A Case of Retrolental Fibroplasia Terminating in an Ablatio Falciformis

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A girl was born on Dec. 5, 1953 after a caesarian section. It had been a thirty-two weeks’ pregnancy, the birth weight was 800 gm. Previous child of this secundipara had been born prematurely. Indication for the caesarian section was a history of six eclamptic fits the mother had had prior to and after admission.

The operation was performed under spinal anaesthetic.

At birth the child was very distressed and suffering from severe blue asphyxia and irregular pulse. She was immediately transferred to the incubator; a regulated inflow of 5 l 02 was maintained. Half an hour later colour and pulse had improved.

Fig. 1.
Fig. 2.

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After a fortnight the child weighed 1,300 gm. and the oxygen inflow was gradually brought down to 0 on the 37th day, when the child was transferred to the cradle. The weight had by then increased to 1,900 gm. The fundus was examined weekly and 3 weeks after it had been taken out of the incubator the first changes could be seen. These were bilateral and confined to the lower temporal quadrant.

The changes consisted of irregularly shaped, slightly prominent white patches in the retina. The vessels were not abnormally thin but on the nasal side of the optic disc a black cap-like structure was noticed (Fig. 1). Although the child was put back into the incubator and a concentration of 3 l oxygen per minute was maintained, the changes seen in the fundus and the changes in both eyes progressed in similar proportion, and after the first week the white patches already described had grown in size.

Vessels traversing the whitish areas were seen as well as small haemorrhages. After another week the white areas were seen to be detached, the detachment actually reaching the optic disc area. The vessels were narrower now but haemorrhages had disappeared. The fourth week showed a less prominent detachment, while the detached area was more stretched and rather taut right up to the optic disc area. Vessels were seen in the retinal folds although other retinal vessels could not be found. The day after they could be seen although they were very small. Next control showed us that the peripheral part of the detachment had actively come forward reaching the lens and overlying the disc. Several vessels were seen in the detached segment of the retina.
The rest of the retina was supplied by rather narrow vessels. A fine pigmentation of the choroïd now manifested itself round the detached retina edges.

The oxygen supply had in the meantime been gradually lessened to 0 and the child put back in the cradle.

The whole picture developed into a real ablatio falciformis: a string-like appearance starting at the nasal dark pigmented half of the disc border expanding into a broad peripheral base in the lower temporal quadrant jutting forward towards the lens.

Vessels were also seen to run in this detached area. Retina and choroïd surrounding the falciformis where before the retina had also been detached, showed degenerated patches.

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The anterior chamber which had been found rather shallow approximately 3 weeks after the first visible changes had by then gone back to normal.

Inflammatory changes were not found. The whole picture has remained stationary the last 3 months (Fig. 2).

The wandering nystagmus has somewhat lessened, the child follows objects moved in front of her and reaches for these in the right direction.

Pseudo-Papilloedema.

By J. TH. PLANTEN (Utrecht).

The fundus-picture of pseudo papillitis or pseudo papilloedema in the hypermetropic eye is well known. Myopic eyes can also lead to diagnostic difficulties, especially when not only nasally but right around the edge of the optic disc a mushrooming effect is found which in some cases causes a disappearance of the excavation of the disc. Four cases admitted to the Neurological Univer-

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φ supertraction
9 pseudo-papilloedema
Fig. 1.

sity Clinic with complaints of headache and showing “papilloedema” were the reason for this communication.

It appeared that in those families a typical optic disc phenomenon could be traced. All the members of a certain branch of the family had a very small sharply defined protruding white disc edge temporally not a myopic conus. Some of them showed usually unilaterally