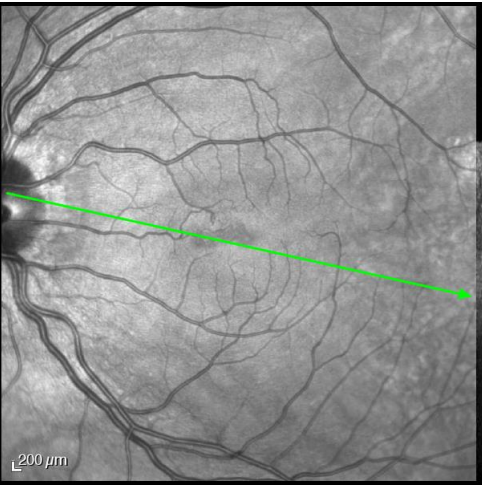
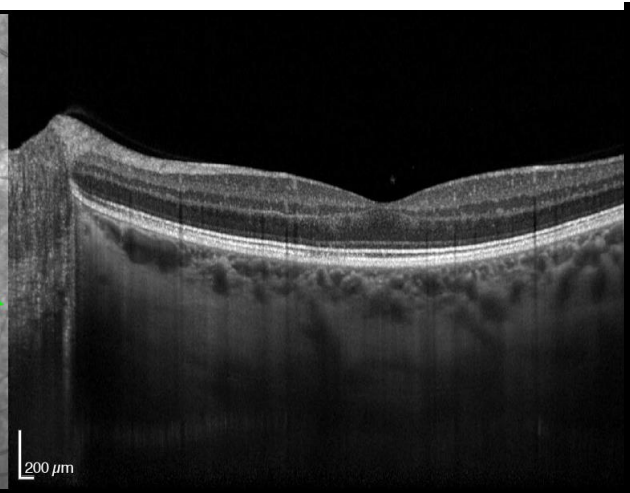
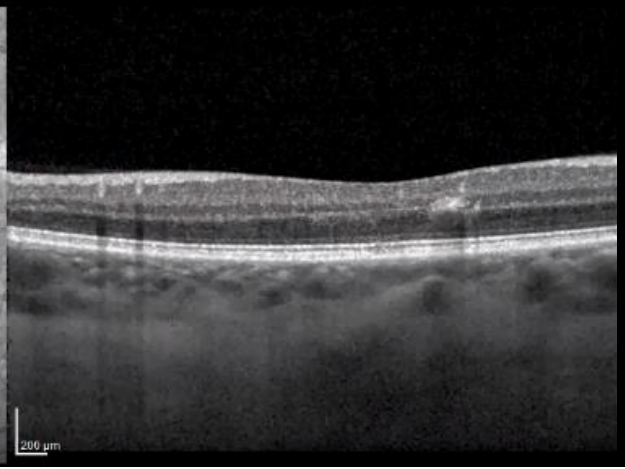
Acute Macular Neuroretinopathy Associated To Chikungunya Fever

- **Purpose**: to report a case of acute macular neuroretinopathy (AMN) associated with Chikungunya fever
  Methods: this is an observational retrospective report of a single case. All patient health record and her exams were retrieved and organized for this case report
  Results. A 33-year-old woman without any remarkable medical history presented with exanthem and right foot joint pain. After clinical investigation, the patient was diagnosed with chikungunya fever confirmed with IgG and IgM for this arbovirus and negative for dengue fever. After 1 week, the patient complained of a fixed, non progressive paracentral scotoma in the left eye without any other ocular symptoms. The ophthalmologic exam in both eyes pointed a best corrected visual acuity of 20/20, anterior biomicroscopy and fundoscopy within normal limits and intraocular pressure of 13/14 mmHg (OD/OS). In the nearinfrared reflectance retinography of OS, it was identified a dark gray, petalloid, perifoveal lesion with the tip pointed toward the fovea and the correspondent optical coherence tomography frame showed a hyperreflective band at outer plexiform layer (OPL) besides disruption of ellipsoid layer (EL). Angiograms of OS showed discrete flow reduction in outer retina to choriocapilar. OS's microperimetry showed a slightly reduction of sensibility of the correspondent lesion area. Wide angle retinography and autofluorescence did not show lesions. The findings are consistent with the diagnostic of acute macular neurorretinopathy
  Discussion. AMN usually occurs in women in their 30's. Several risk factors have been identified such as viral infections like Dengue fever and Chikungunya fever, but it can also be associated to vaccination, and other vascular and coagulation disturbs. Occasionally AMN is a challenging diagnosis because the lesions can be very discrete and may not be the noted in the basic ophthalmologic exam. Therefore knowing the risk factors associated elevates the suspicion and helps to guide the investigation.


