A Rare Case Of Morning Glory Anomaly With Retinal **Detachment**

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Abstract

Background: To describe a rare case of morning glory anomaly in which 30% can have retinal detachment.

Methods: It is a Case report of patient who had incidental finding of morning glory anomaly after he came to out patient department with history of trauma, also retinal detachment was seen in fundus finding for which surgery was suggested

Results: The case describes a 36 year old male with no systemic illness who had come with diminution of vision in right eye followed by history of trauma with sugarcane stick after complete ophthalmic evaluation found to have morning glory syndrome with retinal detachment inferiorly involving macula involving horse shoe tear nasally towards periphery.

Conclusion: Patient had incidental finding of morning glory syndrome after having symptoms prominent due to retinal detachment and was advised for scleral buckle 240° with pars plana vitrectomy with membrane peeling with endolaser with silicon oil implantation under local anesthesia

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Introduction I.

Morning glory anomaly is a rare sporadic condition which is usually unilateral with spectrum of severity (1). In this disc anomaly is seen where large disc with funnel shape exacavation surrounded by ring shaped chorioretinal disturbance is seen and a white tuft of glial tissue overlies the central portion which represents persistent hyaloid vascular remnants. Complications seen as retinal detachment are found in 30% of cases. It resembles coloboma (2). Disc is seen surrounded by elevated rim of pink neuroglial tissue with the vessels emerging radially from the disc as spokes in all directions (3).

II. **Case Report**

A 32 year old male came to out patient department with complaints of dimunition of vision in right more more since 6 months. He had a history of trauma to right eye 3 years ago with sugarcane stick after which he had vision of finger counting at 1 feet with PR accurate and not improving on pin hole in right eye while left eye vision was 6/6 according to sellens visual acuity chart. On anterior segment examination right eye had central posterior subcapsular cataract and left eye was within normal limit.

On fundus examination right eye had disc with features of morning glory syndrome and inferior retinal detachment involving macula with a horse shoe tear noticed nasally in the periphery, whereas left eye fundus was within normal limit.

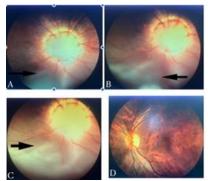


Fig.1. Colour fundus photograph of (A),(B),(C) Showing right eye morning glory optic disc with black arrow inferior Retinal detachment and (D)showing normal colour fundus photograph of left eye

Discussion

Morning glory syndrome is a disc anomaly by birth which is seen as enlarged funnel shaped cavity of the optic disc. A rare complication seen is retinal detachment which was seen in this case and treatment advised was surgery.

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