



Preventive Measures in Patients with Central Serous Choroidopathy with Optic Disc Hypoplasia

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ABSTRACT

Purpose of the study Evaluation of the effectiveness of the method for the prevention of central serous choroidopathies in patients with optic disc pit.

Keywords:

Optic Disc Pit, Choroidopathies I

Relevance.

It is assumed that the development of optic disc pits (OND) is associated with the introduction of folds of rudimentary retinal tissue into the space of the optic nerve [1,3,6]. There are changes in the edge of the disk with the formation of a pocket, sometimes filled with glial tissue [2,4,5]. Between the macula and the disc in the retina, the number of nerve fibers, neuroepithelium and the outer granular layer is reduced [7]. When the fossa is located in the temporal region, the patient most often develops a disease called central serous chorioretinopathy [8].

The development of measures to prevent the development of central serous choriopathy in patients with optic disc pit remains one of the important areas in ophthalmology and requires the search for new more effective methods.

Purpose of the study.

Evaluation of the effectiveness of the method for the prevention of central serous choriopathies in patients with optic disc pit.

Materials and methods.

The material of the study was the data of 19 patients (38 eyes) with congenital anomalies of the ONH, who were treated at the Republican Clinical Ophthalmological Hospital of the Republic of Uzbekistan from 2020 to 2023. All patients underwent standard ophthalmic examination methods. In order to assess the effectiveness of the proposed preventive measures, the patients were divided into 2 groups. The first group (13 eyes) consisted of patients who received traditional therapy. In the second group (12 eyes), along with traditional therapy, patients received neuroprotective therapy (Cerebrolysin 0.5 ml, Nucleo CMF). Groups by sex, age, underlying pathology, and visual function were randomized.

Research results.

When evaluating the effectiveness of complex therapy, we found that if before treatment visual acuity in the 1st group was 0.09 ± 0.02 , and in the 2nd group - 0.07 ± 0.02 , then after treatment these figures increased in the 1st group up to 0.13 ± 0.02 , and in the 2nd group 0.29 ± 0.01 .

As a result of traditional treatment in the 1st group, visual acuity increased by 0.048 ± 0.01 , and in the 2nd group with the inclusion of neuroprotectors and laser coagulation - by 0.19 ± 0.05 . Visual acuity in the second group had a significant difference from baseline ($p < 0.05$), in contrast to the first group.

When studying the electrophysiological data, we also noted a tendency to improve the indicators of visually evoked potentials (VEP), electroretinograms (ERGs), and critical flicker fusion frequency (CFFR). With the use of neuroprotective therapy in the complex treatment of the optic disc pit, a more significant improvement in electrophysiological parameters, especially VEP and CFFF, was noted, in contrast to the parameters of group 1 patients. In advanced stages of the disease, repeated courses of treatment are necessary to reduce the risk of developing retinal detachment and loss of visual function.

Conclusions.

Based on the results obtained, we consider it appropriate to prescribe neuroprotective therapy to prevent the development of central serous choriopathies in patients with optic nerve pit and improve clinical symptoms. The use of neuroprotective therapy along with traditional therapy in patients with optic nerve fossa significantly affects the dynamics of visual acuity, accelerating the recovery of visual functions.

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