

BILATERAL CATARACTS

GENETIC MUTATION

METABOLIC SYNDROMES

**SYSTEMIC
SYNDROMES**

**CHROMOSOMAL
ANOMALIES**

TORCH INFECTION



GENETIC MUTATION

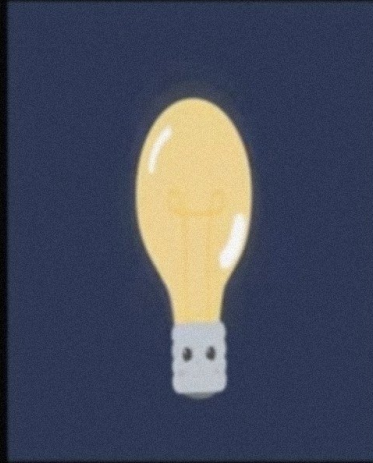
- PAX 6
- FOX E3
- C MAX
- PITX 3
- MIP

Genes related to connexins and crystallins of the lens

Inherited without systemic abnormalities

- **AUTOSOMAL DOMINANT** (most common)
- **AUTOSOMAL RECESSIVE** (mostly seen in families with a history of consanguinity)
- **X-LINKED**





Isolated inherited congenital cataracts carry a better visual prognosis than those with coexisting ocular and systemic abnormality

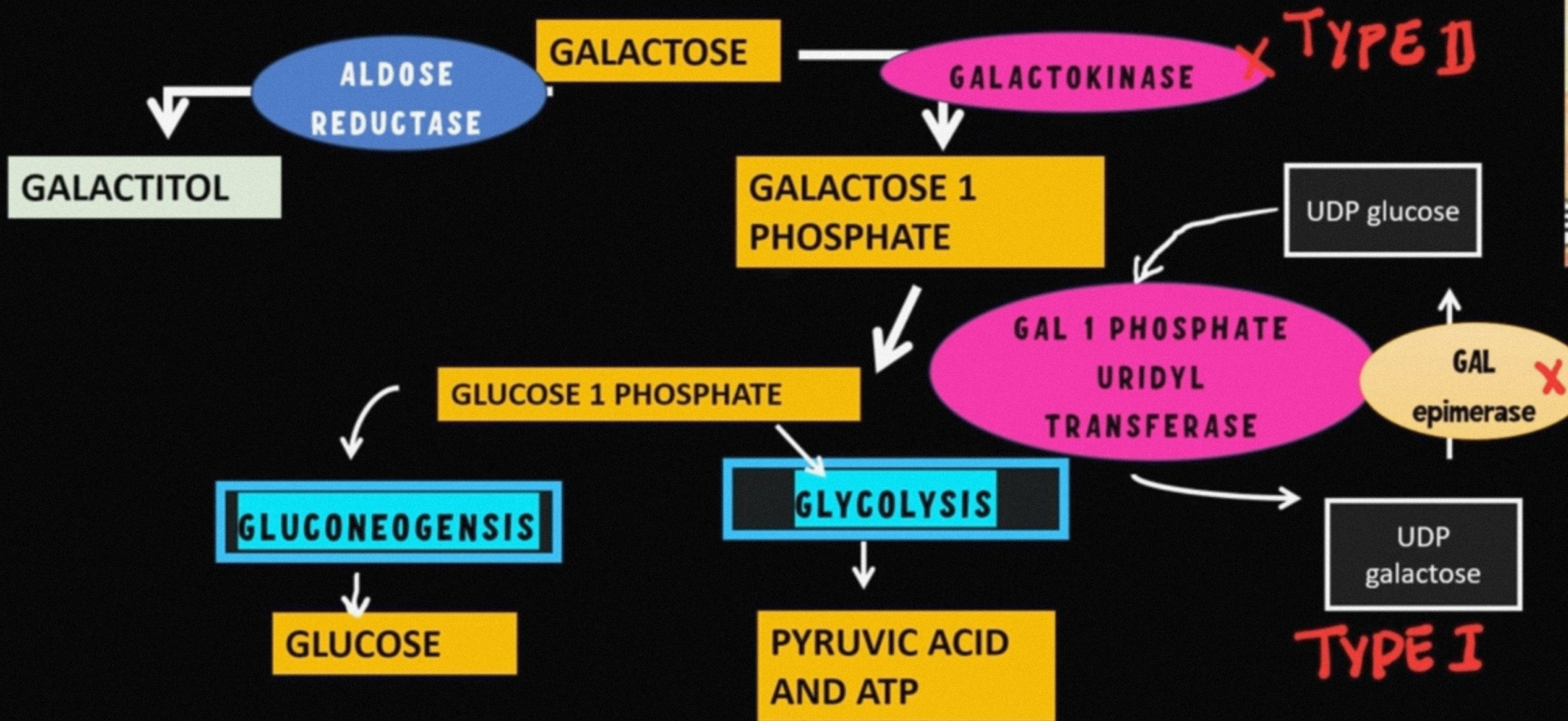


GALACTOSEMIC CATARACT

This is an **AUTOSOMAL RECESSIVE**, inherited congenital disease characterized by an inborn inability of the infant to metabolize galactose



