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Clinical Image

Corneal Hydrops in a Keratoconic Patient Treated with an Intracameral Gas Injection of Perflouropropane (C3F8)

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Clinical Image

Figure 1 Severe corneal hydrops pictured above during initial presentation at an emergency appointment in a keratoconic eye. A torn Descemet's membrane is visible centrally, leading to diffuse corneal edema (Grade 3). Best corrected visual acuity was 20/800. Therapeutic management was initiated immediately with Muro 128, Timolol ophthalmic solution BID and Pred Forte QID. Patient was referred for a consultation for an intracameral gas injection of C3F8 perflouropropane (octoflouropropane). Figure 2 shows the ocular presentation six days status/post intracameralgas injection. Corneal edema appears greatly resolved (Grade 1). Best correctable visual acuity 20/60 achievable through use of a scleral lens. Dynamic fitting process will be continued as the gas bubble continues to dissolve in the anterior chamber and the refractive error stabilizes. The need for a corneal graft has been postponed by the combination of intracameral gas injection and correction with a scleral lens. This patient has a promising visual prognosis at this time.

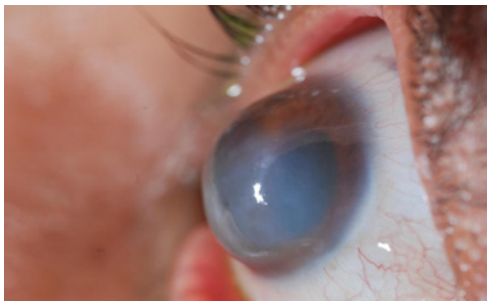

Figure 1: Severe acute corneal hydrops.

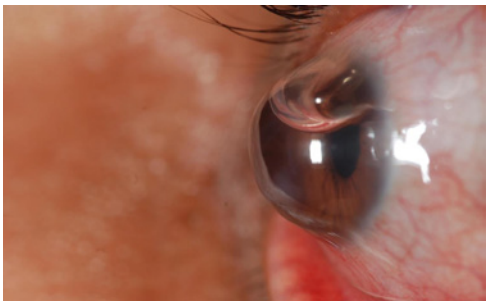

Figure 2: Resolving corneal hydrops status-post intracameral gas injection.

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