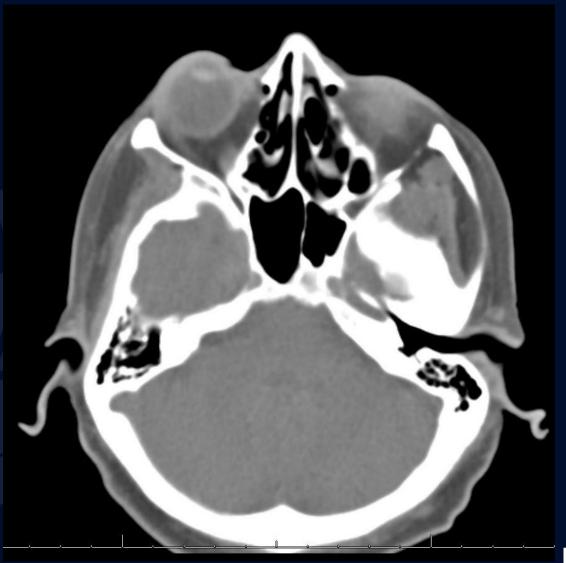
# 68 year-old female with history of R eye myopia, partial inferior visual field deficit, and proptosis

Kyle Robey, MS3 Aladdin Tarakji, M.D.

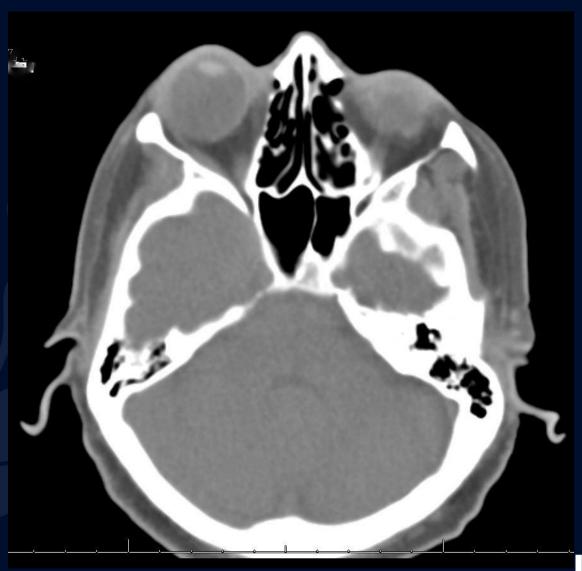




















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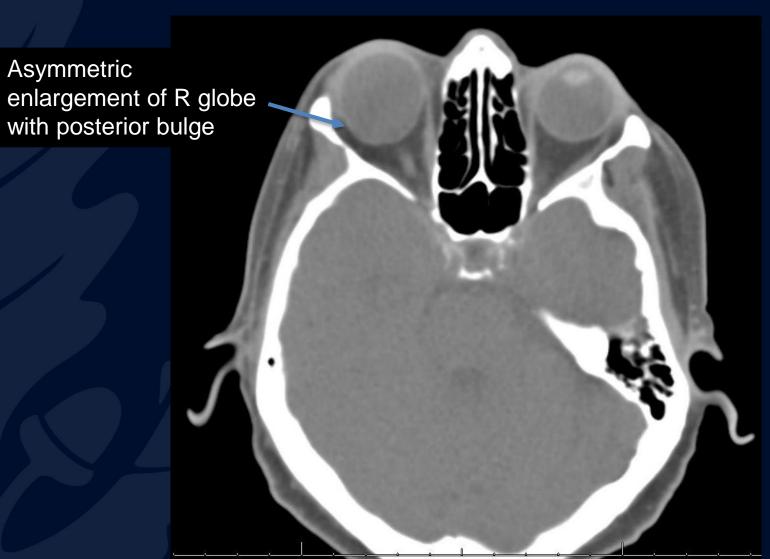






# Posterior staphyloma







## **Etiology**:

- Associated with highly myopic (egg-shaped) eye
  - Often hereditary
- Due to defective sclera (collagenous structural outercoat of eye)
  - When severe, focal outward bulge → staphyloma
- Posterior > anterior
  - Temporal > nasal

