



OFTALMOLOGÍA DE AVANZADA PARA EL MUNDO

CASE 13 – “Peter’s anomaly”

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CASE REPORT

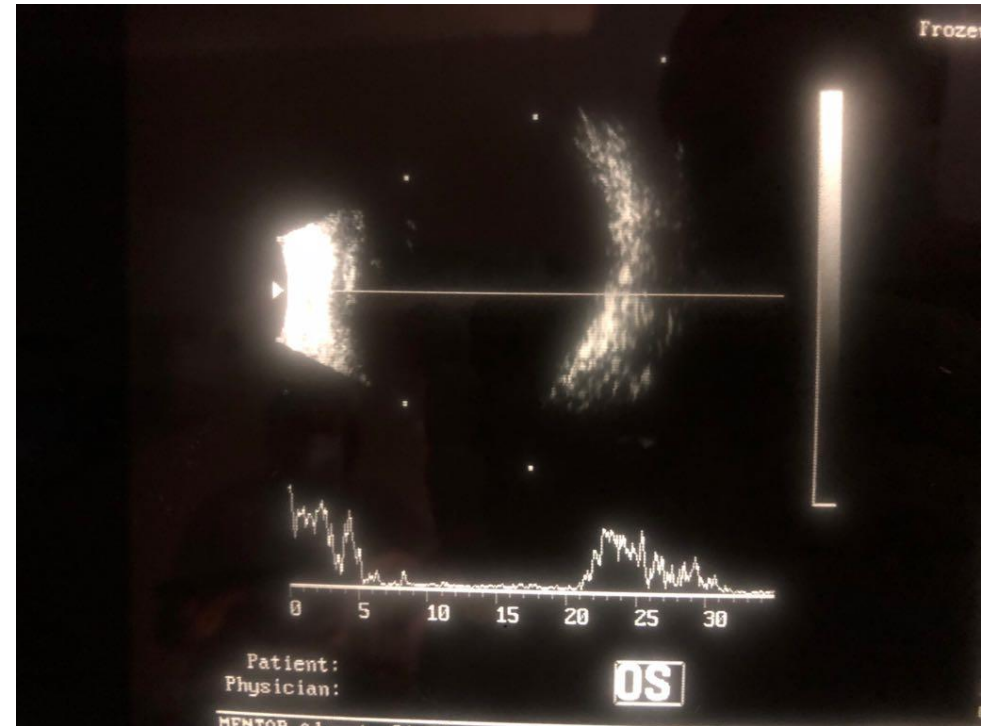
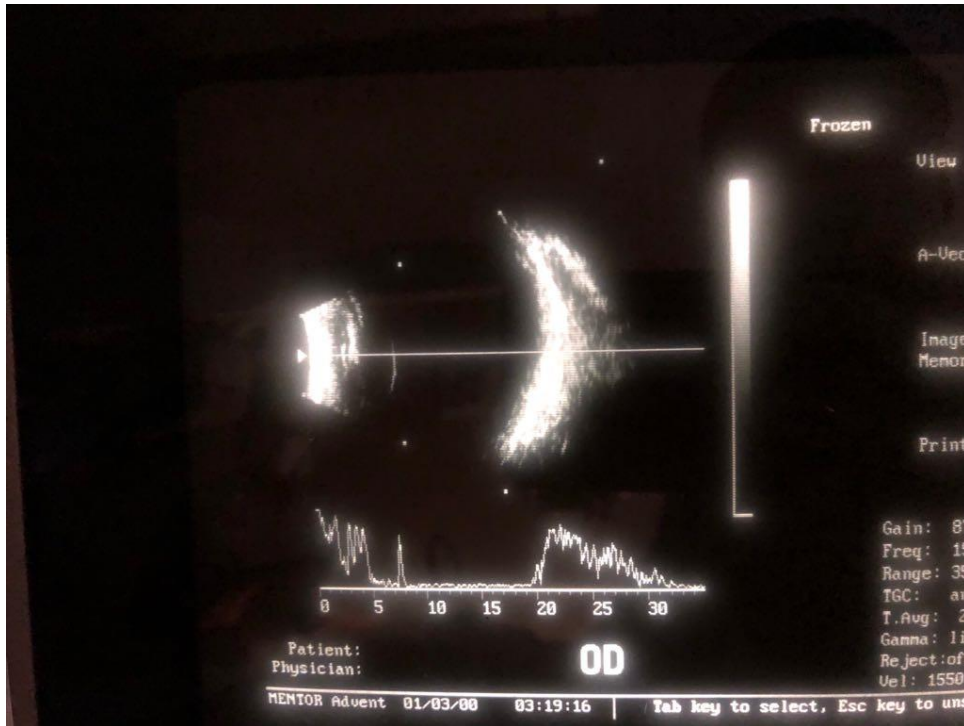
- 49 day old female
- Referred for corneal “thickening” in both eyes
- Family history: no similar findings
- Otherwise well

