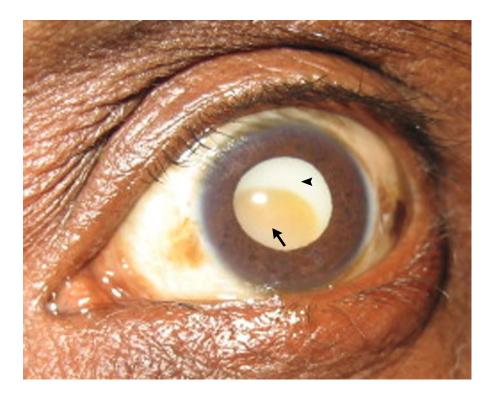
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Morgagnian Cataract



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48-YEAR-OLD MAN PRESENTED WITH GRADUAL, PAINLESS DIMINUTION of the vision in his left eye over a period of 4 to 5 years. In this eye, the best corrected visual acuity was limited to perception of hand movements close to his face; the intraocular pressure was 14 mm Hg, with a clear cornea and a morgagnian cataract. A dense yellow-brown nucleus (arrow) had sunk inferiorly with a clear, milky-white cortex (arrowhead) above, leading to vision loss. Three weeks after the cataract was removed, the patient was given eyeglasses (-1.5 diopters at 90 degrees). At the last follow-up visit 1 year after surgery, his best corrected visual acuity was 20/30 in the right eye and 20/20 in the left eye. Morgagnian cataract is a form of hypermature corticonuclear cataract. The normal aging process of dissolution occurs more rapidly, leading to enzymatic degradation of cells and precipitation of crystalline protein that causes liquefaction of the lens fibers and resorption of the cortical fluid. This condition should be managed promptly because rupture into the anterior chamber can cause an inflammatory reaction or phacoanaphylactic uveitis. It may also be complicated by phacolytic glaucoma or dislocation posteriorly into the vitreous cavity.

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