Torpedo Maculopathy

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A 5-year-old boy with no relevant medical history was referred with left “amblyopia.” His Snellen visual acuity was 6/9 and 6/18 in the right and left eyes, respectively. Right funduscopy revealed a well-demarcated, horizontally elongated, oval, flat macular lesion temporal to the fovea in line with the optic disc (Figure 1). The nasal half was horseshoe-shaped and uniformly light orange, and the temporal aspect had irregular hyperpigmentation interspersed by lighter areas. In the center of the lesion, at the junction between the two parts, a whitish spot can be observed. The boy was given a spectacle prescription of +3.00 diopters sphere for the right eye and plano for the left eye. However, after 3 months, the visual acuity in his right eye worsened to 6/24. He began patching of the left eye for 2 hours per day, and after 1 year, right visual acuity improved to 6/9 with no visual symptoms. The right fundal lesion was diagnosed as torpedo maculopathy from its characteristic appearance and location. It is a rare finding that represents a congenital defect in the retinal pigment epithelium and is usually inconsequential. The long-term natural history of this lesion is unclear and continuing follow-up is warranted.

REFERENCES


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