GALACTOSEMIC CATARACT



METABOLIC CATARACT

~~GALACTOSEMIA~~

FABRY
DISEASE

DIABETIC
CATARACT

WILSON
DISEASE

LOWE
DISEASE

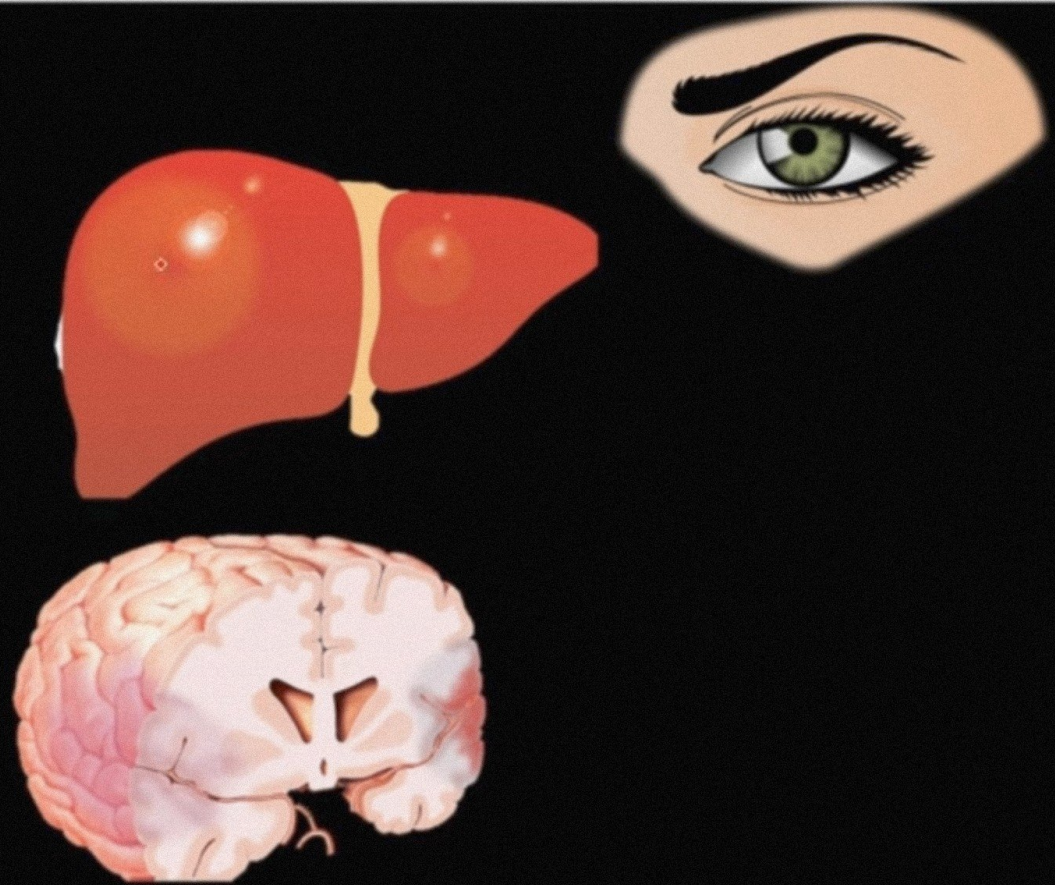
HYPOCALCEMIC /
PARATHYROID
TETANY RELATED



