

Case #1: 18 yo FM

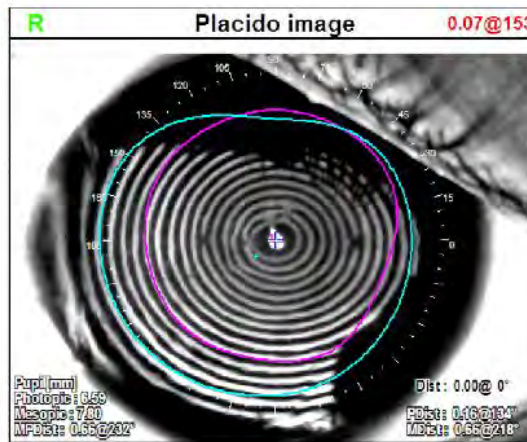
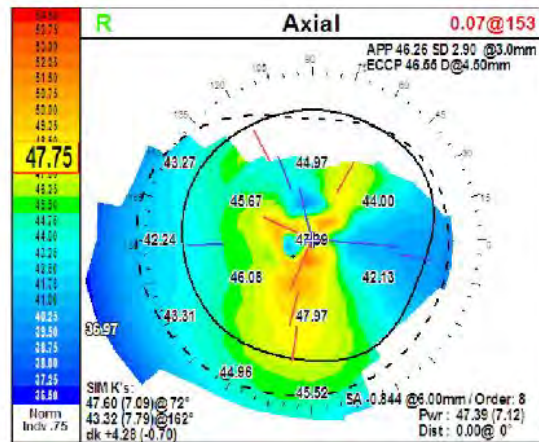
Macular Stromal Dystrophy both eyes



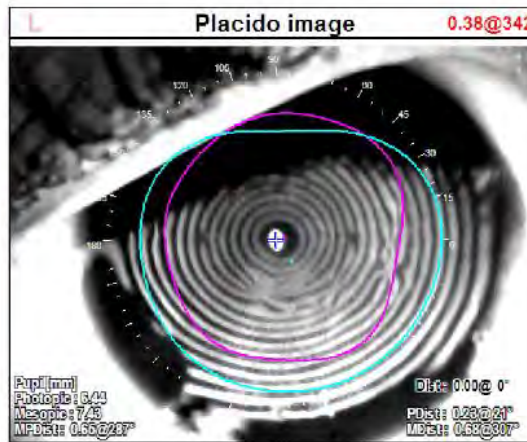
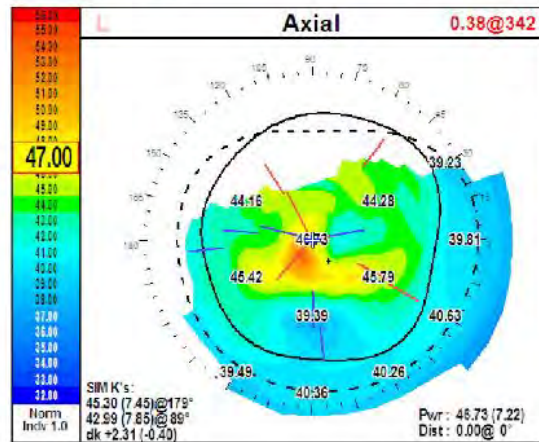
# Case #1: 18 yo FM

Macular Stromal Dystrophy both eyes very poor vision especially at night OU

|   |                  |         |   |           |   |
|---|------------------|---------|---|-----------|---|
| L | 12/14/2016 11:39 | Comment | L | Diagnosis | L |
| R | 12/14/2016 11:38 |         | R |           | R |



-4.75+5.0x89 20/50



-2.25+2.50x89 20/40

| SimK Steep       | SimK Flat        | dk           | e(Q)        | SA@6.0mm  | Pupil     |
|------------------|------------------|--------------|-------------|---|-----------|
| 45.30(7.45)@179° | 42.59(7.65)@89°  | -2.31(-0.40) | -1.20(1.45) | 0 -0.05 C-0.50  | 6.44 7.43 |
| 47.60(7.09)@72°  | 43.32(7.79)@162° | +4.28(+0.70) | 0.92(+0.24) | 0 -0.07 C-0.40  | 6.59 7.50 |
|                  |                  |              |             | Cornea Index: n=1.3775 (Ax), n=1.3760 (Re), 0.00 (PO) Q: 0.60mm | λ 687.6nm |

Case #1: (currently 25) yo FM Macular Stromal Dystrophy both eyes  
 12/2017 OS: DALK 9.0mm bed/9.25mm donor – suture removed 2019  
 05/2017 OD: DALK 9.0mm bed/9.25mm donor – suture removed 2018

