

# Traumatic subconjunctival crystalline lens

## Dislocation by the tail of a cow

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### ABSTRACT

Traumatic subconjunctival crystalline lens is a rare phenomena; we report a case of ocular trauma by the tail of a cow. A 60-year-old female presented with history of trauma to her left eye by the tail of a cow, she had severe headache, redness and pain in her left eye. She was admitted and the crystalline lens was found in the subconjunctival space and was removed surgically.

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**E**ctopia lentis refers to a displacement of the lens from its normal position, the lens may be completely displaced rendering the pupil aphakic (luxated) or partially displaced, still remaining in the pupillary area (subluxated). Scleral rupture with lens dislocation into the subconjunctival space is rare after trauma to the anterior segment.<sup>1,2</sup> We report a case of traumatic dislocation of crystalline lens into the subconjunctiva by the tail of a cow which is a rare and interesting case.

**Case Report.** A 60-year-old female patient had trauma to her left eye by the tail of a cow one week before attending the outpatient department in Al-Thawrah Teaching Hospital in Sana'a. She presented with severe headache, redness and pain in her left eye since the trauma. On eye examination her visual acuity in the left eye was counting fingers close to face and the visual acuity of the right eye was 6/12. Intra-ocular pressure was examined digitally and was high in the left eye and normal in the right eye. On biomicroscopic examination, the left eye revealed hyperemia of the conjunctiva with

edema of the cornea and shallow anterior chamber with dislocated lens in the subconjunctival space and the site of scleral rupture was up nasally (**Figure 1**). The fundus view was not possible because of the corneal edema and on B-scan ultrasonography the vitreous was clear, and the retina was flat. The right eye examination was within normal limits. The patient was admitted and managed for acute glaucoma and was given intravenous mannitol (1–2 g/kg body weight) 20% solution in water, 60 drops/minute over 20–30 minutes and B-blockers (timolol 0.5% eye drops twice daily) and the pressure went down and the cornea started to clear. Three days later the patient was admitted to the operating theatre and the conjunctiva was exposed. The lens came out spontaneously and there was a sclerocorneal rupture, the sclera was closed by 6/0 vicryl and 10/0 nylon sutures closed the cornea. On the first day post-operatively, the eye was white and quite and the tension was 18 mmHg. She was seen one week later, and aphakic glass was prescribed with visual acuity of 6/24. Unfortunately, the patient was lost to follow up.

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Figure 1 - Dislocated lens.

**Discussion.** The most common cause of ectopia lentis is trauma which accounts for nearly one half of all cases of lens dislocation. Males appear more prone to ocular trauma than females; therefore, a male preponderance has been reported. Ectopia lentis can occur at any age, it may be present at birth or it may manifest late in life.

A dislocated lens may cause little disturbance to the eye, but if it causes an intolerable interference with vision, inflammation or glaucoma, surgical intervention is justified. With timely intervention, the visual outcome is reasonably good in patients

with subconjunctival dislocation of the crystalline lens.<sup>3</sup> Spontaneously dislocation of a crystalline lens with corneal touch, secondary glaucoma, the visual acuity was 20/25 after secondary intraocular lens scleral fixation.<sup>4</sup>

Our case has an interesting presentation where the dislocation of the crystalline lens was caused by the tail of a cow. Dislocation of the crystalline lens has been reported following direct trauma, it is known to occur spontaneously in mature and hypermature cataract and in cases of weak zonules, but indirect trauma can cause complete dislocation of the crystalline lens in the absence of any predisposing factors.<sup>5</sup>

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