Ophthalmic Images

Bifid Pupil Iridodialysis Secondary to Airsoft Gun Injury

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A Slitlamp photography after resolution of inflammation





Figure. A, External slitlamp photograph of airsoft gun injury after inflammation had resolved. A vitreous strand was noted in the area of iridodialysis (arrowhead). B, The magnified photograph also shows anterior subcapsular cataract in the area of iridodialysis (arrowheads).

An 11-year-old boy presented with direct blunt trauma to the left eye due to an airsoft gun injury. The initial examination revealed

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retinal hemorrhages and dense anterior chamber inflammation without globe rupture; his bestcorrected vision was limited to

counting fingers OS. After intense every-1-hour topical corticosteroid treatment with a taper, the inflammation resolved, revealing a large

temporal iridodialysis with a nasally displaced iris, which is not a common finding in airsoft gun injuries or in patients with an intact lens capsule 1 (Figure, A). Notably, a vitreous strand escaped through the iridodialysis, traversing superiorly across the pseudopupil, which is also not a common finding. $^{2.3}$ A zonular dehiscence from 3 to 4 o'clock and a small anterior subcapsular cataract in the iridodialysis region were also detected (Figure, B). Despite these complications, the patient retained a visual acuity of 20/25 OS.

ARTICLE INFORMATION

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