Premacular hemorrhage is one of the etiologies of sudden visual loss and may occur in a variety of disorders, including retinal artery macroaneurysm. There isn’t an ideal treatment and the choice must always be balanced against benefit/risk and patient’s decision. Possible therapeutic options include observation, LASER posterior hyaloidotomy, vitrectomy or T-PA intravitreal injection.

CLINICAL CASES

♀, 57 years old, with systemic hypertension

Sudden and painless loss of vision of the right eye (OD)

Visual acuity was light perception in OD and Fundoscopy revealed premacular hemorrhage (Fig. 1).

3 days after, a posterior hyaloidotomy of the preretinal hemorrhage was performed, with photodisruptive Nd: YAG LASER, to facilitate visual acuity recovery and minimize macular complications

Angiography was compatible with arterial macroaneurysm of a branch of the superotemporal arteriole (Fig. 2).

8 days after VA OD=20/60
2 months after VA OD=20/30 OCT showed macular edema (Fig. 3).
4 months after VA OD=20/25 Premacular hemorrhage was fully reabsorbed Macroaneurysm trombosed spontaneously (Fig. 4).

♀, 56 years old

Sudden and painless loss of vision of the left eye (OS)

Visual acuity was finger counting to 1 meter in OS and Fundoscopy revealed premacular hemorrhage (Fig. 2).

No treatment was applied

OCT revealed premacular hemorrhage (Fig. 2)

Angiography was compatible with arterial macroaneurysm of a branch of the superotemporal arteriole

8 days after: VA OS= 20/400
2 months after: VA OS=20/50
4 months after: VA OS=20/25 Premacular hemorrhage was fully reabsorbed Macroaneurysm trombosed spontaneously (Fig. 5/6/7).

CONCLUSION

The premacular hemorrhage may cause a severe decrease in visual acuity, affecting the daily routine of patients and may also cause macular damage.

The first case was successfully treated with LASER posterior hyaloidotomy and no complications were reported. In the second no treatment was applied. The major advantage of LASER posterior hyaloidotomy was a faster visual recovery although the long term results were similar in both cases. Another advantage is visualization of subjacent retina that allows macroaneurysm photoacoagulation if necessary.