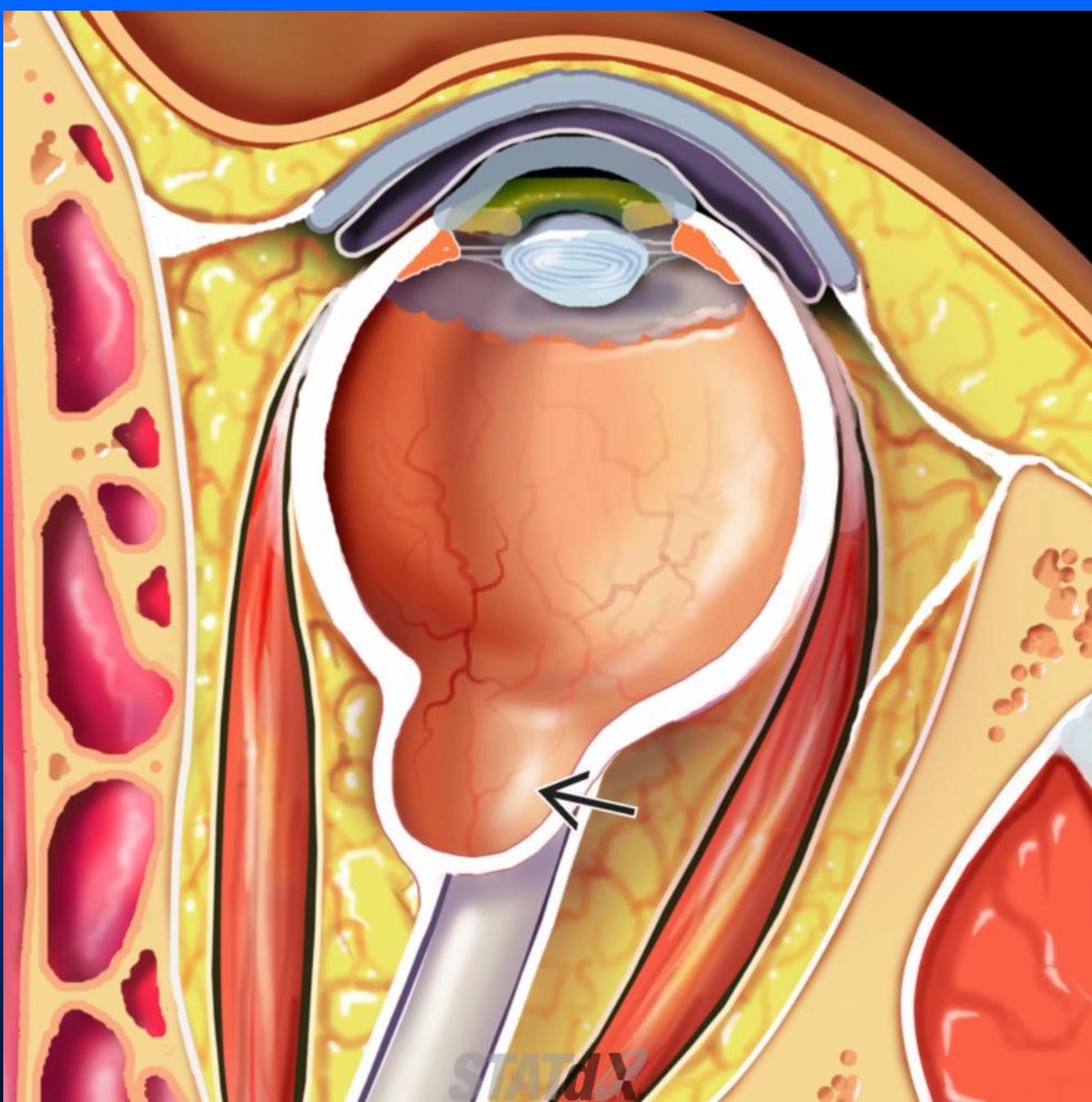


Coloboma

- Types of posterior coloboma
 - Optic disc coloboma
 - Choroidoretinal coloboma
- Decreased visual acuity; leukocoria
- Treatment to address refractive errors, strabismus, amblyopia, retinal detachment
- Coloboma is ophthalmoscopic diagnosis
- Imaging confirms ocular features, identifies retrobulbar findings such as cyst, and evaluates coexistent anomalies

Imaging

- Focal defect at posterior pole of globe
- Outpouching contiguous with vitreous
- Oriented posteriorly with long axis of globe
- Microphthalmos and retrobulbar cysts often present
- Isodense to vitreous on CT
- Isointense to vitreous on MR
- Bulging of posterior globe on prenatal MR



Axial graphic of classic optic disc coloboma shows a focal defect in the posterior globe at the site of the optic nerve head insertion (black solid arrow).



