





BILATERAL BRANCH RETINAL VEIN OCCLUSION ASSOCIATED WITH SYPHILIS INFECTION

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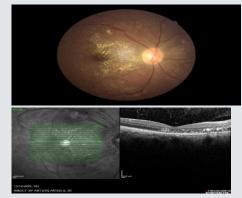
Purpose

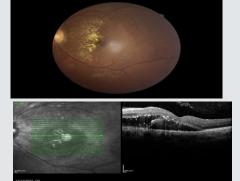
The purpose of this case report is to present the clinical management of a patient with bilateral branch retinal vein occlusion (BRVO) associated with syphilis infection and the use of intravitreal injection for treatment.

Case report

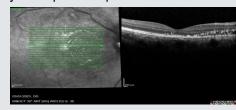
A 34-year-old female resident of Rocinha, Rio de Janeiro, was referred to Hospital da Gamboa for intravitreal injection of anti-VEGF for BRVO in her right eye. Corrected visual acuity in the right eye was 20/50 and in the left eye was 20/25. In her fundoscopy, it could be seen macular star in both eyes, as well as branch retinal vein occlusion. Blood tests, Fluorescein Angiography and Optical Coerence Tomography (OCT) were performed.

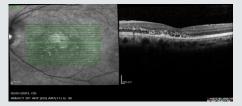
An intravitreal injection of Bevacizumab was performed in right eye and, after 3 weeks, the vision improved to 20/40 and vision in her left eye worsened to 20/40. Blood tests showed reactivity to FTA-ABs with VDRL 1:16, and negative sorology for HIV. The correct treatment for tertiary syphilis was managed.



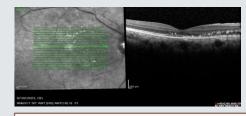


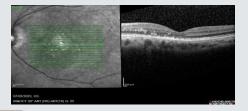
After another 3 weeks, her vision improved to 20/20 in her right eye and worsened to 20/60 in her left eye. The OCT showed complete regression of subretinal fluid in her right eye and partial improvement in her left eye after first intravitreal injection.





After a second injection in left eye, the pacient is 20/20 in both eyes with no correction and OCT showed complete regression of subretinal fluid in both eyes.





Discussion

A bilateral BRVO is a rare manifestation of retinal vascular disorders and is usually associated with infectious causes. This case demonstrates the significance of prompt treatment and routine screening for infectious diseases, such as syphilis, to prevent longterm complications and improve patient outcomes. The use of intravitreal injection was effective in improving the patient's vision and the blood tests were crucial in identifying a potential infectious disease that required further management.