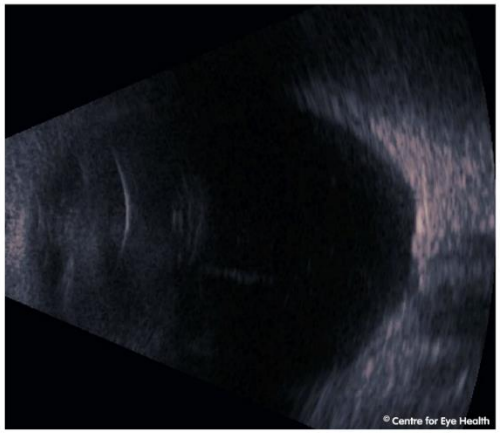
A 31 year old Caucasian female presented for an optic nerve assessment. Acuities were 6/24 OD and 6/7.5 OS, uncorrected. Identify the optic nerve condition seen in this patient and the possible complications of this condition.







B-scan Image Right Eye Vertical



ANSWER

Morning glory anomaly.

This anomaly is congenital and typically unilateral in presentation. It is characterised by a large funnel-shaped excavation of the disc, usually with an associated white glial tuft in the centre of the disc. This tuft is caused by a persistent hyaloid vascular remanent – seen in this case at the centre of the excavated disc in the middle OCT image.

The disc is typically orange/pink in colour with surrounding chorioretinal pigment changes in a ring-shaped pattern and the blood vessels are increased in number, emerging from the excavated disc in a radial pattern rather than in a typical branching pattern.

From the OCT images, we can also see paravascular cysts superior and inferior to the disc with associated vitreo-retinal traction. Inferiorly there is also a mild retinoschisis present. The B-scan ultrasound shows a posterior staphyloma and the morning glory disc is evident.

Morning glory anomaly has a strong association with serous retinal detachment the incidence of which is commonly reported at 30%. Presentation may be sporadic, or have systemic associations such as frontonasal dysplasia (mid-facial anomalies) and midline brain malformations.