Axial CECT demonstrates a broad colobomatous defect (white solid arrow) centered on the upper margin of the optic disc. Note vitreous appears contiguous to retrobulbar outpouching. Apart from the retrobulbar outpouching, the globe is small.

Coloboma Cysts



Coloboma (associated with other defects) CHARGE

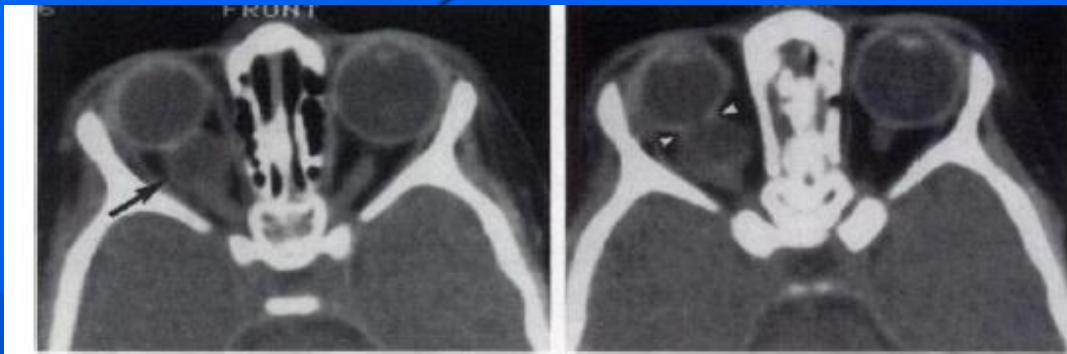


Figure 1. Case 1. (a) CT image (2-mm section, axial view) acquired at the level of the optic nerves demonstrates cystic expansion of the optic nerve (arrow). Right globe is smaller (microphthalmia) than the left. (b) CT image acquired at the level of the junction of the right optic nerve and right globe confirms choroidoscleral defect (arrowheads), associated with microphthalmia.

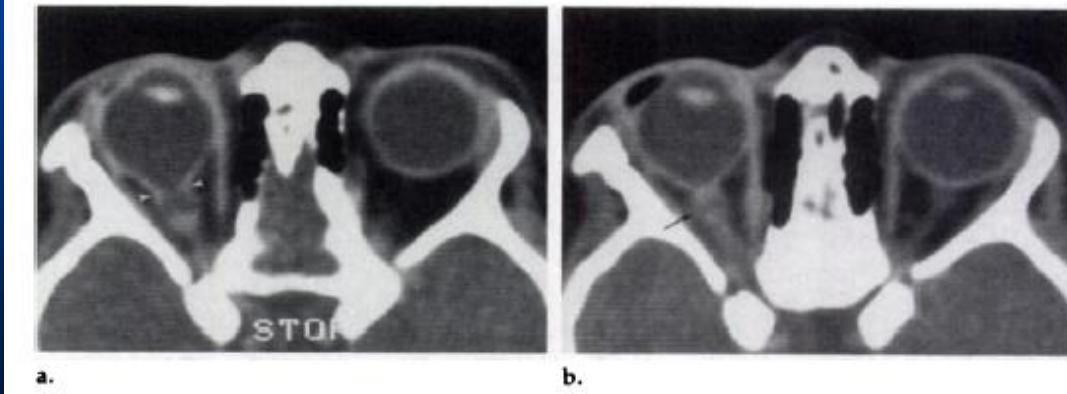


Figure 2. Case 2. (a) CT image acquired at the junction of the right optic nerve and the globe shows the choroidoscleral defect (arrowheads) and cystic expansion of the right optic nerve. (b) Image acquired 2 mm cranial to that in a shows a misshapen right globe and focal expansion of the distal right optic nerve (arrow). CT findings are consistent with coloboma of the