

Juxtapapillary Focal Choroidal Excavation

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Key words: Focal choroidal excavation, juxtapapillary FCE, SS-OCT

Focal choroidal excavation (FCE) was first discovered incidentally by Jampol *et al.* in a case having choroiditis.^[1] The term FCE was later coined by Margolis.^[2] Swept-source optical coherence tomography (SS-OCT) with enhanced depth imaging is ideal for diagnosing FCE. Herein, we describe a rare case of juxtapapillary FCE.

Access this article online	
Quick Response Code:	Website: www.ijjo.in
	DOI: 10.4103/ijjo.IJO_1299_18

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Manuscript received: 03.08.18; Revision accepted: 27.10.18

Case Report

A 30-year-old male presented with complaints of blurring of vision in both eyes since 10 years. Patient was diagnosed and operated for developmental cataract in both eyes elsewhere. Best-corrected vision at presentation was 20/40 and 20/30 in left eye and right eye, respectively. On anterior segment examination, pseudophakia with mild posterior capsular opacification (PCO) was present in both eyes. Intraocular pressure was within normal limits. Fundus examination showed normal disk in both eyes. Inferotemporal to disk, a black, circular, sharply demarcated, subretinal lesion was noted in left eye [Fig. 1a]. SS-OCT scan through the lesion revealed an FCE of conforming type [Fig. 1b and c]. No subretinal fluid or membrane was associated with it. Patient was advised regular follow-up and counseled to report earlier in case of metamorphopsia and blurring of vision.

Discussion

FCE is a relatively new finding corroborated on OCT. It is believed to be a defect in development of the eyeball. Two types have been described, conforming and nonconforming, our case being the former. Previously thought to be indolent, recent literature suggests its association with central serous chorio-retinopathy,

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Cite this article as: Agarwal P, Roy S, Azad SV, Kumar V. Juxtapapillary Focal Choroidal Excavation. Indian J Ophthalmol 2019;67:400-1.

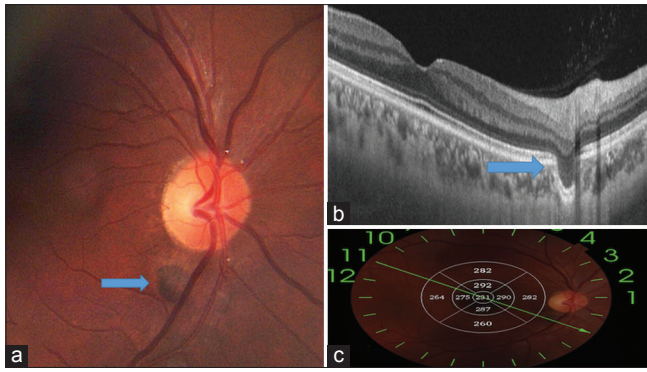


Figure 1: (a) Fundus photo of right eye showing a black, circular, sharply demarcated, subretinal lesion, inferotemporal to disk. (b and c) SS-OCT scan through the lesion revealing a focal choroidal excavation of conforming type

choroidal neovascular membrane, and polypoidal choroidal vasculopathy.^[3,4] Given that aforementioned complications may have vision-compromising consequences, a regular follow-up is recommended. Foveal and extrafoveal FCE has been regularly reported, but juxtapapillary FCE has only been reported once in the literature, that too incidentally diagnosed.^[5] Thus, it may be prudent to keep FCE in differential of a juxtapapillary lesion.

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent forms. In the form the patient(s) has/have

given his/her/their consent for his/her/their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

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