WILSON DISEASE

• HEPATOLENTICULAR DEGENERATION

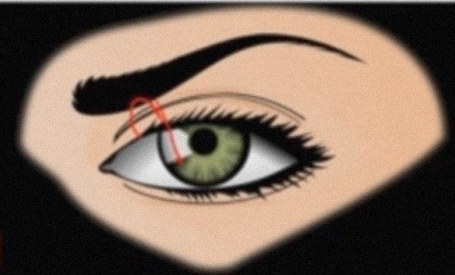
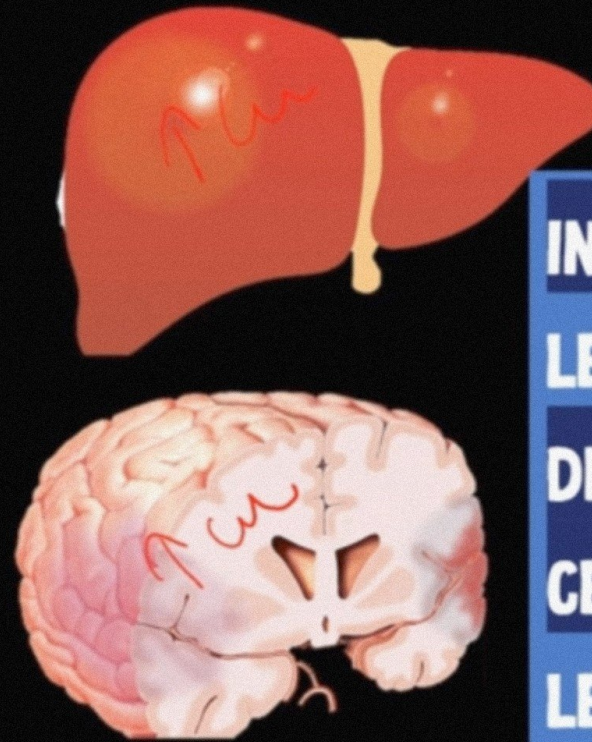
- Inherited disorder of **copper** metabolism due
- Mutation of the **ATP7B** gene.
- Affects eye, liver and basal ganglion.



WILSON DISEASE

• HEPATOLENTICULAR DEGENERATION

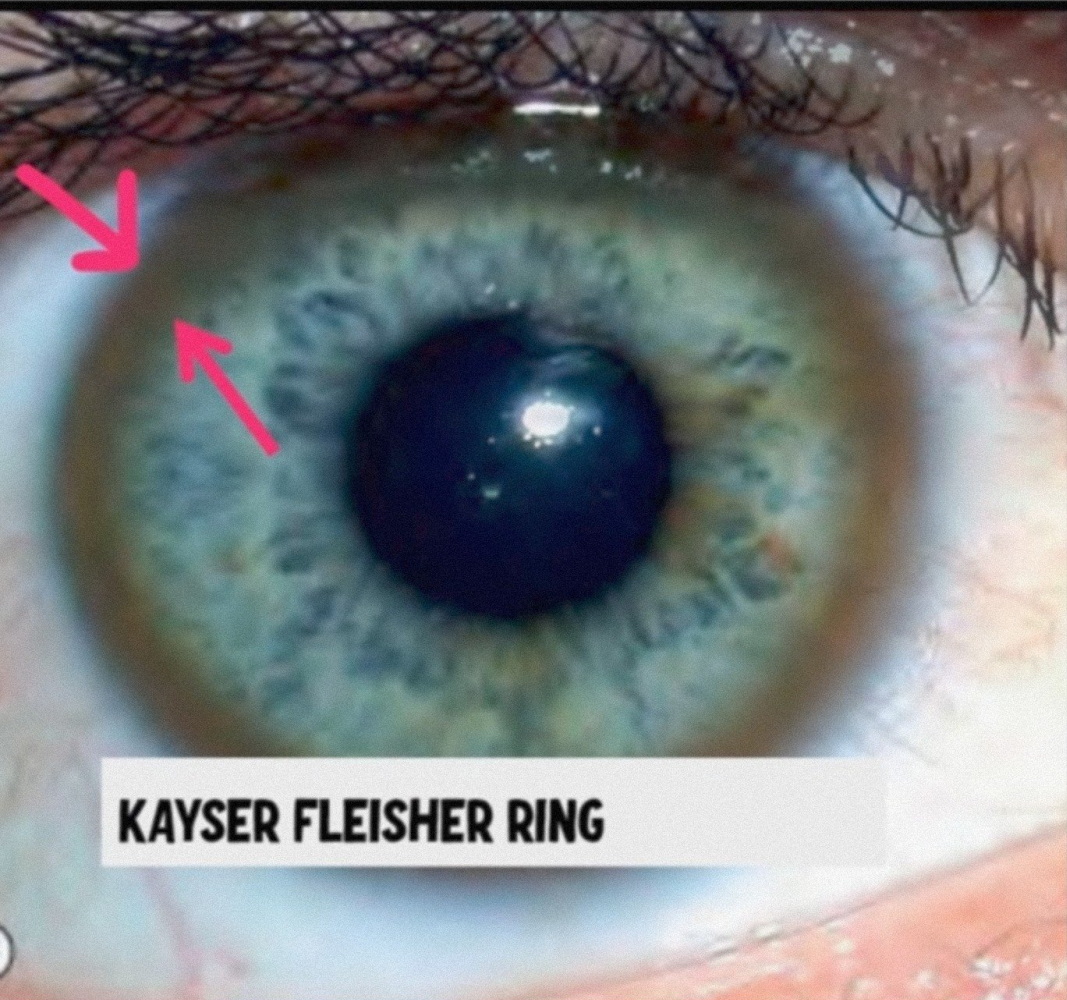
- Inherited disorder of **copper** metabolism due
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**INCREASED COPPER
LEVELS AND
DECREASED
CERULOPLASMIN
LEVELS**



WILSON DISEASE



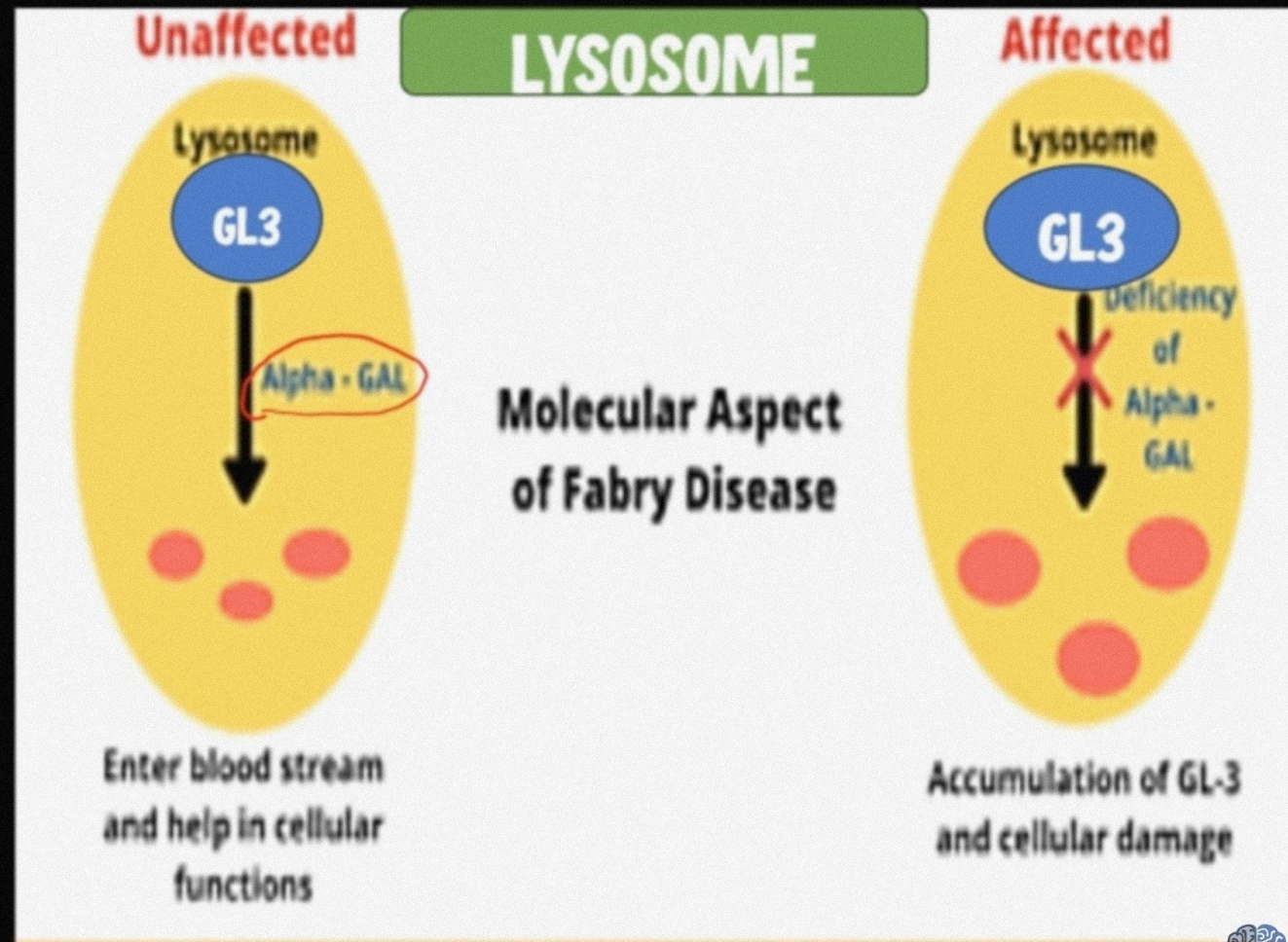
• **FIG. 28.16** An intraocular copper foreign body causing a sunflower cataract. Foreign bodies that cause chalcosis are usually composed of less than 85% copper. Pure copper causes a suppurative endophthalmitis. Source: (From Jay H. Krachmer, David A. Palay, eds. *Cornea Atlas*, 3rd ed. London: Saunders; 2014. pp. 243–271.)



FABRY DISEASE

- X-linked lysosomal storage disorder
- Deficiency of the enzyme **alpha-galactosidase A**
- This leads to abnormal tissue accumulation of a **glycolipid**

All males with the gene develop the disease and some heterozygous females



Fabry's Disease:

FABRYC (replace S with C)

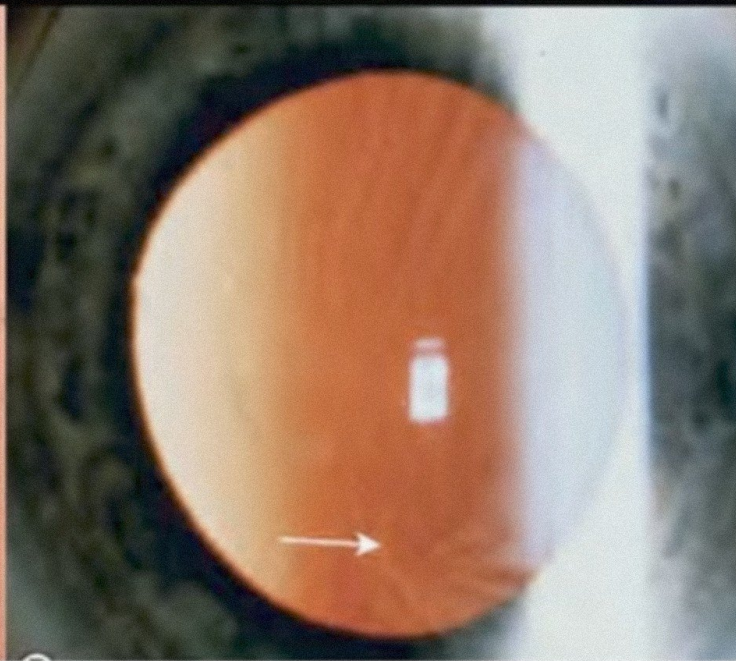
- **F**oam cells / **F**ebrile episodes
- **A**lpha galactosidase **A** deficiency / **A**ngiokeratomas
- **B**urning pain in hands & feet "Peripheral neuropathy" / **B**oys
- **R**enal Failure
- **Y**X genotype (Male, X-linked recessive)
- **C**eramide trihexoside *accumulation* / **C**ardiovascular disease



