

CENTRAL RETINAL ARTERY OCCLUSION IN A YOUNG MALE: A CASE REPORT

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Purpose: To present an unusual case of acute retinal artery occlusion in a young male patient subsequently diagnosed with metabolic syndrome.

Method: A case report.

Results: A 34-year-old obese male presented with sudden onset of painless visual loss in his left eye. He denied any major systemic diseases, except hypertension at first. On examination, his best-corrected visual acuity in the left eye was only counting fingers at 30 cm, and that in the right eye was 1.0. Anterior segment examination was unremarkable with respect to normal intraocular pressures. Fundal examination after papillary dilatation revealed a cherry-red spot in the left foveal area, flame-shaped hemorrhages from narrow retinal vessels, and "cotton-wool" spots around the optic disc. OCT revealed obvious macular edema of the left eye. The findings of cardiac examination and auscultation of the carotid artery were unremarkable. Systemic anticoagulation and ocular antihypertensive therapies were administered on admission. Immediate blood tests were conducted, but the ESR, CRP, platelets counts were within normal limits and the results of liver function tests were normal. This patient met the criteria for the metabolic syndrome, as defined by major international bodies such as the WHO, European Group for the Study of Insulin Resistance (EGIR), the National Cholesterol Education Program of the United States, and American Heart Association: The patient had the risk factors of hypertension, abnormal lipid profile, abnormal glucose metabolism, and obesity. Unfortunately, there was no improvement in the best-corrected visual acuity of the affected eye, which remained at counting fingers during follow-up.

Conclusion: Young persons presenting with central retinal artery occlusion with multiple comorbidities should be evaluated for the metabolic syndrome. While the prognosis of central retinal artery occlusion is extremely guarded, a systemic workup to rule out life-threatening comorbidities is the cornerstone of management in such cases.

Keywords: central retinal artery occlusion, metabolic syndrome, obesity

Received: June, 16, 2009. Revised: July, 2, 2009. Accepted: July, 13, 2009.

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