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

Kyle Robey, MS3
Aladdin Tarakji, M.D.
Posterior staphyloma
Asymmetric enlargement of R globe with posterior bulge
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
Staphyloma

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
Focal oblong contour along temporal posterior aspect of globe
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)
Staphyloma

Differential [2]
Staphyloma

Prognosis:
• Poor, since retina and choroid are also thinned → retina is prone to detachment

Treatment:
• No effective treatment has been established
• Scleral implants?
