

# History

A 60-year-old woman was referred to ophthalmology with a suspected left eye choroidal naevus. Visual acuity was unaffected in both eyes and she was asymptomatic. Ocular history and medical history were unremarkable.

# Questions

1. What does Figure 1 show?
2. What do Figures 2 and 3 show?
3. What is the diagnosis?
4. What is the significance and prognosis of the lesion?

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Figure 1: Fundus photograph.

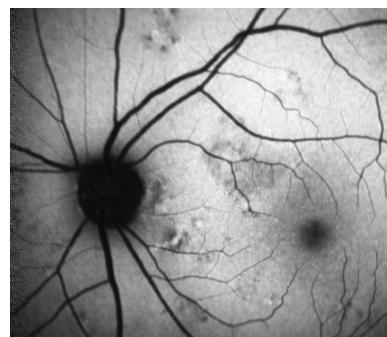


Figure 2: Aspect of fundus autofluorescence.

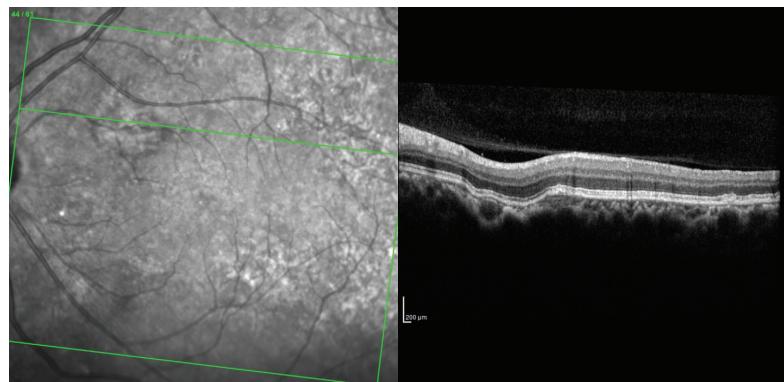


Figure 3: Aspect of SD optical coherence tomography.

Shampol LM, Shanks J, Schröder B, et al. Diagnostic challenges and therapeutic spectrum of focal choroiditis. *Arch Ophthalmol* 2011;129:1320-5.

1. This shows pigmentedary mottling in the affected area along with scattered drusen on the posterior pole.

2. Spectral domain optical coherence tomography (SD-OCT) shows unusual excavation of the choroid with outer retinal layers and retinal pigmentation.

3. This is focal choroidal excavation (FCE). It confirms the hypothesis of posterior staphyoma. Autofluorescence (AF) confirms the hypoautofluorescence in the area of choroidal lesion.

4. In some patients there may be an association with central serous macular degeneration. Although most lesions remain stable, secondary choroidal excavation and age-related macular degeneration may occur.

References

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## Discussion

## ANSWERS