

Painless Vision Loss



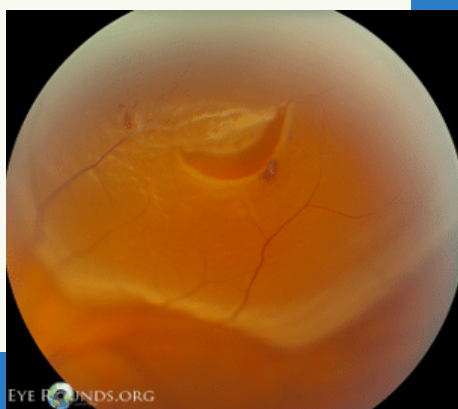
KEY QUESTIONS

Binocular or monocular?
Transient or persistent?
Gradual or sudden onset?
Partial or a complete loss of vision?
If partial, what form did it take?



Refer following presentations to eyes.

Retinal Detachment

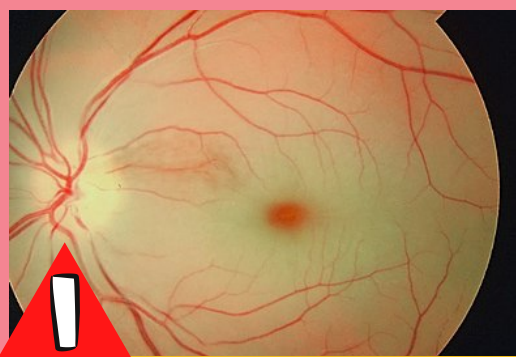


HISTORY "Curtain coming down", floaters, flashing lights

EXAM Visual field defect. Afferent pupil defect. Loss of red reflex. Visual defect or mobile retina on fundoscopy.

MANAGEMENT Refer to eyes.

Central Retinal Artery Occlusion



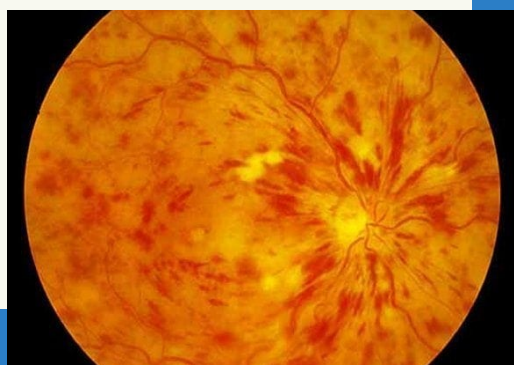
Emergency! Irreversible visual loss within 90mins!

HISTORY Sudden acute vision loss in one eye. Can be gradual or acute

EXAM Cherry red spot with surrounding pale retina on fundoscopy

MANAGEMENT Ocular massage. IV acetazolamide. Refer to eyes.

Central Retinal Vein Occlusion



HISTORY Can be acute or gradual visual loss. May experience intermittent episodes of visual loss. Risk factors: HTN, diabetes.

EXAM "Blood and thunder", cotton wool spots on fundoscopy

MANAGEMENT Discuss with eyes



For all patients with visual loss:

- Look for red flags in the history
- ABCDE assessment
- Blood sugar
- Consider acute stroke – think thrombolysis +/- CT Brain
- Formal assessment of acuity



RED FLAGS

History of trauma
Associated headache
Amaurosis fugax