ATYPICAL PRESENTATION OF BILATERAL COATS DISEASE

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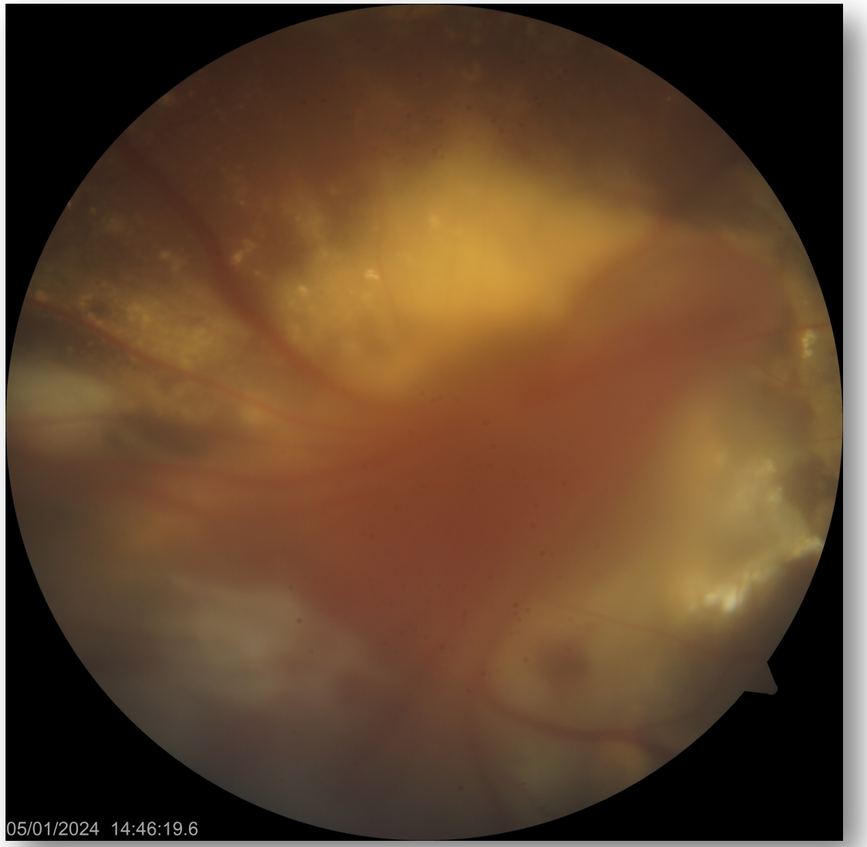
Purpose: Coats disease is a non-hereditary congenital abnormality of the retinal vessels. This study aims to report a case of atypical presentation of Coats' disease.

Methods: Male, 18 years old, referred for progressive low visual acuity (LVA) started two years ago. Denies comorbidities and family history of ophthalmological disease. Visual acuity in the right eye (RE): conting fingers (CF) close to the face and in the left eye (LE): CF at one meter. RE/LE esotropia and hypertropia. Fundoscopy: exudation in the posterior pole and inferior serous detachment in the RE and temporal detachment in the LE, with a fibrotic appearance in the temporal retina of the RE. Fluorescein angiography (FA) both eyes (AO): significant exudation and absence of neovascularization or retinal ischemia. AO ocular ultrasound: retinal detachment and absence of intraocular calcifications.

Results: Coats disease is a progressive and unilateral (95%) abnormality of the retinal vessels, with a higher prevalence in males (3:1) and young people, especially those under 8 years of age. The reported case deviates from that and this is the reason for its rarity. Retinal exudation occurs due to the extravasation of plasma and blood content from abnormal retinal vessels, with aneurysms and vascular telangiectasias. In the clinical presentation, the patient manifested both LVA and strabismus, as well as vascular changes and retinal exudation in typical locations– aspects that corroborate the diagnosis of Coats' disease. An ocular ultrasound should be performed in these cases to rule out retinoblastoma. Other diagnostic hypotheses such as toxocara infection and familial exudative vitreoretinopathy have been investigated.

Conclusion: The case reported, due to its epidemiology and findings, has Coats Disease as the main diagnostic hypothesis. As the literature shows, there are several therapeutic options, as observation until vitreoretinal surgeries and enucleation. The patient continues to be monitored with plans for therapeutic discussion.



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