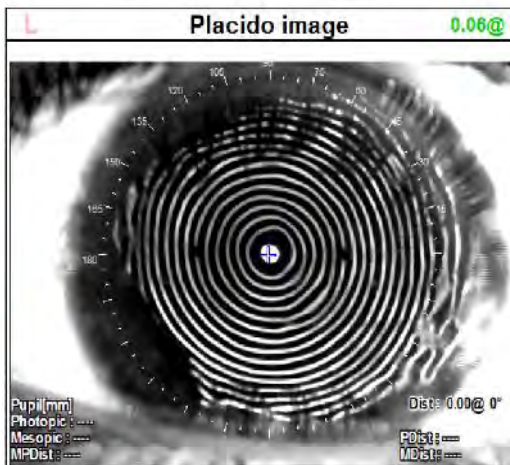
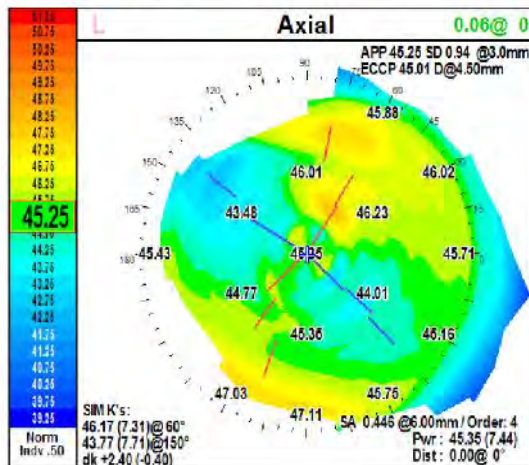
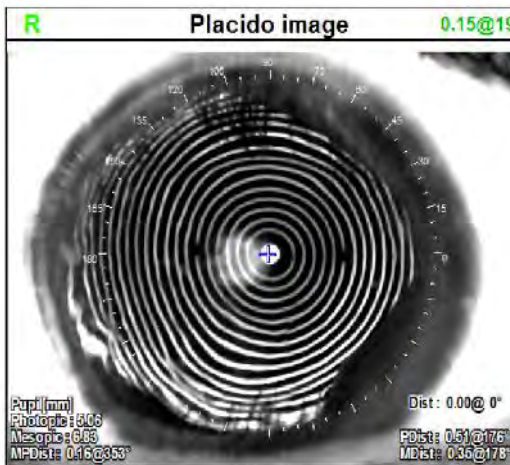
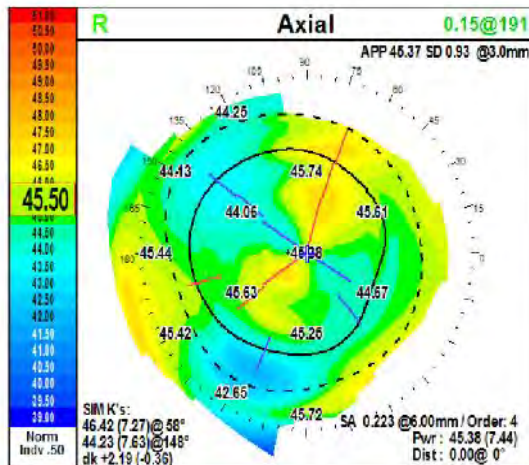
6/24/2024

OD: --3.0+1.75x69 20/25

OS: --2.0+0.75 x 45 20/25

Richard Erdey MD

|   |                  |         |   |           |   |
|---|------------------|---------|---|-----------|---|
| L | 06/24/2024 12:03 | Comment | L | Diagnosis | L |
| R | 06/24/2024 12:03 |         | R |           | R |