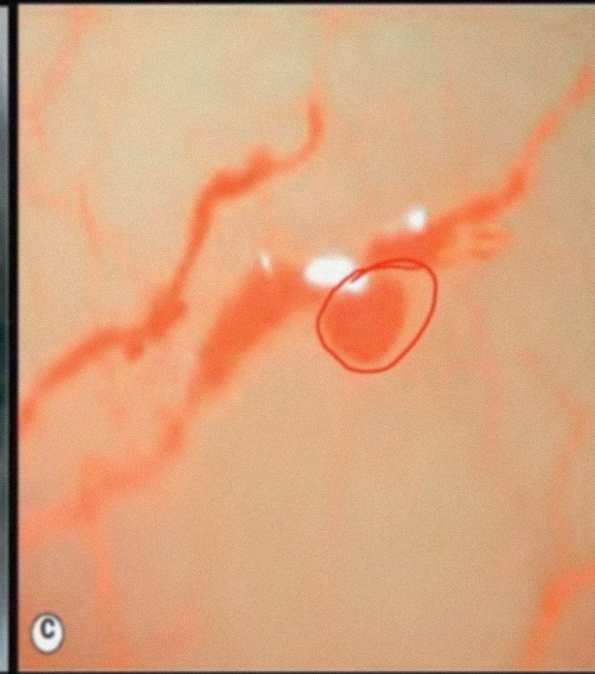
FABRY DISEASE



ANGIOKERATOMAS



**VERTICELLATA / Vortex
keratopathy**



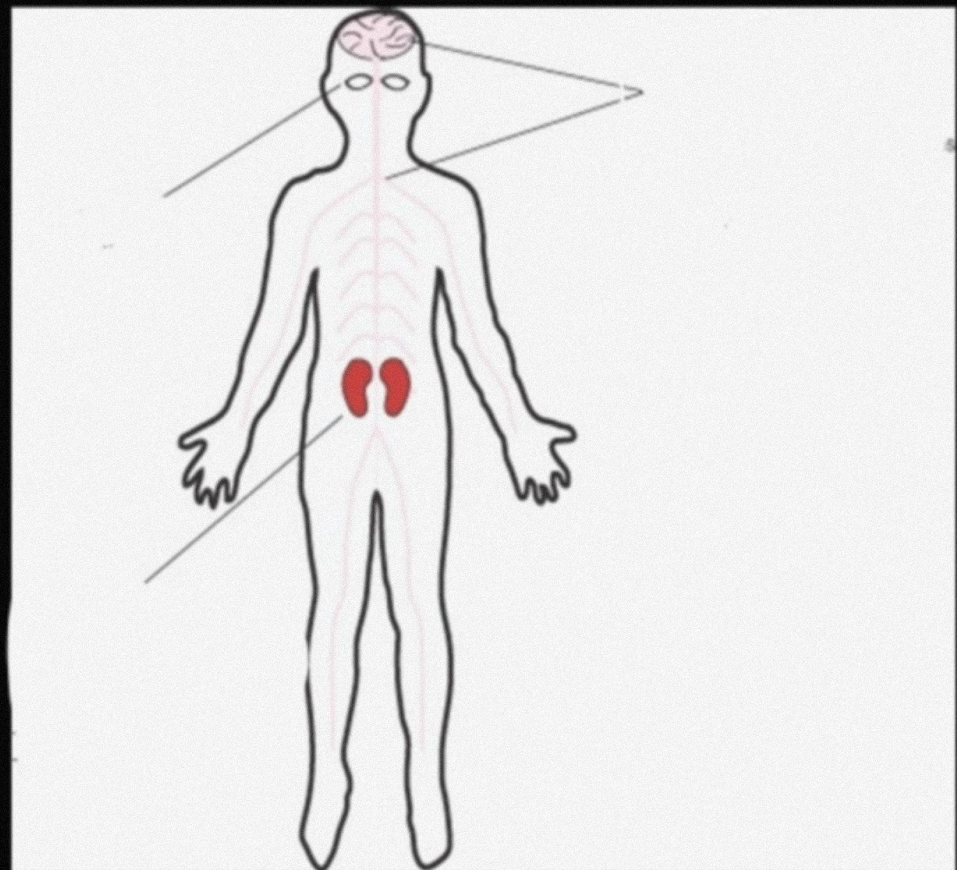
**CORKSCREW
VESSELS**

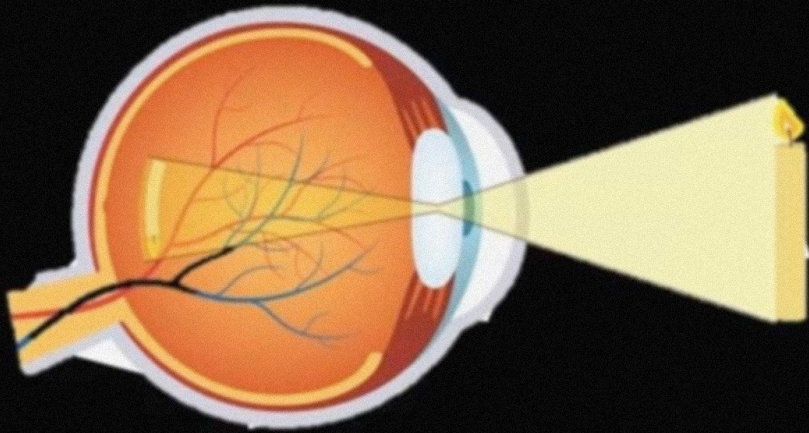


LOWE DISEASE

- Lowe syndrome
(**oculocerebrorenal**) syndrome
- X-linked recessive (gene: **OCRL1**)
inborn error of amino acid
metabolism
- Neuromuscular, renal and other
manifestations.

