Juxtapapillary retinochoroidal coloboma presenting with macular retinoschisis

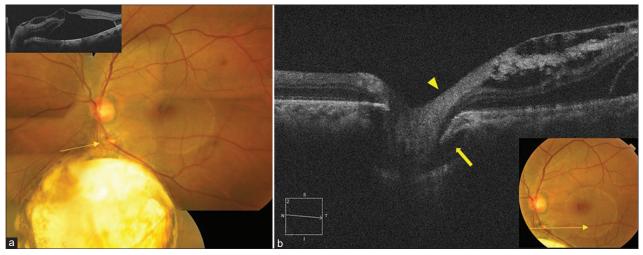


Figure 1: (a) Montage color fundus of the left eye showing small coloboma (arrow) and maculopathy (Inset shows OCT scan through macula); (b) OCT through colobomatous defect showing dysplastic retina (arrowhead) and slit track connecting into sclera-choroidal excavation (arrow) (Inset shows the location of the scan in the fundus).

A 50-year-old male presented with three-month history of blurred vision in his left eye. His best corrected visual acuity (BCVA) was 6/9, N6 in right, and 6/39, N18 in left eye. Fundus examination revealed normal disc, large retinochoroidal coloboma (RCC) involving inferior quadrant, and an additional small colobomatous defect between the two [Fig. 1a]. Optical coherence tomography scan through macula revealed macular retinoschisis resembling 'disc pit maculopathy with slit-like tract narrowing down to the colobomatous cavity [Fig. 1b].

Schitic macula is often seen with optic disc pits, where fluid seeps into the retina from the vitreous or cerebrospinal fluid.^[1] RCC has an overlying dysplastic retina or intercalary membrane which may inherently have defects resulting in rhegmatogenous retinal detachment.^[2] Our present case is unique in its hybrid configuration of RCC presenting with macular retinoschisis resembling optic disc pit maculopathy. Juxta-papillary location of causative RCC lesion has the advantage of being managed with barrage laser without damaging the papillomacular bundle. No treatment was done in this case as the subject choose observation over the invasive procedure.

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 The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.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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References

- Bloch E, Georgiadis O, Lukic M, da Cruz L. Optic disc pit maculopathy: New perspectives on the natural history. Am J Ophthalmol 2019;207:159-69.
- Lingam G, Sen AC, Lingam V, Bhende M, Padhi TR, Xinyi S. Ocular coloboma-A comprehensive review for the clinician. Eye (Lond) 2021;35:2086-109.

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Cite this article as: Hirawat RS, Nagesha CK, Arthi M. Juxtapapillary retinochoroidal coloboma presenting with macular retinoschisis. Indian J Ophthalmol 2022;70:2770.