## Case #1: 20 yo FM Macular Stromal Dystrophy both eyes

Summary: 7yr f/u after successful large (10mm dia) DALK OU

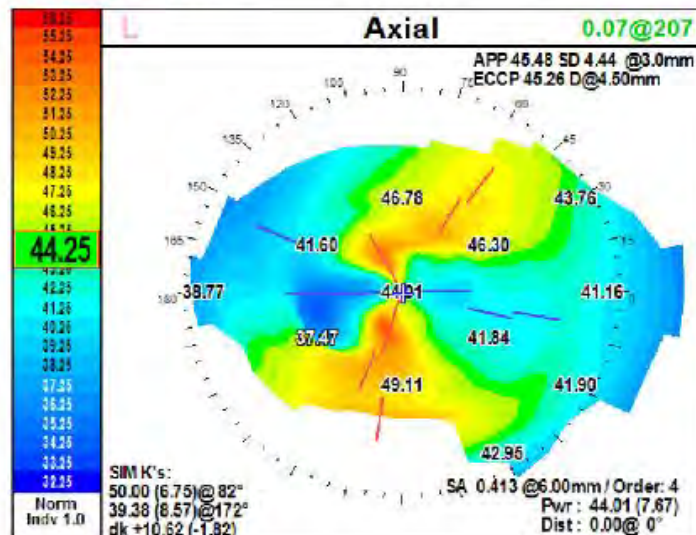
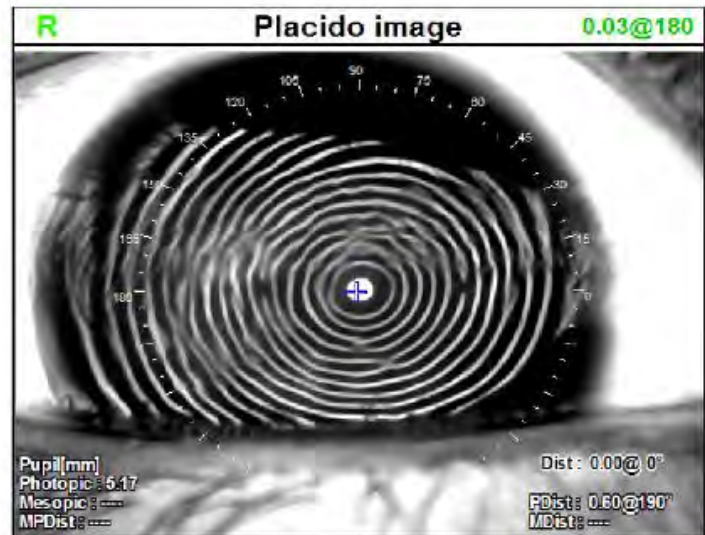
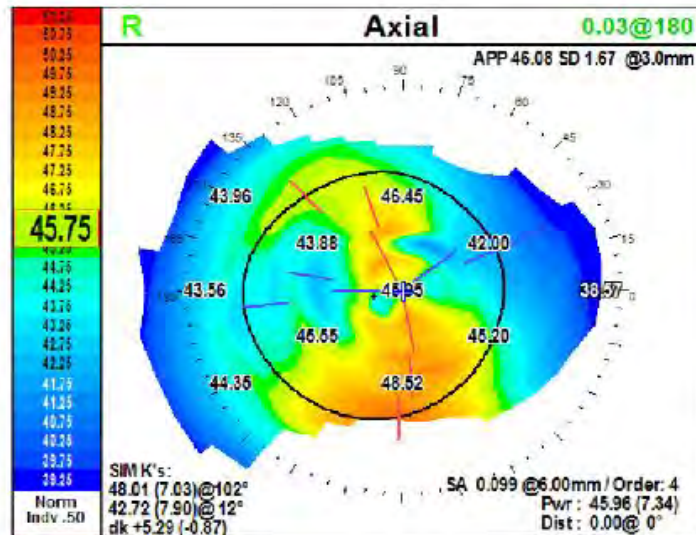
- Has enjoyed fully restored vision in BOTH eyes requiring mild spectacle correction over the last 7 yrs. No contact lenses needed.
- As of 6/24/2024, early evidence of recurrence stromal macula dystrophy but confined to extreme periphery inside border of 9.0mm OZ for 360 degrees, nowhere near optical zone.
- Benefit of large diameter DALK graft w deep predescemets dissection to within 15-30u of DM is debulking genetically compromised host keratocytes posteriorly and peripherally to near limbus to prevent early recurrence in deep central stroma which has so far not occurred in this graft after 7 yrs. If peripheral recurrence were to advance into OZ and impact vision over the next decade, this graft is designed to be peeled off and replaced, thus preserving descemets membrane which in our opinion is sacrosanct at any age but particularly for this young patient.

# Case #2: 22 yo (younger sister to case #1) w Macular Stromal Dystrophy OU

“Very poor night vision – cannot drive”

