Slide 5 Minutes:
Fuchs Heterochromic Iridocyclitis

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Fuchs Heterochromic Iridocyclitis

- Chronic unilateral uveitis in young to middle aged people with no race or sex predilection
- Iris heterochromia, low grade AC cell, PSC cataract, small stellate pan-corneal KP, high IOP
- Usually asymptomatic without red eye
- Iris heterochromia is from loss of pigment in affected eye (dark irides become lighter and light irides become darker)
- Fine vessels crossing TM (~6-22% of patients) and are not accompanied by PAS/fibrosis but may progress and may bleed spontaneously (hyphema)
- Amsler sign: bleeding in AC after acute change in pressure in the eye (paracentesis)
- OAG develops in 15%
- Controlling IOP is difficult and IOP rise is not correlated with degree of inflammation
- Use of steroids is ineffective
- Rubella might be a causative factor
Educational Resources:

www.KEOGT.com

https://www.youtube.com/channel/UCLm_TXNeeM4ixPmHQEBtCaQ

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