

Bilateral Simultaneous Central Retinal Vein Occlusion

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A 73 year old Caucasian male patient was referred to the eye department by his optometrist who had observed scattered retinal haemorrhages in both eyes during a routine eye examination. On presentation his corrected Snellen visual acuity was 6/9 in each eye and he had no visual complaints. Anterior segments examination revealed no abnormality. Intraocular pressure was normal. Dilated fundus examination showed deep blot haemorrhages as well as some superficial flame haemorrhages scattered across all four quadrants in each eye. All branches of the central retinal vein were slightly dilated and tortuous. The patient suffered from spinal arthritis, gout, acid peptic disease and haemorrhoids. His blood pressure measurements had always been normal. No carotid bruit was audible. He had no history of cardiac problems. A diagnosis of bilateral nonischemic central retinal vein occlusion was made on the basis of clinical findings. We arranged investigations including full blood count, ESR, blood glucose, liver function tests, autoantibodies lipids and coagulation profile. The only abnormality detected in these tests was a white blood cell count of just over 14000 per cubic mm. The patient was kept under observation. Eight weeks after first presentation, the right eye was seeing 6/12 but the left visual acuity had dropped to 6/36 due to involvement of the macula by haemorrhages and edema. A fluorescein angiogram at this stage showed significant capillary closure in the temporal and superior retina of left eye along with dye leakage from disc new vessels. Rubeosis was also observed on the left iris and pan-retinal laser photocoagulation was carried out on the left eye using Argon laser over three sessions, one week apart, delivering approximately 3500 burns. Rubeosis resolved gradually. Right macula remained relatively uninvolved and he maintains 6/12 vision in the right eye. Within the next few months he developed collateral blood vessels on the right optic disc. Vision in the left eye was maintained at 6/60 and showed inactive disc new vessels.