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## Clinical Image

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# Eye shaped sub-hyaloidal hemorrhage. What does the eye reveal about the body?

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hemorrhage; Laser yag; Blood pressure.

#### Description

A 62 year old female patient, with no previous history, consulted in emergency department for a sudden decrease in visual acuity of the right eye with a feeling of uneasiness and vertigo.

The Best Corrected Visual Acuity (BCVA) was measured at 10/10 according to the Snellen scale in the left eye and "counting fingers" in the right eye. The fundus examination showed a premacular, sub-hyloidal hemorrhage, taking the shape of an eye with a double crown developed at the expense of a superior temporal macroaneurysm.

Spectral-Domain Optical Coherence Tomography (SD-OCT) confirmed the premacular location of the blood, bordered in the superior temporal by an intraretinal hemorrhage containing an aspect of ruptured Retinal Arterial Acroaneurysm (RAAM) causing the sub-hyaloidal hemorrhage. The blood pressure was measured immediately, showing a high blood pressure of 170/80 mmhg. The patient was referred to his attending cardiologist for management.

As the visual acuity did not improve after 7 days, a hyaloidotomy with laser Yag was programmed and the visual acuity was restored to 7/10 one week after the laser.

Retinal Arterial Macroaneurysm (RAAM) is an acquired vascular pathology. Typically it is solitary, round or fusiform in shape, located on the path of the 4 main retinal arterial branches in the para-macular or posterior equatorial zone. The main risk factors are arterial hypertension and atherosclerosis. It is usually described in subjects over 60 years of age with a female predominance. Fibrinolytic disorders, Valsalva maneuvers, a drug induced origin should be considered as a differential diagnosis when searching for the etiology of a sub-hyaloid hemorrhage.

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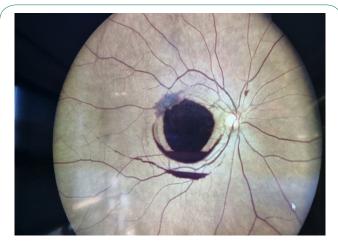


Figure 1: Eye shaped sub-hyaloidal hemorrhage of the right eye.

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