200 µm


200 µm

48 / 73
200 µm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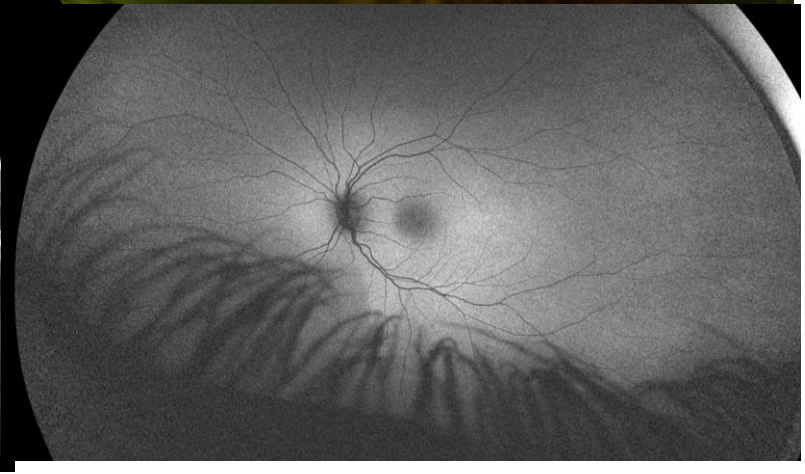
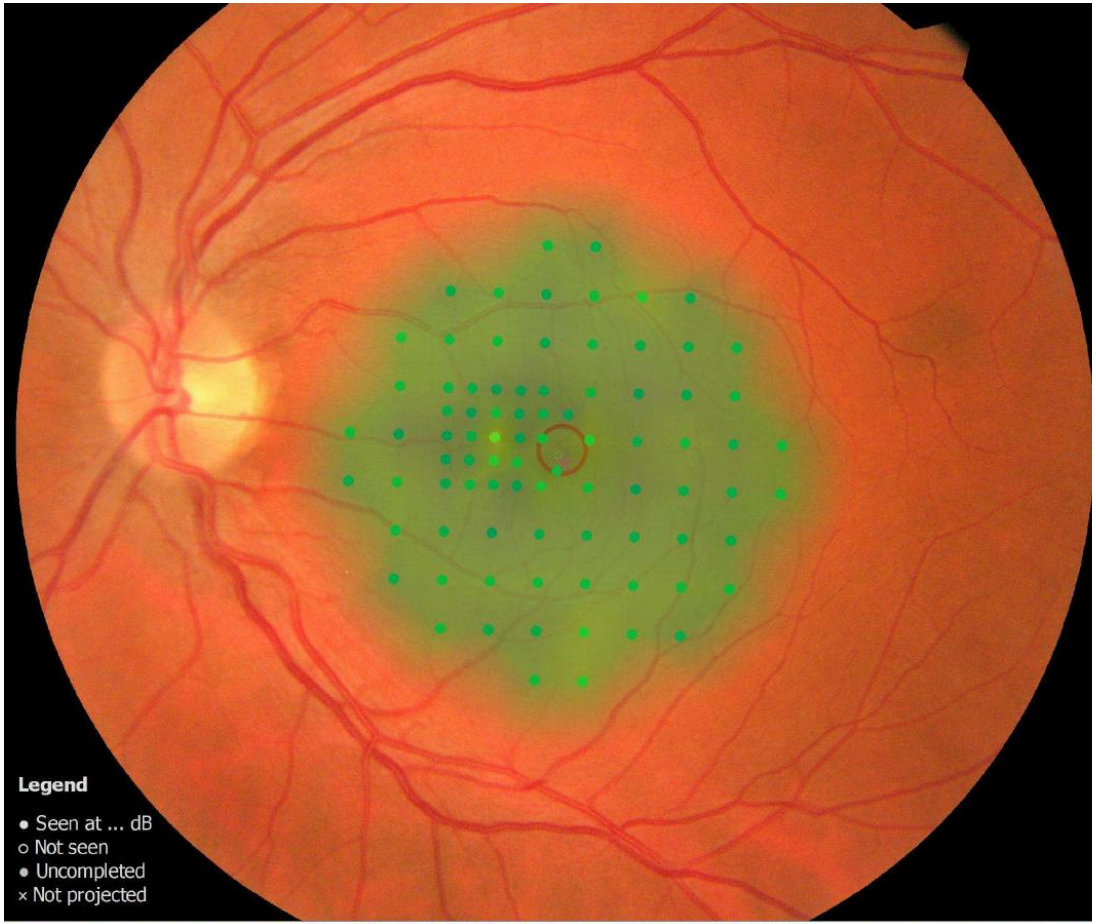




