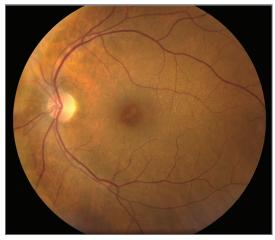
Ophthalmic Images

Staircase Lamellar Macular Hole in a Male Patient Aged 54 Years

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A Fundus photography



B Optical coherence tomography

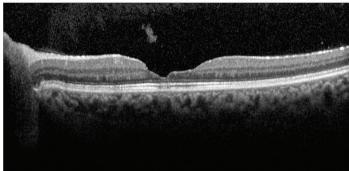


Figure. A, Color fundus photograph of the left eye shows a lamellar macular hole and multiple yellow dots scattered throughout the surface of the macula. B, Optical coherence tomography (confirms the lamellar macular hole; also, it reveals a staircase appearance of the fovea associated with highly reflective particles corresponding to the dot maculopathy seen in the color fundus photograph.

A 54-year-old male patient presented for evaluation of a lamellar macular hole in his left eye. He had a full-thickness macular hole in his right eye that was operated on, 2 kidney transplants, and hear-



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ing loss from the age of 21 years. He denied a family history of ophthalmologic disorders, kid-

ney disease, or hearing loss. His visual acuity was 20/40 OS. Fundus examination in the left eye showed temporal disc pallor and an abnormal macular reflex with superficial yellow retinal dots (Figure).

Optical coherence tomography (OCT) revealed a lamellar macular hole in the left eye with a staircase appearance (Figure). The presence of kidney disease, hearing loss, and dot maculopathy with a staircase appearance on OCT strongly suggested Alport syndrome. ^{1,2} Collagen alterations in basement membranes can lead to this maculopathy. ^{1,2} Based on these findings, the patient received genetic testing leading to the diagnosis of X-linked Alport syndrome. Genetic testing showed a likely pathogenic variant in the *COL4A5* gene (c.2287G>C, p.Gly763Arg).

ARTICLE INFORMATION

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