Macular Telangiectasias Associated With a New Choroid Vessel, in One Case
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ABSTRACT
Macular telangiectasias are characterized by the presence of microaneurysmal dilations around the fovea. This appellation brings together two very different entities, type 1 and type 2. We are talking in this work about Macular telangiectasia type 2. We report the case of a 48-year-old patient followed for macular telangiectasia 2, complicated by neovessels treated by anti VEGF.

Keywords
Macular Telangiectasia, Microaneurysmal Dilations.

Introduction
Macular telangiectasias are defined as unilateral or bilateral alterations of the juxtafoveal capillaries, dilated and abnormally permeable. It is a rare condition of which the epidemiology is poorly understood. Several classifications have been given to this pathology, the most used remains that proposed in 2006 by Yannuzzi and which defines two groups of macular telangiectasias. Group 1 represents unilateral, congenital, exudative macular telangiectasias often complicated by cystoid macular edema. Group 2 macular telangiectasias are occult, acquired, bilateral telangiectasias. They are not associated with cystoid macular edema, but rather with retinal atrophy and can be complicated by neovascularization. In this work we will talk about macular telangiectasias2.

The objective of this work is to recall the clinical characteristics of macular telangiectasia2, the contribution of imaging in this pathology and in its complications and the therapeutic means that can be used.

Observation
We report the case of a 48-year-old patient, followed for 5 years for macular telangiectasia2 with on clinical examination a corrected visual acuity calculated at 10/10 P2 for both eyes and at the bottom of the eye, we found, bilaterally, dilations of the macular capillaries. The rest of the ophthalmological examination was normal, angiography confirmed the diagnosis by ascending a poorly limited macular hyperfluorescence from early times with diffusion in late times (figure 1).

Figure 1. angiography showing a poorly limited macular hyperfluorescence, from early times with diffusion in late times.

The evolution was marked by the installation of metamorphopsies in the left eye with acuity estimated at 7/10 with correction. The oct angiography had helped to detect a neovascular complications (figure 2).
Macular telangiectasias remain rare pathology, still imperfectly understood. Imaging, OCT, angiography, autofluorescence exams help better identify these macular abnormalities. Many uncertainties remain as to the therapeutic course to adopt. We found in this work an anatomical and functional efficiency of intravitreal anti-VEGF injections in case of neovascular complication

**Reference**