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Optical coherence tomography angiography of a bilateral optic disc pit

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Image in medicine

Optic disc pit (ODP) is a rare congenital defect presumably arising from the failure of fetal fissure closure in embryogenesis. It occurs in about 1 in 10,000 people with no gender predilection. ODP is usually unilateral. We describe the case of a 52-year-old female patient who presented for a regular ophthalmic examination. Visual acuity was 20/20 and anterior segment was unremarkable in both eyes. Fundus revealed a bilateral optic pit located inferotemporally within the nerve (A,B). Swept-Source Optical Coherence Tomography demonstrated the defect caused by the ODP without secondary retinoschisis or subretinal fluid in both eyes (C,D). Optical Coherence Tomography Angiography (OCT-A) showed the ODP as a

hyporeflective lesion in the optic nerve head, irregular-shaped in the right eye and round-shaped in the left eye (E,F). OCT-A has also displayed a decrease in vascular density with no-flow within the defect (G,H). A 6-month clinical monitoring has been undertaken.

Tomography demonstrated the defect caused by the ODP without secondary retinoschisis or subretinal fluid in both eyes (C,D). Optical Coherence Tomography Angiography (OCT-A) showed the ODP as a hyporeflective lesion in the optic nerve head, irregular-shaped in the right eye and round-shaped in the left eye (E,F). OCT-A has also displayed a decrease in vascular density with no-flow within the defect (G,H). A 6-month clinical monitoring has been undertaken

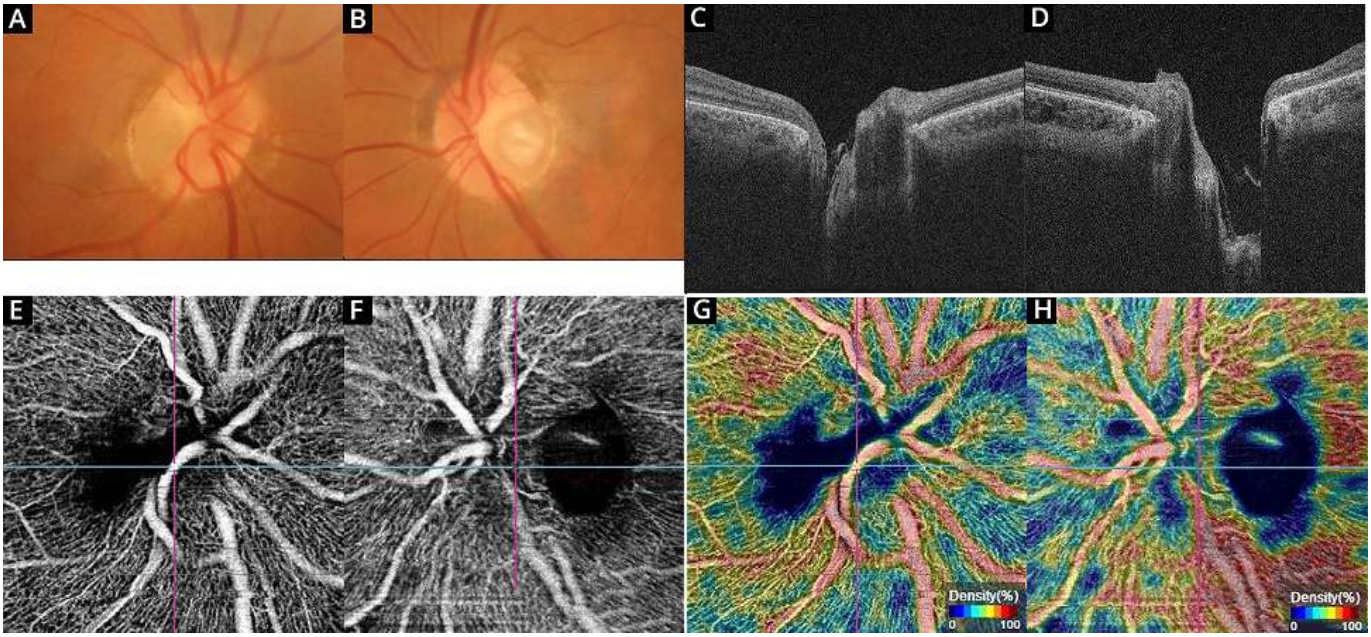

Figure 1: Fundus revealed a bilateral optic pit located inferotemporally within the nerve (A,B). Swept-source optical coherence tomography demonstrated the defect caused by the ODP without secondary retinoschisis or subretinal fluid in both eyes (C,D). Optical coherence tomography angiography (OCT-A) showed the ODP as a hyporeflective lesion in the optic nerve head, irregular-shaped in the right eye and round-shaped in the left eye (E,F). OCT-A has also displayed a decrease in vascular density with no-flow within the defect (G,H). A 6-month clinical monitoring has been undertaken