10-2
Fixation monitor: Min
Fixation target: Cross marks
Fixation losses: 0/0
False pos errors: 0 %
False neg errors: 0 %
Test duration: 08:51
Fovea: On

Single field analysis
Stimulus: III / 4000 asb / White
Background: 31 asb / White
Strategy: Normal

Pupil diameter: 4.61
Visual acuity: null
RX: 0.5

Left eye (OS)
Date: 05/02/2024
Time: 11:59:43
Age: 33

MD -0.4
PSD 1,2

Total deviation

Pattern deviation

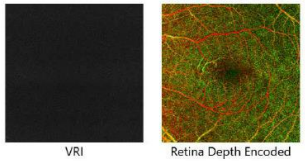
[%]
< 5
< 2
< 1
< 0.5

Franco, Rayane Neves | 241260 | 05/12/1990 |

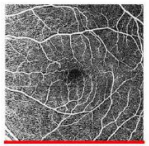
OCTOPUS 900 SN1235

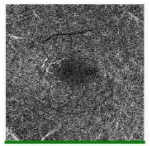
Angiography Analysis : Angiography 6x6 mm

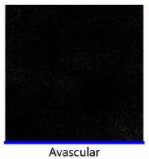
Signal Strength: 10/10 OD ○ | ● OS

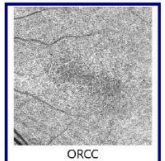

VRI

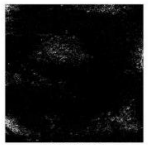
Retina Depth Encoded

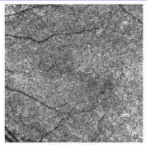

Superficial

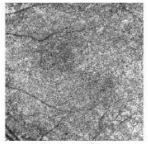

Deep

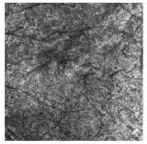

Avascular


ORCC

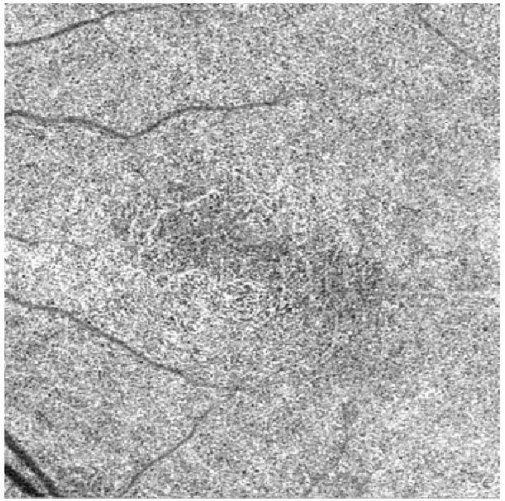

RPE-RPE Fit

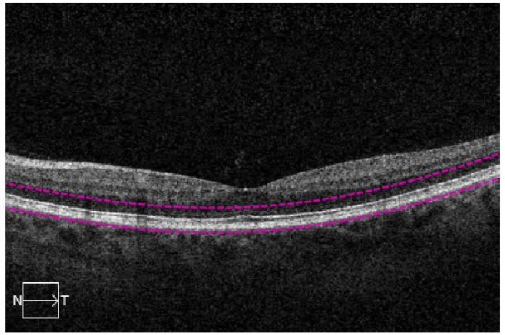

Sub-RPE


Choriocapillaris


Choroid

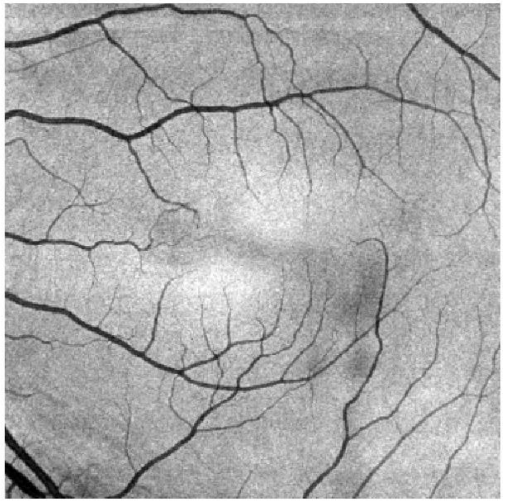
AngioPlex - ORCC





Slice: 175 Top: OPL Bottom: RPEFit+38µ

Structure - ORCC



Overlays
Structure - None
AngioPlex - None

Tracked during scan

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