

Macular traction

The vitreous fills the centre of the eye rather like air in a balloon. It is though a Jelly and is attached around the optic disc, blood vessels and the centre of the retina.

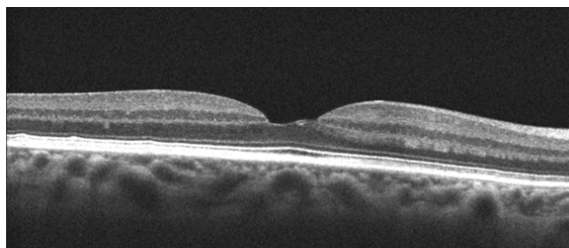
With age the vitreous which has Hyaluronic acid in it, becomes more liquid and more mobile. This is why we all experience more floaters. Collapse and detachment of the vitreous from the retina is very common. However in some people the attachments are so strong that they do not detach cleanly or readily. Here the vitreous then pulls on the retina tenting it up. In some people this can cause retinal holes, in others macular holes or even wet Age related macular degeneration has been attributed to this.

Symptoms will include new floaters, flashing lights and distorted vision.

If the traction is at the very centre of the vision, the vision may be blurred and distorted. Very often over time the vitreous will detach naturally and the retina settle. Other times it may be necessary to operate and cut the vitreous away.

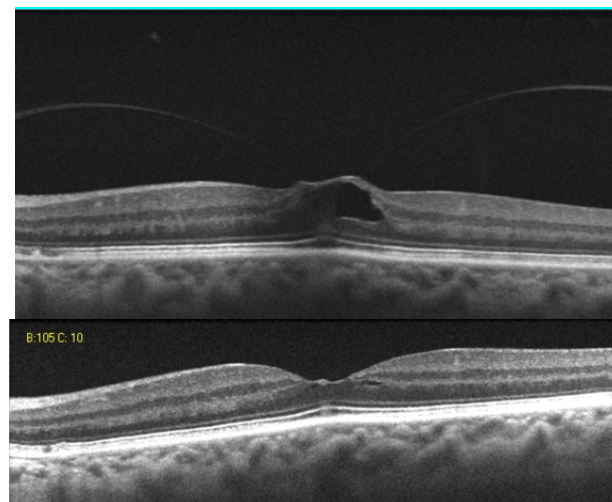
Below is a case of macular traction that over 3 months separated cleanly. The patients distortion and vision returned to normal. The picture on the left is of the other eye which is normal.

Optical Coherence Tomography has transformed our understanding of this condition as it can give MRI like pictures of the living retina. Below is High resolution Zeiss Cirrus scans of one of my patients retina. The detail of the layers is self evident and the traction clearly visible. The inside of the eye is to the top and the outside white of the eye is in the lower parts of the images. The dip in the middle is the very centre of the vision or the fovea.



Normal Retina above

Upper Right is the vitreous traction
Lower Right is 3 months later with resolution of traction, just a small amount of Intraretinal fluid left.



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