

Ophthalmology Snapshot

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History

A three-year old, male Shih Tzu was presented with a chief complaint about deviation of the left eyeball. According to the information from the owner, the dog was bitten by a larger dog living in the same household. The left eyeball was repositioned immediately after it was proptosed. Stitches of

tarsorrhaphy were removed at day 5 after the reposition.

Ophthalmic examinations revealed negative menace response, as well as dazzle reflex. Pupillary light response was negative though pupil appeared constricted (Fig 1). The dog had lagophthalmos. Episcleral hemorrhage was evident.



Figure 1 Photograph of the right eye of the dog.

(For better quality of photographs, please visit the TJVM website)

Question

What is the appropriate treatment of this case; repositioning or removal of the globe?

Please turn to next page for the answer.

Answer

Removal of the eyeball

Comments

Proptosis or prolapsed of the globe commonly occurs in brachycephalic breeds. Since trauma is usually the major cause of proptosis, any of other life-threatening signs from serious injury should as well closely be investigated.

Prognosis of proptosed eyeball should be determined based on vision and appearance. Regaining vision in proptosed eyeball is rare. Consensual pupillary light response should be observed because it is an indicative of optic nerve damage and prognosis for vision. Extraocular muscles are torn in this case seen as obvious strabismus. Complications will likely occur postoperatively if this globe is replaced.

Intraocular hemorrhage with intraocular damage indicates poor prognosis. Even though conjunctival tear is common, further investigation of rupture of the globe is suggested. Purulent exudate (yellow, green, thick, opaque fluid) is noticed from the wound (nasal aspect). The dog has severe ocular pain while being ophthalmically examined. Anterior rupture of the globe is diagnosed in this case, therefore enucleation is recommended.

Reference

Martin CL 2013. Orbit and globe. In: Ophthalmic disease in veterinary medicine. 3rd ed. London: Manson Publishing 134-136.