

IMPROVEMENT OF A SYPHILITIC CHORIORETINITIS - A CASE REPORT

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Altino Ventura Foundation

47° BRAVS Meeting/ Retina 2023

April 28th to May 1st

PURPOSE

- To report a case of syphilitic chorioretinitis.

CASE REPORT

- Female patient, 64 years old;
- Hypertensive and insulin-dependent diabetic; no other comorbidities;
- Low central visual acuity (VA) in the right eye (OD) for 4 days;
- Ophthalmological examination

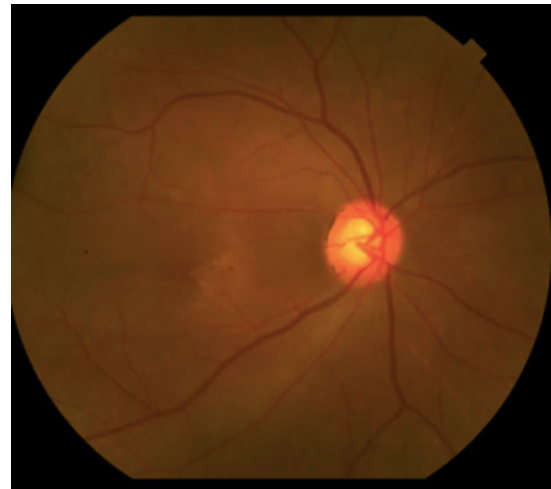
✓ VA:

- OD = finger counting correction at 1 meter;
- left eye (OE) = 20/40;

✓ Fundoscopy:

- Both eyes (OU): arteriolar attenuation, increased reflex arteriolar dorsalis, and diffuse mottling of the retinal pigment epithelium.
- OD a hypochromic area with punctate microhemorrhages perifoveal inferior nasal.

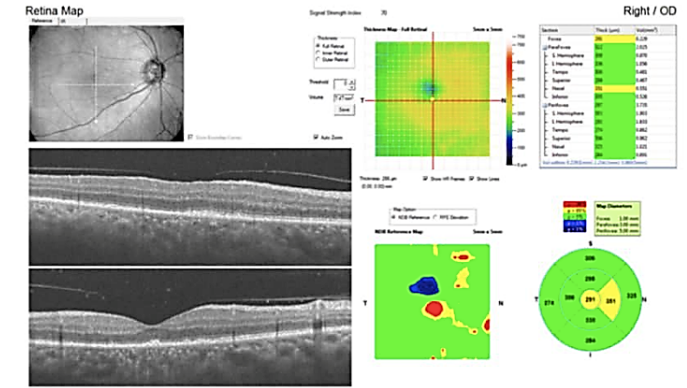
- ✓ Tonometry and biomicroscopy were unremarkable.



Retinography of OD

CASE REPORT

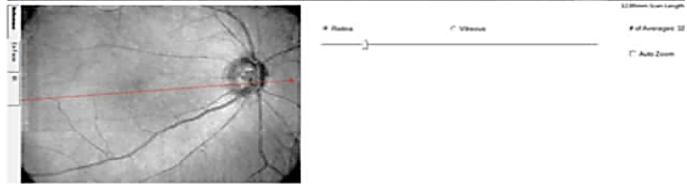
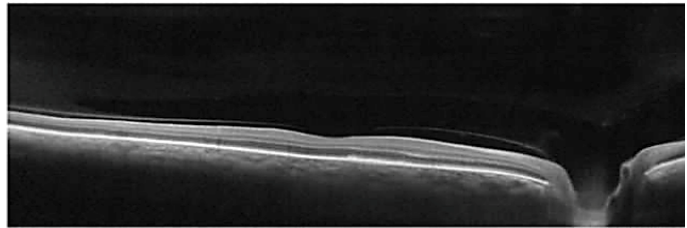
➤ The optical coherence tomography (OCT) of the macula



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Defining the OCT Revolution



- Vitreous cellularity with the granularity of the external retina;
- Hypothesis of syphilitic retinitis;
- Serologies positive for VDRL (1/128) and Treponemal Test;
✓ Immediate treatment with intravenous crystalline Penicillin G was initiated.

OCT of the macula of the OD.

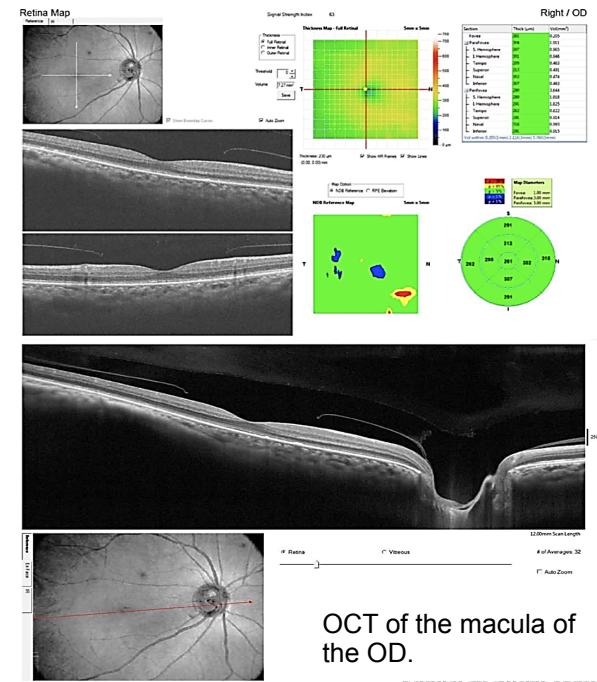
CASE REPORT

➤ After 7 days

- VA of 20/30 in OD and 20/40 in OE;
- Fundoscopy: sparse hypochromic spots in the temporal and nasal arches, absence of the hypochromic lesion observed in OD at the first examination, persistence of intraretinal hemorrhages spots;
- OCT of the macula: OD with little granularity in the perifoveal region and normal choroid; in OE, slight irregularity in the ellipsoid layer was present;
- Intravenous treatment was maintained, and the patient returned after the antibiotic therapy with a VA of 20/25 with correction in OU;
- The OCT of the macula of the OD showed improvement in the granulations compared to the previous exams; in OE, a small amount of intraretinal fluid perifoveal nasal the macula was observed.



Retinography of the OD



OCT of the macula of the OD.

DISCUSSION

- Given the clinical and laboratory findings, and the efficient initiation of venous treatment, we observed a significant improvement in VA with a reduction in damage to the retina. We highlight the importance of a rapid clinical and laboratory diagnosis of syphilitic chorioretinitis, with the initiation of effective therapy to resolve the condition and mitigate the repercussions of this pathology on eye health.

REFERENCE

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