

## OPRS IMAGES

## Primum Non Nocere

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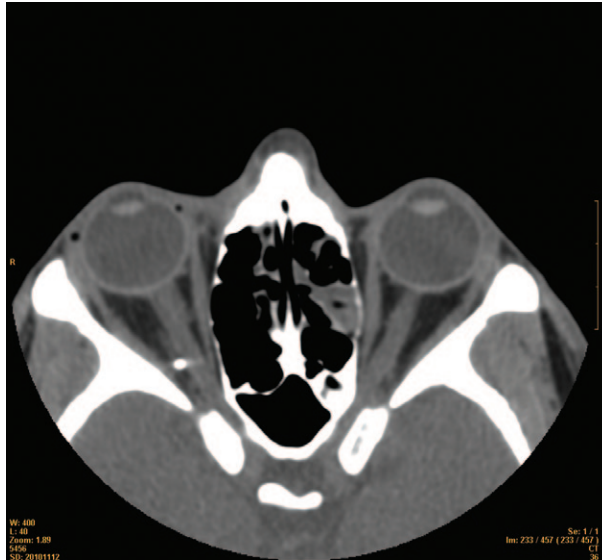


FIGURE 1. CT scan showing metallic foreign body adjacent to right optic nerve.

A 31-year-old man came to the clinic with mild pain of eye movement and hyperemia in the right eye. He was hunting the day before but denied any direct trauma. An examination showed normal visual acuity, mild conjunctival chemosis without any entry wound visible, intact globe, normal tonometry, and funduscopy. A CT scan revealed a small, presumed metallic foreign body adjacent to the optic nerve (Fig. 1). With the normal ocular examination, conservative treatment

consisting of topical and oral antibiotic and oral nonsteroidal anti-inflammatory was instituted. After 3 years, the patient remained asymptomatic with a visual acuity of 20/20, normal pupillary response, normal color perception, and full visual fields. This case highlights the dictum, “First Do No Harm” as surgical removal of the foreign body can induce iatrogenic damage such as traumatic optic neuropathy or orbital hemorrhage.