**POSTERIOR
LENTICONUS**



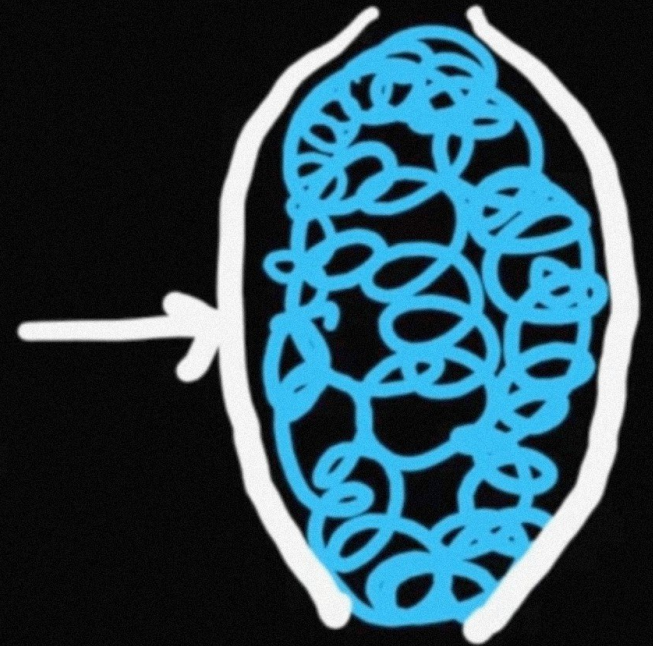


CHANGE OF REFRACTION →
MYOPIA

SORBITOL



HYDRATED LENS



TRUE DIABETIC CATARACT

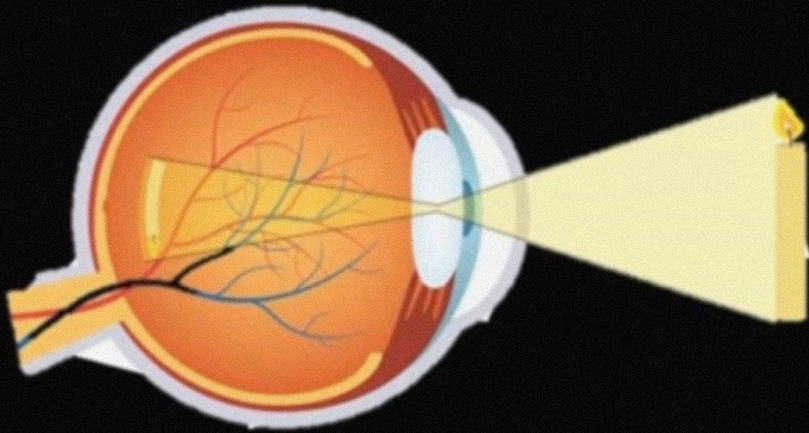
GLUCOSE
→ ALDOSE
REDUCTASE

SORBITOL:
retained within the
lens → increased
OSMOTIC GRADIENT

Water entry \
Hydration of
the lens →
Vacuole
formation and
swelling

OPACIFICATION
AND
CATARACT



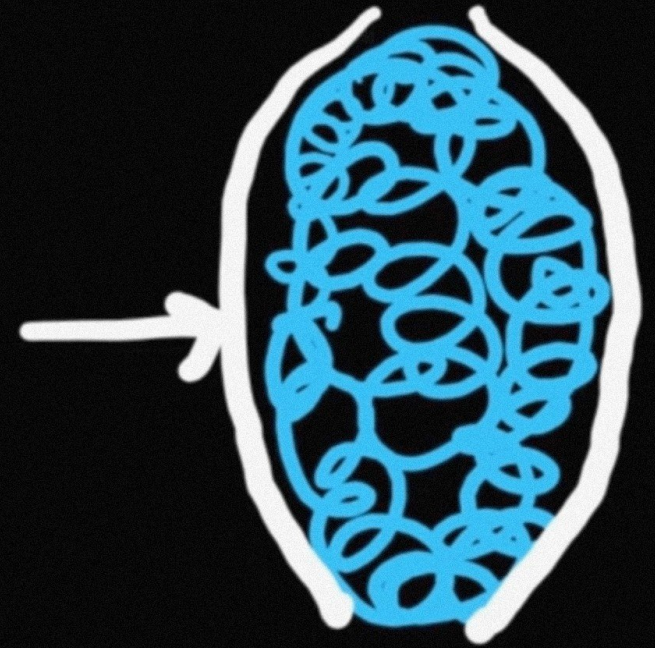


CHANGE OF REFRACTION →
MYOPIA

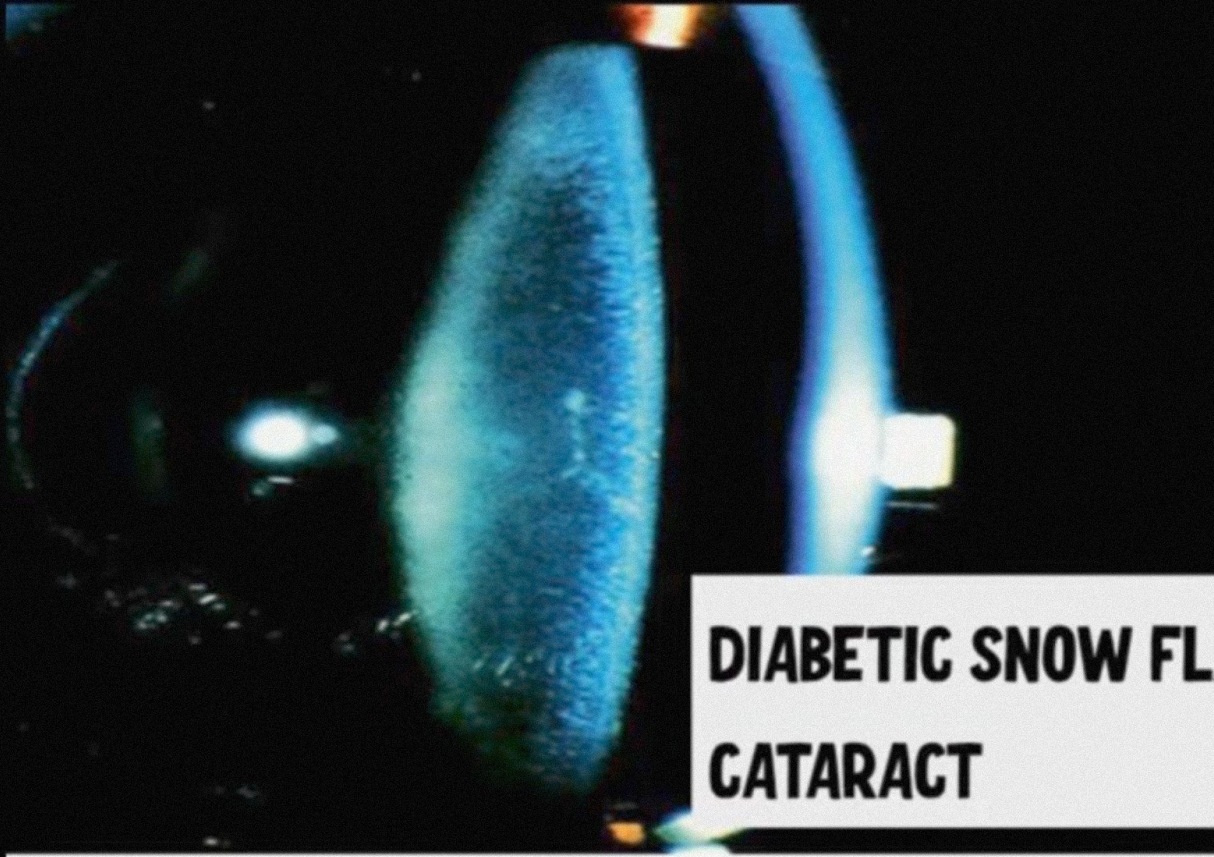
SORBITOL



HYDRATED LENS



