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OCT ANGIOGRAPHY AS A TOOL FOR THE DIFFERENTIAL DIAGNOSIS OF DIABETIC AND TRANSIENT RETINOPATHY IN PREGNANT WOMEN WITH TYPE 1 DIABETES

Poster

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Purpose:

to determine the OCTA criteria for the differential diagnosis of diabetic and transient retinopathy in pregnant women with diabetes mellitus (DM).

Methods:

11 pregnant women with DM1 were examined, in whom retinopathy was not detected during the pregestational period. The mean age was 28.6 ± 4.1 years, duration of DM was 11.1 ± 8.4 years. In each trimester of pregnancy, an ophthalmological examination was performed with OCTA on the OCT-machine RTVue XR Avanti with HD Angio Retina 6.0 mm scanning protocol.

In all pregnant women in the first trimester, "cotton-like foci" and retinal hemorrhages were determined in the fundus in both eyes. OCTA revealed areas of nonperfusion in the retinal plexuses in 7 women, they were not detected in 4 women.

Results:

When observed in the II and III trimesters, 4 pregnant women without non-perfusion zones showed decrease in the number of "cotton-like foci" and hemorrhages against the background of improved glycemia. During gestation, zones of nonperfusion did not appear in them. The diagnosis was made: transient retinopathy. Three months after delivery, these 4 patients showed regression of retinal changes.

In 7 patients with zones of nonperfusion during pregnancy, appearance of intraretinal microvascular anomalies zones and retinal neovascularization was noted. OCTA revealed progressive expansion of retinal nonperfusion zones. They were diagnosed with diabetic retinopathy and underwent panretinal laser photocoagulation of the retina.

Conclusions:

If symptoms of retinopathy in combination with zones of nonperfusion in the retinal plexuses are detected in a pregnant woman with DM according to OCTA, true diabetic retinopathy is diagnosed, in the absence of zones of nonperfusion - transient retinopathy.