

Case Study 33

UGH Syndrome

AA is a 76-year-old woman who had undergone cataract surgery on her left eye 9 months previous to her presentation with symptoms of a chronic aching feeling in that eye. The operative report was reviewed, and it was noted that there had been a posterior capsular tear with the implantation of a single-piece acrylic IOL in the ciliary sulcus. Examination showed intraocular pressure of 25 mm and low-grade iritis which responded to topical steroids but recurred every time the drops were stopped. Ultrasound biomicroscopy demonstrated contact of

the lens haptic with the iris (Fig. 1). She was diagnosed with the UGH (uveitis–glaucoma–hyphema) syndrome and was scheduled for lens replacement.

The orbit and paraorbital cavities are often the source of eye pain. This tends to be more of an aching or pressure feeling than the sharp or scratchy pain of anterior segment problems. Normally the sinuses are air-filled which blocks the transmission of ultrasound signals, but the presence of fluid or solid tissue such as polyps or tumors can result in reflection of the sound beam.

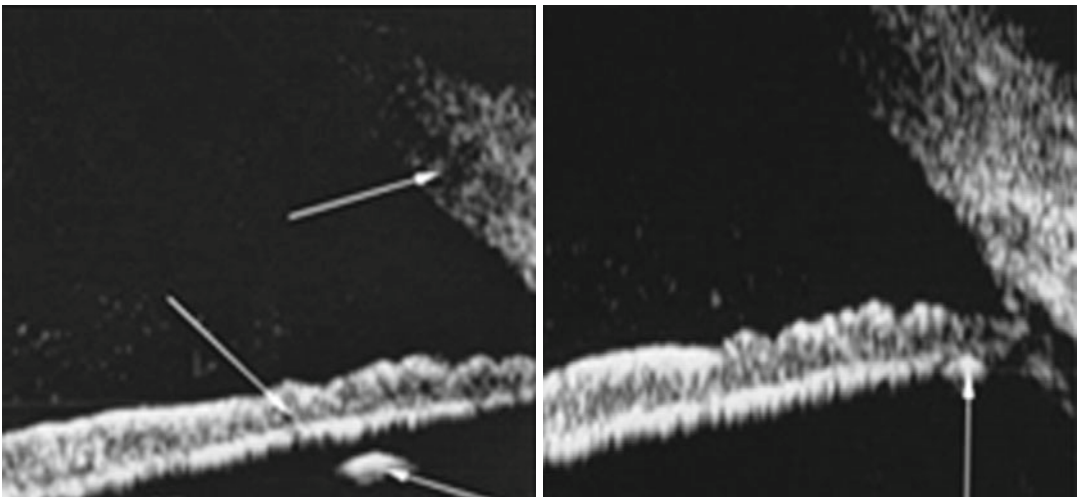


FIG. 1 *Left*: cornea (*top arrow*), iris (*middle arrow*), and cross section of IOL haptic (*bottom arrow*). *Right*: haptic touching the iris (*arrow*)