### Presentation:

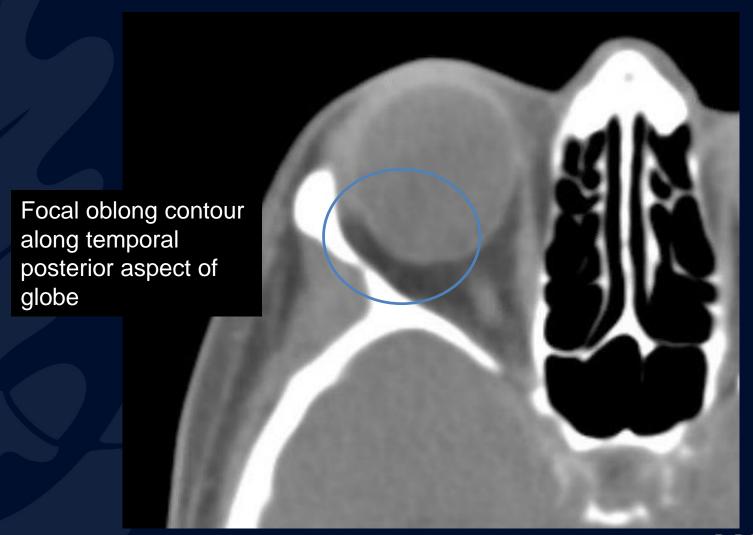
Visual deficiency/myopia, vision loss in ipsilateral eye

RADIOLOGY

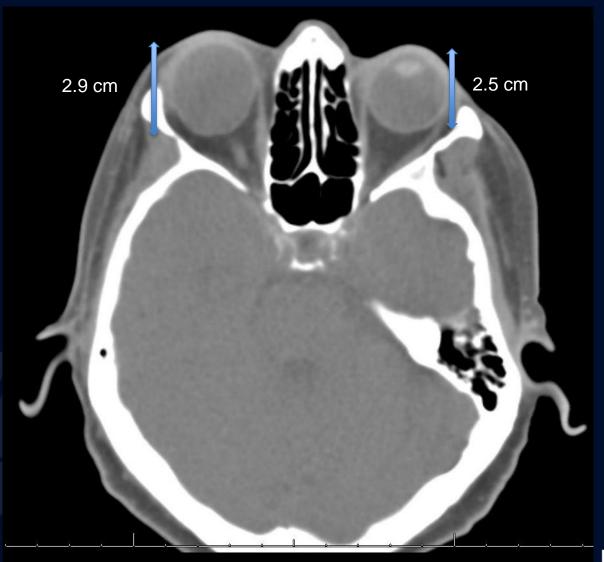
## Diagnosis:

- Via fundoscopy, optical coherence tomography, or imaging
- CT orbits/sella w/wo contrast:
  - Elongation of AP diameter of globe
  - Focal, outward bulge of sclera at posterior pole
  - Thinned/absent uveoscleral rim at site of bulge
  - Lack of enhancement of uveoscleral tissue

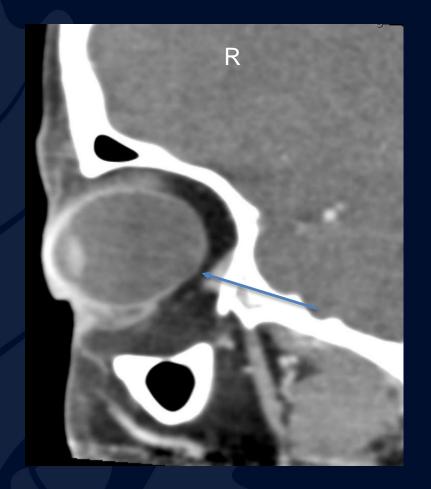










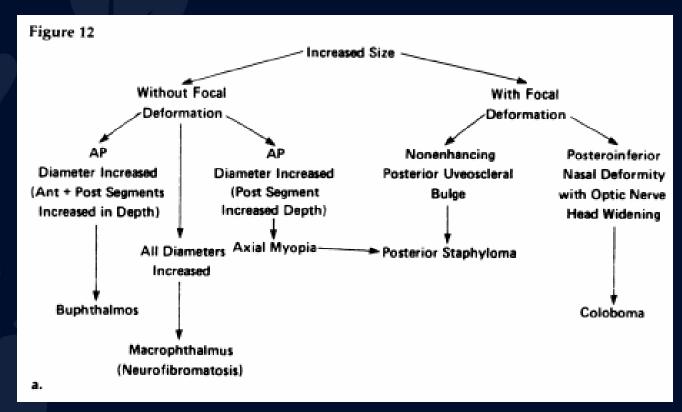




Increased AP diameter again evident on sagittal view Uveoscleral rim is decreased in attenuation on R side compared to L, especially at site of staphyloma (arrow)



# Differential [2]





### Prognosis:

 Poor, since retina and choroid are also thinned -> retina is prone to detachment

### **Treatment:**

- No effective treatment has been established
- Scleral implants?



# References

- Anderson R L, Epstein G A, Dauer E A. Computed tomographic diagnosis of posterior ocular staphyloma. American Journal of Neuroradiology. 1983; 4 (1) 90-91.
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- 3. Ohno-Matsui K. Posterior Staphyloma in Pathologic Myopia. Retinal Physician. 2017; 14: 38-40, 42

