



MidwestRetina
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Lattice Degeneration Information

What is Lattice Degeneration?

Lattice degeneration is a very common, inherited, congenital abnormality of the peripheral retina. It usually shows an autosomal dominant pattern and occurs in about 8% of healthy individuals of both sexes.

What are the symptoms of Lattice Degeneration?

No symptoms are associated with this condition. Occasionally, if an acute posterior vitreous detachment (PVD) occurs, a retinal tear may be observed at a lattice lesion; the tear then may produce symptoms of this event (floaters or light flashes). Ultimately, a retinal detachment can occur following a retinal tear.

How is Lattice Degeneration Diagnosed?

Lattice degeneration is almost always discovered inadvertently, either in the course of a routine eye examination or in conjunction with symptoms of a PVD. Lattice Degeneration represents an area of retinal thinning, usually located near the outer edge of the retina. To discover all such lesions, it is necessary to perform a dilated eye exam combined with scleral indentation, where an instrument is used to put gentle pressure on the eyelids to better examine the edge of the retina. Occasionally, holes may be found in the lattice. Depending on symptoms and hole appearance, a decision is made whether to treat the lesion or observe.

What is Lattice Degeneration?

Lattice degeneration is located at the edge of the retina and is associated with abnormally strong adhesions between the retina and the vitreous gel that fills the eye. These adhesions represent the chief clinical danger of this

disease because of their ability to lead to retinal tears and detachment after PVD.

How is Lattice Degeneration Treated?

During the lifetime of a patient with lattice degeneration, the likelihood of having a retinal detachment on this basis is in the range of 1% to 2%. Retinal tears are much more common and are ideally discovered and treated before they lead to a retinal detachment. Among patients with lattice degeneration associated with tiny atrophic holes, only 2% will be in danger of a later retinal detachment. If a new retinal tear or a retinal detachment develops, these should be promptly treated with current techniques. The current literature regarding prevention of retinal detachment does not provide sufficient information to strongly support routine treatment of lesions other than symptomatic flat tears. However, other risk factors such as nearsightedness and a family history of retinal tears or detachment convey additional risks that may prompt your doctor to recommend treatment.

Risk of Treatment:

Lattice degeneration is typically treated with laser to strengthen the retina in areas where it is weak. Side effects are reasonably uncommon, but the risk of side effects increases with the amount of lattice and treatment required. Possible side effects include an increase in pupil size in the treated eye. Some patients also experience some difficulty focusing up close. The symptoms typically resolve within 1 to 2 weeks but may not resolve fully.

Do I need to see my primary care physician?

No systemic evaluation is required.

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