Spontaneously Regressed Corneal Intrastromal Cyst

Allison Fox MD [1], Roberto Pineda MD [2], Shaohui Liu MD, PhD [1]

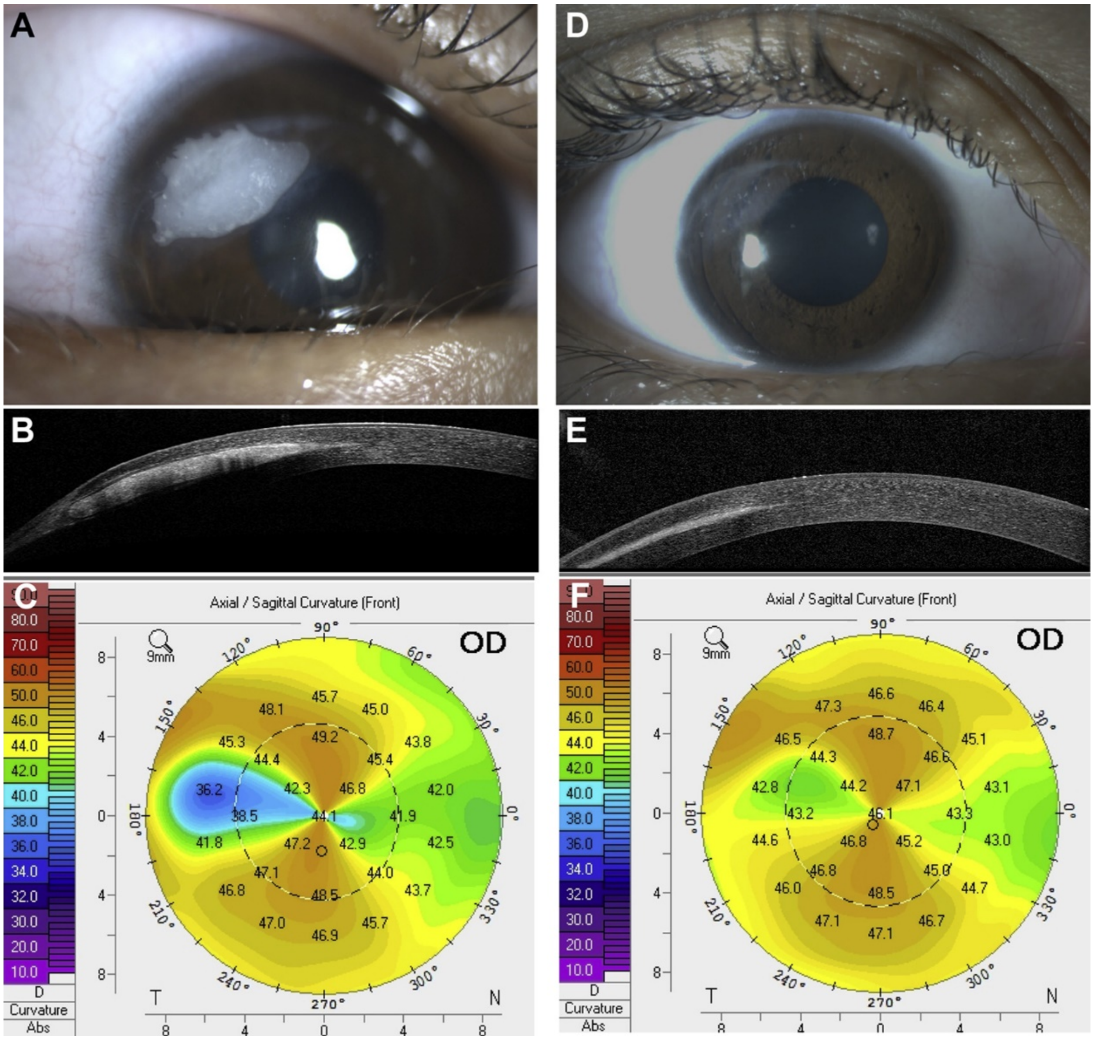
[1]Glick Eye Institute, Indiana University School of Medicine, Indianapolis, Indiana

[2]Massachusetts Eye and Ear Infirmary, Harvard Medical School, Boston, Massachusetts

A 10-year-old girl was referred for a recurring right eye corneal opacity that had been stable for 3 months. Her mother reported a history of minor eye trauma several years previously with a small "white spot" appearing that eventually disappeared before recurring. The eye examination showed an intrastromal cyst localized in a superotemporal corneal scar (Fig **A**). The dense white debris of the cyst blocked the signal of the posterior stroma on anterior segment OCT (Fig **B**). There was local anterior elevation and significant astigmatism of approximately 10 diopters (D) on Pentacam (Oculus Optikgeräte GmbH, Wetzlar, Germany; Fig **C**). Over the following year, the cyst spontaneously regressed (Fig **D**, **E**) and astigmatism decreased to 6 D (Fig **F**). We recommend observation of presenting corneal cysts that do not involve the limbus as spontaneous resolution is possible. (Magnified version of Fig **A**-**F** is available online at www.aaojournal.org).

This is the author's manuscript of the work published in final edited form as:

Fox, A., Pineda, R., & Liu, S. (2020). Spontaneously Regressed Corneal Intrastromal Cyst. Ophthalmology, 127(10), 1383. https://doi.org/10.1016/j.ophtha.2020.06.011


A
B
C
D
E
F
Axial / Sagittal Curvature (Front)
OD
9mm
T
N
D
Curvature
Abs
80.0
70.0
60.0
50.0
46.0
44.0
42.0
40.0
38.0
36.0
34.0
32.0
30.0
20.0
10.0
90°
120°
60°
150°
30°
180°
0°
210°
330°
240°
300°
270°
45.7
48.1
45.0
45.3
49.2
44.4
45.4
43.8
36.2
42.3
46.8
42.0
38.5
44.1
41.9
41.8
47.2
42.9
42.5
47.1
44.0
46.8
48.5
43.7
47.0
46.9
45.7
46.6
47.3
46.4
46.5
48.7
44.3
46.6
45.1
42.8
44.2
47.1
43.1
43.2
46.1
43.3
44.6
46.8
45.2
43.0
46.8
45.0
46.0
48.5
44.7
47.1
46.7
47.1