

Extended Matching Question- Answers

1. Eyelids and double vision

1. B - Incision and curettage are management techniques used to treat established an chalazion.
2. F
3. C - Pyrexia may occur as a result of infection spreading to periorbital soft tissues.
4. A - Blepharitis is associated with Acne Rosacea. Alcohol may lead to exacerbation of Acne Rosacea and therefore result in an episode of blepharitis.
5. E

2. Red eye and Visual disturbances

1. B - Diabetes and hypertension are risk factors for central retinal vein occlusion.
2. G - This condition is commonly treated with chloramphenicol.
3. F - Itchy eyes and papillae are commonly seen in both contact lens wearers and hay fever sufferers.
4. H
5. A - Other symptoms which may occur include nausea and vomiting.

3. Cornea and cataract

1. I - Following cataract surgery 30% of people develop posterior capsule opacification within 5 years.
2. A - Complications of cataract surgery include endophthalmitis which is most likely to occur within 2 weeks from surgery. This is also known as acute post-surgical enophahtlmitis.
3. B - Contact lens wearers are advised to use saline for cleaning.
4. C - Tapering down steroid drops is advocated in order to prevent rebound anterior uveitis.
5. H - A typical presentation and history of this condition.

4. Retinal conditions

1. B - Proliferative diabetic retinopathy and central retinal vein occlusion are the two most common causes of rubreosis.
2. F - The presence of tobacco dust is indicative of retinal tear which can progress to detachment of the retina.
3. D - Macular involvement/detachment is suggested by the decreased visual acuity.
4. G - Embolic monocular blindness presents as black loss of vision.
5. E - An absence of decrease in visual acuity suggests there is no macular detachment.

5. Medical ophthalmology and uveitis

1. F - Symptoms suggestive of this condition include dry mouth and dry eyes.
2. I - Rheumatoid arthritis may occur with scleritis.
3. B - Pars planitis is a subset of intermediate uveitis. Pars planitis is associated with demyelination and may therefore aid in making a diagnosis of MS.
4. A - Rheumatological conditions such as ankylosing spondylitis can be associated with anterior uveitis.
5. D - Serological tests include urgent CRP and ESR, which help to diagnose this condition. Jaw claudication is an important feature, and patients should be asked about this symptom.

6. Neuro-ophthalmology

1. G - Convergence of eyes when the patient is asked to read will improve double vision.
2. B - A right partial lobe infarct may result in sensory inattention of the contralateral side. Expressive dysphasia may result in a temporal lesion.
3. D - Papilloedema is swelling of BOTH optic discs.
4. C - The impulse converges posteriorly and can cause an inferior orbital blow out fracture as the bone is thinnest in this area.
5. E - Meningioma or pituitary adenomas are common causes of chiasmal lesions, classically causing bitemporal hemianopia.

7. Paediatric ophthalmology and strabismus

1. C
2. F - Intrauterine infection (e.g. CMV or Rubella) can cause congenital cataract and it is important to screen for this. In the newborn it may present as leukokoria.
3. I - If threshold disease is present the laser therapy may be required
4. D
5. A - To minimise the risk of amblyopia, patching of the good eye or correcting refractive error by prescribing spectacles can be done. The best results are seen when treatment is initiated before the age of 8.