

## THE COLLEGES OF MEDICINE OF SOUTH AFRICA

Incorporated Association not for gain Reg No 1955/000003/08

## Final Examination for the Fellowship of the College of Ophthalmologists of South Africa

29 January 2021

Paper 2

**Clinical Ophthalmology** 



(3 hours)

All questions are to be answered. Each question to be answered in a separate book (or books if more than one is required for the one answer)

- 1 a) List the systemic and ocular manifestations of congenital rubella syndrome
  - b) List the ocular features of Down syndrome
  - c) In bullet points, discuss evidence-based amblyopia therapy and regimes in children (5)
  - d) In bullet points, discuss the surgical management of congenital glaucoma
  - e) In bullet points, discuss the drugs effective in the treatment of JIA-associated uveitis (5)
    - [25]

(5)

(5)

(5)

- 2 a) The risk of an intra-ocular haemorrhage during ophthalmic surgery can have a devastating impact on outcomes. List the points you would consider pre-operatively to reduce the risk of this complication (10)
  - b) Outline the clinical features that differentiate Toxic Anterior Segment Syndrome (TASS) from Infectious Endophthalmitis post cataract surgery (10)
  - List the main differences between Monovision and (laser) Blended vision as an option for presbyopia correction (5)

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- 3 a) Tabulate the differences between Dermatochalasis and Blepharochalasis under the following headings:
  - i) Definition
  - ii) Age of onset
  - iii) Clinical features
  - b) A first-year registrar informs you that he saw choroidal folds during fundoscopic examination of a patient. List ten differential diagnoses of choroidal folds (10)
  - c) Discuss the management of Branch Retinal Vein Occlusion under the heading of "Macular Laser therapy and BVOS outcomes" (10)

[25]

(5)

- 4 a) Briefly discuss the systemic features and genetics of Pseudo-Exfoliation Syndrome. (10)
  - b) List the MIGS procedures that you know of that are angle-based but do not involve implants remaining in-situ and give a brief description of what each of these procedures entails (5)
  - List the pathological conditions that are usually unilateral and may present with extremely high IOP as well as corneal oedema. Mention the classification of the state of the angle (type of glaucoma) for each condition (10)

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