EYE EXAMINATION UNDER ANESTHESIA

- Corneal opacities in both eyes
- Axial length: 17 mm both eyes
- IOP: 31 – 35 mmHg both eyes
- Fundus: difficult to visualise due to opacity

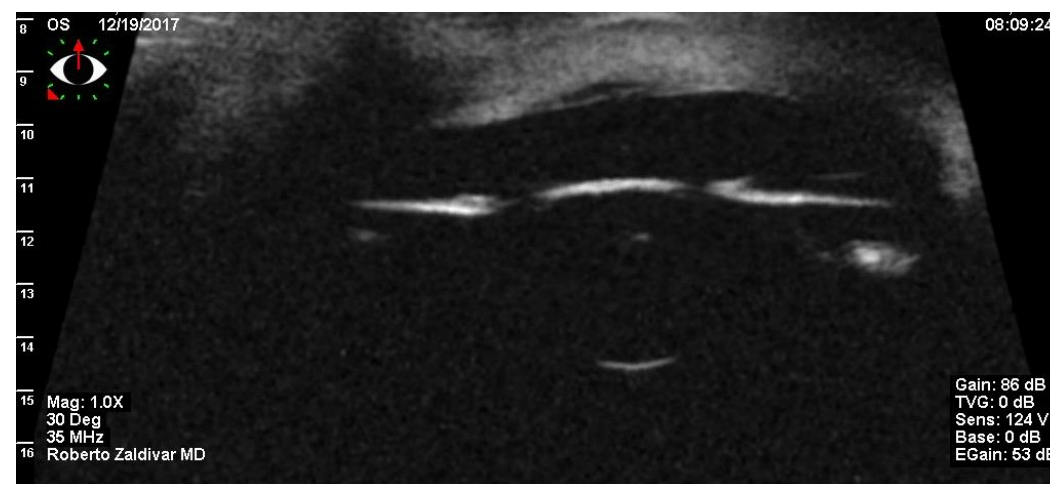
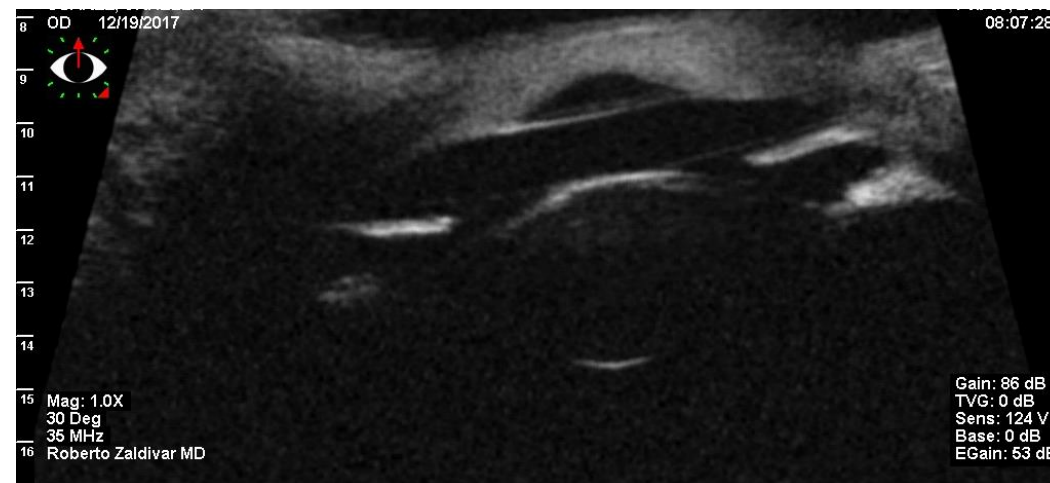


B-SCAN ULTRASOUND



ULTRASOUND BIOMICROSCOPY

- Corneal thickening in both eyes
- Membrane behind posterior corneal surface, possibly Descemet membrane?, making a cystic space
- Anterior subcapsular cataract





WHAT DID WE DO?

We chose to perform a
Trabeculectomy in both eyes

FOLLOW-UP AFTER SURGERY

- IOP: 17/17
- BMC: central corneal scarring, 10 mm both eyes.
- Axial length: 21 OD, 22 OS



FOLLOW-UP 6 MONTHS AFTER SURGERY

- IOP controlled
- Pharmacological midriasis to allow light to enter the eye
- Early visual stimulation
- Nystagmus



Some questions about the case...

1- Which of these genes do you expect to be mutated in this case?

a – PAX6, PITX2, CYP1B1, FOXC1

b – KRT3, KRT12, TGFBI, SLC4A11

c – COL8A2, ZEB1, TACSTD2, TGFBI

2- Which of these would you consider as differential diagnosis in this case?

a - Sclerocornea

b – Endothelial dystrophy

c – Dermoid

d - Rubella

e – All of them

3- Would you recommend surgery for visual rehabilitation (cornea/lens) now, age 7 months?

a – Yes

b – No

ANSWER HERE

THANK YOU!