



Ophthalmic Risk during Chronic Treatment with Anticoagulants

Joanna Przeździecka-Dołyk^{1,2*}, Andrzej Dołyk³ and Marta Misiuk-Hojło¹

¹Department and Clinic of Ophthalmology, Medical University of Wrocław, Poland

²Department of Optics and Photonics, Wrocław University of Science and Technology, Poland

³Department of Angiology, Hypertension and Diabetology, Medical University of Wrocław, Poland

Clinical Image

A 82-years-old female treated with warfarin due to atrial fibrillation (with history of hypertension and myocardial infarction) came to Emergency Ward with rapidly decreased visual acuity in her right eye. 2 weeks ago she had been treated on Emergency Ward with tissue plasminogen activator with bevacizumab and SF6 in intravitreal injection due to submacular haemorrhage in the course of choroidal neovascular membrane. Then she has been referred to her cardiologist to re-evaluate the indications and contraindications of chronic anticoagulant treatment. The re-evaluation according to the Atrial fibrillation guidelines (2016) released by The European Society of Cardiologist has been performed. The patient has been qualified to the treatment with warfarin (CHA₂DS₂-VASc scale -5 points). No risk of bleeding has been recorded (assessed by HAS-BLED, HEMORR₂HAGES, ATRIA, ORBIT and ABC bleeding scores). The anticoagulation therapy with warfarin has been maintained. During fundoscopy the retinal detachment due to subretinal haemorrhage was detected (doubtful light perception).

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*Correspondence:

Joanna Przeździecka-Dołyk,
Department and Clinic of
Ophthalmology, Medical University of
Wrocław, Poland, Rektorat, wybrzeże
Ludwika Pasteura 1, 50-367 Wrocław,
Poland,

E-mail: arie_l@wp.pl

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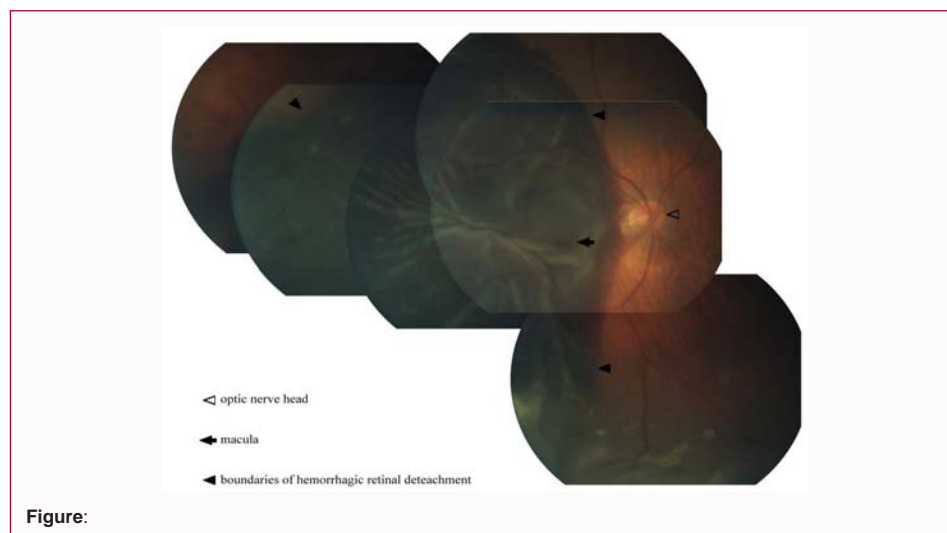


Figure: