MSO EXPRESS: Newsletter of the MALAYSIAN SOCIETY OF OPHTHALMOLOGY
MAY 2016

Session on Retinal Imaging/Rare Retinal Diseases
Speaker: Prof. Mark Gillies

Common Errors in Retinal OCT Interpretation

Prof. Mark Gillies

During the session on Rare Retinal Diseases at the recently held 31st Malaysia-Singapore Joint Ophthalmic Congress (MSJOC) in Pullman Kuching, Sarawak, Malaysia, Professor Mark Gillies, Director of Macula Research Group and Professor of Ophthalmology in University of Sydney, Australia, presented data from the international collaboration MacTel project (The Macular Telangiectasia Project) which collects data on macula telangiectasia.

"Almost 40% of patients in the MacTel project have diabetes and the OCT findings may be mistaken for diabetic macula edema; These patients may then receive unnecessary anti-VEGF injections," Prof. Gillies said. The MacTel OCT findings are intraretinal cystic cavitation spaces with no edema. These patients need long-term follow-up as they may develop choroidal neovascularisation later on and will need an anti-VEGF injection.

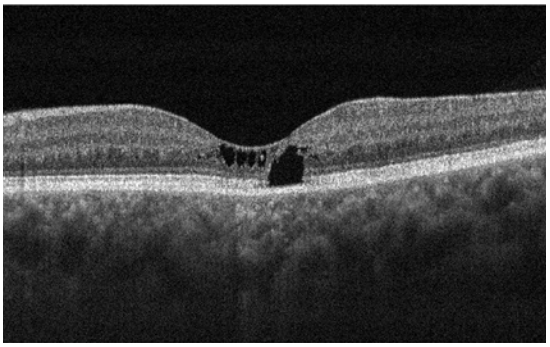
Dr. Kenneth Fong

Dr. Kenneth Fong, Hon. Secretary of MSO, also presented a case from the MacTel project with angiography OCT findings confirming the diagnosis.

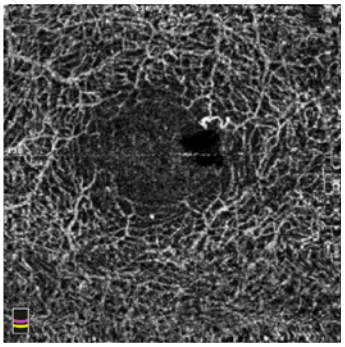
"One of the key features on angiography is a right-angle vessel at the edge of the macula," said Dr. Fong.

Further, Prof. Gillies presented cases of adult-onset foveomacular vitelliform dystrophy (AOFVD). He emphasized that the vitelliform material is a non-specific finding that can be found in many macular diseases. The condition is very common, he said, and many clinicians do not recognize it and would often inject anti-VEGFs. "Do not forget that these lesions can still develop neovascularization," he noted.

"Vitelliform material should be suspected when there is no recent change in vision, no hemorrhage, the retina is not swollen above the outer limiting membrane and nothing changes after intravitreal injection," Prof. Gillies concluded.



OCT scan showing intraretinal cystic cavities in the inner and outer retina. This is thought to be due to progressive loss of Muller cells. This is a typical OCT feature of macular telangiectasia.



OCT angiography images of the superficial retinal vasculature showing a right-angle vessel temporal to the fovea in an area of ischemia.