Asking the experts about eye problems

Learn from two ophthalmology experts as they are posed questions on common equine eye issues

Managing eye disease is an important part of equine practice, and an assessment of the eyes is an essential aspect of a pre-purchase examination. Here I ask two experienced ophthalmologists, Claudia Hartley and Jim Carter, to give their opinion on various eye issues commonly encountered by equine clinicians in first opinion practice.

At a pre-purchase examination, a horse is found to have peripapillary chorioretinopathy (butterfly lesions) in one eye. What criteria do you use to assess the significance of this finding and what would your advice be to the purchaser?

**CH** These lesions are considered a hallmark of previous equine recurrent uveitis (ERU) attacks involving the posterior segment. However, as far as clinical significance is concerned, if there are normal retinal vessels overlying the depigmented zone, I am encouraged that there is likely to be normal retina over this area too (the retinal vessels sit in the nerve fibre layer of the retina). I recommend re-examination in six months to check there has been no progression in these cases. Where vessels are attenuated or absent, I am very suspicious that the retina is similarly atrophic – suggesting an impact on vision.

**JC** I will always look for indications within the vitreous and lens for indications of a previous bout of uveitis. It is also important to look at the vascularisation within the retina coming off the optic nerve head and see if it is spanning the butterfly lesion. If there is marked vascular attenuation, then there are going to be significant retinal issues. I would always advise clients that we have found the lesion, and it is not necessarily possible to define how much visual impairment can be related to these lesions, but in those with significant vascular attenuation, you would expect there to be a significant visual field deficit.

Once a second episode of equine recurrent uveitis has been successfully treated in a horse, have you any suggestions to prevent further occurrences?

**CH** ERU is the most common cause of blindness in horses. So, at this stage, I would always discuss the surgical