OD -5.0+2.50x90 20/40 OS: -5.0+3.0x95 20/40

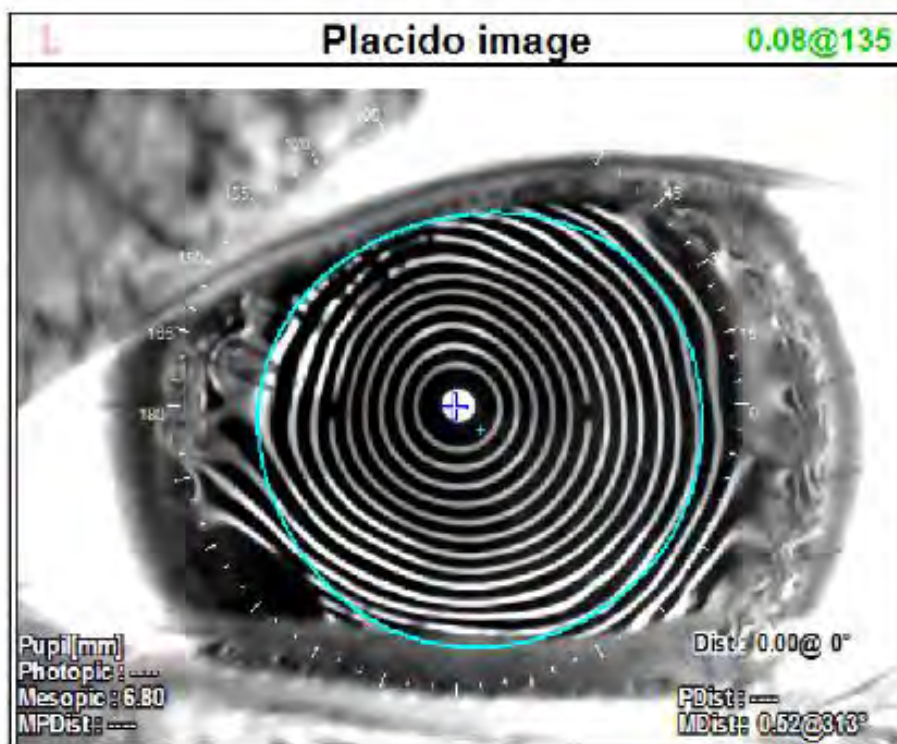
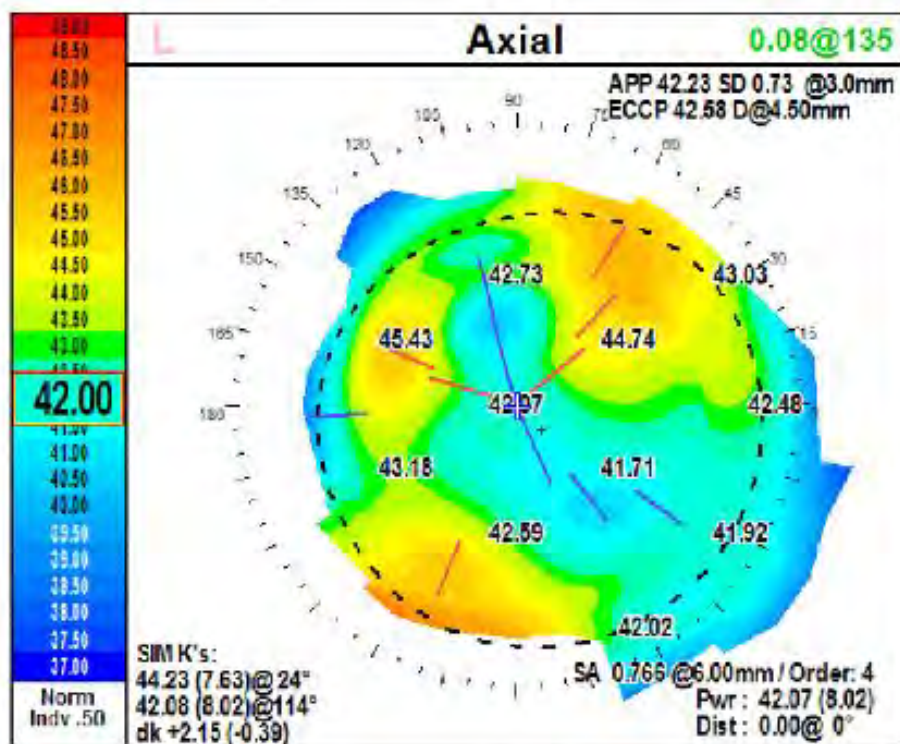
| L                |  | Comment | R |  | Diagnosis | L |  |
|------------------|--|---------|---|--|-----------|---|--|
| R                |  |         | R |  |           | R |  |
| 04/04/2024 08:07 |  |         |   |  |           |   |  |
| 04/04/2024 08:07 |  |         |   |  |           |   |  |



# Case #2: 22 yo Macular Stromal Corneal Dystrophy

4/16/2024 OS: DALK 10.0mm donor/10.0mm bed laterality matched nasal marked 24 bite running suture

- 5/20/2024 “thrilled!!” OS: Uncorrected VA 20/25
- -1.0+1.50x19 20/20



# Case #2 -Summary

- Very early visual rehabilitation (excellent UCVA after only 3 days.
- Suture in at this point
- Able to already consider DALK in other eye and will do so after her pending wedding.