

Ectopia Lentis discovered after poor school performance

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Abstract: Ectopia lentis is a congenital condition where the ocular lens is dislocated from its normal position. It may lead to blindness because of subsequent high myopia or glaucoma. It is likely to impede performance in school children due to the loss of vision.

Keywords: Ectopia lentis - poor performance - school.

INTRODUCTION

The ectopia lentis is a hereditary disorder of the connective tissue with predominating of 1/100.000, in most cases it is transmitted like an autosomal dominant trait although there are rare cases with recessive autosomal [1]. Ectopia lentis or displaced crystalline lens syndrome may be congenital or acquired. In either case it is associated with a number of ocular and systemic complications. The ocular complications are mainly glaucoma, cataract and uveitis [2]. In the current case, the ectopia lentis was associated with high myopia.

CASE REPORT

A 6-years-old school boy presented with blurred vision in both eyes. The issue was suspected by his teacher after this later noticed the child had difficulties to copy the writings from the board; also his outcome during exams was not satisfactory. He was the third issue of a phratry of 4 children. No similar case was identified in the family and he had no detected systemic disease.

On ocular examination, his uncorrected visual acuity (VA) was 6/60 in the right eye (RE) and count fingers at 3 meters in the left eye (LE). With best correction, the VA improved in both eyes and reached 6/12 in the RE while in the LE it was 6/24. The intra-ocular pressure (IOP) was 14 mmHg in both eyes.

Before dilation, slit lamp exam revealed irregular anterior chamber both eyes; after dilation the lens was dislocated supero-nasally in the RE and supero-temporally in the LE. The ocular fundus was normal both eyes. The child was prescribed spectacles and discharged for follow up.



Fig-1: Showing the child with bilateral ectopia lentis

DISCUSSION

Systemic conditions should be considered when a patient presents with ectopia lentis of unknown etiology, including Marfan syndrome, Weill-Marchesani syndrome, Ehlers-Danlos syndrome, and homocystinuria [3, 4]. The ectopia lentis is mainly associated with secondary type of glaucoma although primary angle closure and open angle glaucoma has also been reported [5]. If the condition is present without a systemic association but another family member also has ectopia lentis, it is often considered familial. If there is no positive family history of the condition and it is without a systemic association, it is commonly referred to as simple ectopia lentis [6].

In the current case, we found no systemic association or positive family history; nevertheless the patient had induced myopia. His poor skills in school drew the attention of his teacher who eventually advised his parents to take him to the ophthalmologist.

CONCLUSION

Ectopia lentis is not common in routine practice. It may be isolated or associated with systemic diseases. A screening in school children is necessary for its detection and management.

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