

Torpedo Maculopathy: A Rare and Underrecognized Macular Lesion

Maculopatia em Torpedo: Uma Lesão Macular Rara e Pouco Reconhecida

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A 65-year-old woman underwent a routine ophthalmological examination with no reported visual complaints. Best corrected visual acuity was 20/40 OD and 20/32 OS. Fundoscopy of the right eye revealed a solitary, round, hyperpigmented lesion within a well-demarcated, hypopigmented area in the temporal macula, resembling a torpedo shape pointing towards the fovea.

Optical coherence tomography (OCT) of the right eye showed a cavitation defect of the outer retina with attenuation of the outer nuclear layer (ONL), loss of the ellipsoid and interdigitation zones, and thinning of the retinal pigment epithelium (RPE), resulting in the formation of a subretinal cleft temporal to the fovea. Fluorescein angiography (FA) demonstrated hyperfluorescence due to a window effect.

Torpedo maculopathy (TM) is a rare congenital condition characterized by a distinctive torpedo-shaped, hypopigmented lesion in the temporal macula. Its etiology is unknown, but it is hypothesized to arise from developmental defects in the retinal pigment epithelium. Diagnosis and monitoring rely mainly on OCT, which reveal attenuation of the outer retinal layers, facilitating classification into type 1 (without cavitation) and type 2 (with cavitation). TM typically remains stable over time

with minimal risk of vision loss, however, periodic monitoring is recommended.

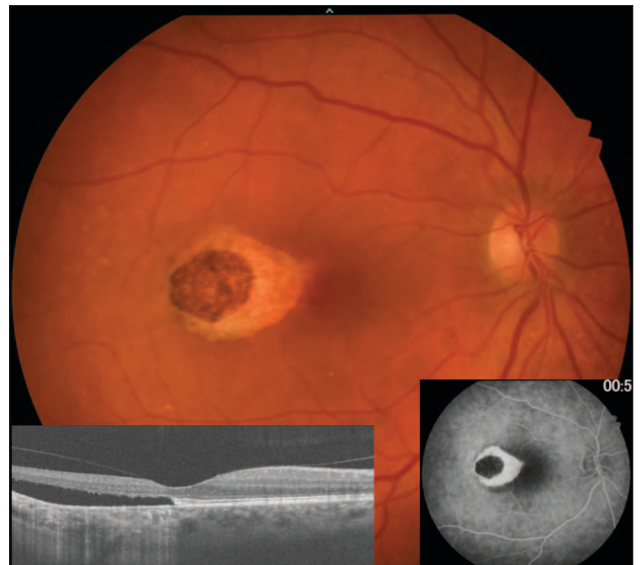


Figure 1. Retinography reveals a torpedo-shaped, hypopigmented lesion, surrounding a central round hyperpigmented lesion, in the temporal macula. OCT indicates a cavitation defect in the outer retina with thinning of the ONL, loss of the ellipsoid and interdigitation zones and RPE thinning. FA highlights hyperfluorescence due to a window effect.

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SP: Supervision, manuscript revision.

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ARS: Recolha e análise de dados, concetualização e criação do manuscrito original.

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