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Sir,

Fluorescent Venogram? An Interesting Side Effect of Fluorescein Angiography

An 80-year-old man with a subretinal neovascular membrane was seen in our clinic for fluorescein angiography. Five millilitres of 10% sodium fluorescein was injected prior to photography. After the procedure it was noted that the vein into which the fluorescein had been injected was a startling fluorescent green colour (Fig. 1). The patient was otherwise well, and the colour of the vein returned to normal after about 24 hours. There was no localised or systemic adverse reaction.

A similar reaction was observed in an 82-year-old diabetic woman with macular oedema. The fluorescent nature of the vein was demonstrated by shining a blue cobalt light from a slit lamp onto it.

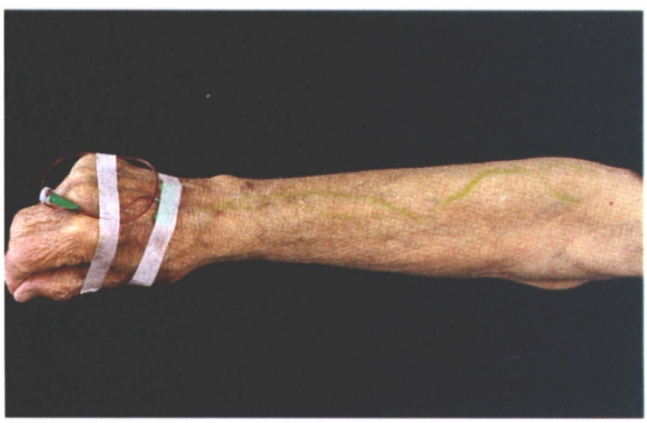

Fig. 1. *Photograph of the arm of an 80-year-old man following intravenous fluorescein injection.*

Transient generalised skin discoloration after fluorescein injection is very common and may be misdiagnosed as jaundice by the unwary. Such confusion was not a problem in our reported cases!

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Sir,

Koby's Superficial Reticular Degeneration of the Cornea

Koby's superficial reticular degeneration of the cornea (SRD) is a bilateral condition characterised by a net-like mosaic of discrete white lines at the level of Bowman's membrane. It was originally described in 1927[1] and there are only two cases reported in the English literature.[2,3]

Case Report

A 56-year-old Caucasian man was referred to the Sussex Eye Hospital by his optician who had noticed 'media opacities' during retinoscopy. The patient was asymptomatic and had no relevant ocular, family or past medical history. His visual acuities were 6/6 in each eye. A fine white reticulum was noted in the central cornea at the level of Bowman's membrane, in both eyes (Figs. 1, 2). Ocular examination was otherwise normal, in particular corneal sensation, epithelium, remaining stroma and endothelium. Serum calcium, parathyroid hormone and angiotensin-converting enzyme levels were normal, as was his chest radiograph. No treatment was indicated. His only surviving relative had clear corneas.

Discussion

The first case of this rare progressive corneal degeneration, described by Koby in 1927,[1] was additionally characterised by an epithelium which became thickened and speckled by a brown discoloration, contrasting with the white reticulum. It developed without inflammation or pain, but caused progressive loss of vision. Following this report there was some doubt concerning the separate existence of such a condition and some authors suggested it was merely a variant of lattice dystrophy.[4,5] Indeed the illustrations in Koby's paper closely resemble lattice, as do those in a later study of this condition.[6] In a