

A paediatric case report: misinterpretation of a prolapsed iris as a leech

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ABSTRACT

Eliciting history in paediatric patients can be challenging, however essential in determining the course of management. We share an experience in gathering history from a patient presented with an ocular foreign body. A 7-year-old girl was brought to the emergency department complaining of painless right eye (RE) foreign body, a leech that gets into her eye while taking a shower, associated with redness, and itchiness. RE visual acuity (VA) was light perception and left eye (LE) was 6/12 with no relative afferent pupillary defect. RE showed a teardrop pupil with a prolapsed iris at 5 o'clock. Seidel's test was negative with deep anterior chamber. Skull x-ray and contrast-enhanced computed tomography of brain and orbit showed no intraocular foreign body. Intraoperative findings revealed a slanted clean-cut corneal laceration with prolapsed iris at 5 o'clock extended until sclera measuring about 4 mm. No foreign body was found. Cornea and sclera toilet and suturing were performed. Postoperatively, RE VA improved to 6/12. During follow-up, her best corrected visual acuity was 6/7.5. Patient disclosed that she had accidentally poked her eye with a cutter. Paediatric ocular trauma is the leading cause of significant morbidity worldwide. Obtaining a complete history is crucial to ensure a successful healthcare delivery for young patients without delay. A thorough assessment helps to identify the injury and timely intervention reduces the morbidity and improves long-term visual outcomes.