

Firecracker eye injuries during Raya Aidilfitri 2018

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ABSTRACT

Objective: To report cases of ocular trauma caused by firecrackers. **Method:** Case study reports of patients attending our eye clinic during the Raya Aidilfitri period. Detail ocular examinations were performed and the injuries were classified accordingly using the Birmingham Eye Trauma Terminology System (BETTS). The types and mechanism of firecracker injury were analysed and discussed. **Results:** First 2 cases were classified as contusion closed globe injury. One was an 8-year-old child sustained corneal abrasion with superficial lid and conjunctival abrasion wound after being hit by an exploding smoke ball firecracker while playing outside his house. The affected right eye vision was 6/9. The second was a 59-year-old gentleman with left eye traumatic microhyphaema, uveitis and secondary raised intraocular pressure. He was injured by a sudden explosion of projectile firecracker when he went closer to examine the 'non-blasting' firework. His left eye vision was 6/12 and his intraocular pressure normalized following the resolution of traumatic microhyphaema and uveitis. The third case was lamellar laceration of closed globe injury. He was a 29-year-old gentleman who was a passer-by when he was allegedly hit by an exploding type of firecracker. The affected right eye vision was 6/36. A partial thickness corneal laceration was seen with a diffusely injected conjunctival and corneal abrasion. Gunpowder deposits were seen embedded through the corneal stroma. **Conclusion:** Ocular injuries by firecracker are common during the festive season. Various types of firecrackers result in different ocular injuries. Many injuries are also a result of negligence and lack of parental supervision.

KEY WORDS:

Firecracker, festive, BETTS

Hyphaema: A diagnostic dilemma

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ABSTRACT

Objective: To report a case of a 3 years old child presented with left eye swelling and hyphaema and the diagnostic dilemma upon reaching a diagnosis. **Method:** a Case report. **Results:** We report a case of a 3 years old child who was referred to Hospital Kuala Lumpur (HKL) initially for Left eye (LE) retinoblastoma (RB). The child presented with 3 days history of LE swelling and hyphaema without a history of preceding trauma. CECT brain was done and punctate calcifications within the left globe raised the index of suspicion of retinoblastoma. On examination under anaesthesia (EUA), LE total hyphaema with the hazy cornea and no fundus view. LE B-Scan showed full vitreous opacity with small dots calcifications, however, no obvious retinal mass is seen. The fellow eye fundus examination noted peripheral vitreous changes with nasal and temporal retina area of avascularisation which was confirmed by FFA. The working diagnosis was LE juvenile xanthogranuloma with a differential of LE severe familial exudative vitreoretinopathy in view of RE findings. However, infiltrative RB needs to be ruled out. The child was subsequently followed up in the clinic and found to have persistent findings. In view of indefinite diagnosis and high suspicious of RB, family consented for LE diagnostic enucleation and sent for histopathological examination (HPE). HPE revealed abundant foamy histiocytes with occasional multinucleated giant cells with Touton-like forms. Features are consistent with juvenile xanthogranuloma. **Conclusion:** In conclusion, there are multiple possible diagnoses in a case of non-traumatic hyphaema. Thorough examination and investigation must be done and might consider HPE to confirm the diagnosis.

KEY WORDS:

Juvenile xanthogranuloma