TRUE DIABETIC CATARACT



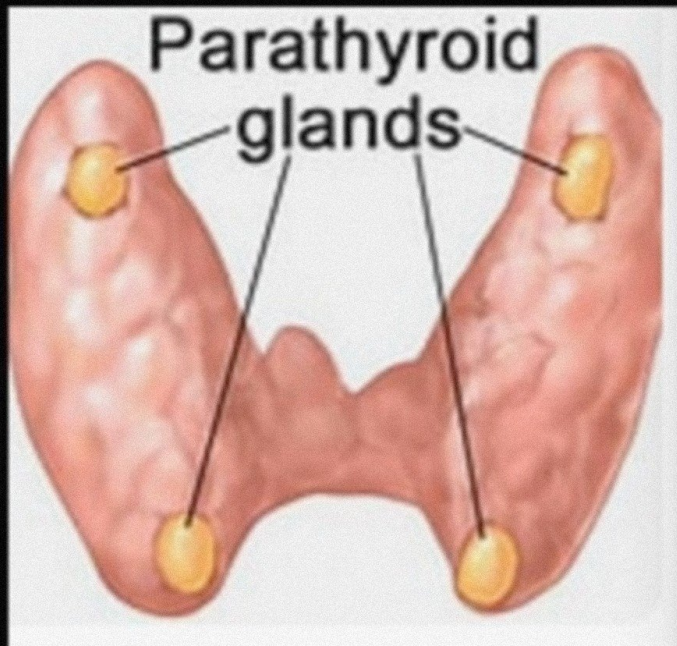
**DIABETIC SNOW FLAKE
CATARACT**



Fig. 15.7 Cataract in systemic disease. Diabetic snowflake cataract. (Source: From Jack J. Kanski, Brad Bowling, eds. *Clinical Ophthalmology: A Systematic Approach*, 7th ed. London: Saunders;



HYPOCALCEMIA / PARATHYROID TETANY



- Atrophy
- Removal of parathyroids
- Hypocalcemia

This affects the membrane of the lens basically .

An **sodium concentration** which is maintained low also increases in the lens leading to the cataract

