

Case report of bilateral Intermediate uveitis

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Introduction

Multiple sclerosis (MS) is a chronic inflammatory disorder of the central nervous system (CNS) white matter and a common cause of neurological disability in young adults . Optic neuritis is the most frequent ophthalmic manifestation of MS, however intraocular inflammation may also occur.

Methods

A case report of a 37 year-old man presenting with recent onset of photophobia, in addition to gradually progressing vision deterioration in both eyes. Clinical findings on presentation summarized in table (1) with OCT findings in figure (1). On questioning, a medical history of Tonsillectomy & adenoidectomy, Total splenectomy & Multiple sclerosis as reported.

| | Right eye | Left eye |
|----------------------|-----------------------------------|-----------------------------------|
| Visual acuity | 6/60 | 6/60 |
| Anterior chamber | Mild reaction (cells +1) | Mild reaction (cells +1) |
| Pupils | RRR, no RAPD | RRR, no RAPD |
| Intraocular pressure | 10mmHg | 10mmHg |
| Anterior vitreous | Severe vitritis | Severe vitritis |
| Posterior vitreous | Snow balls | Snow balls |
| Central fundus | Cystoid macular oedema | Cystoid macular oedema |
| Peripheral retina | Vasculitis, fibrosis, snowbanking | Vasculitis, fibrosis, snowbanking |

Table (1): Clinical findings

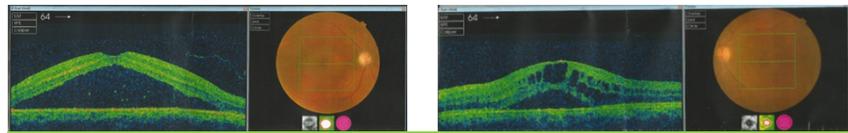


Figure (1): OCT scans of right and left eye on presentation

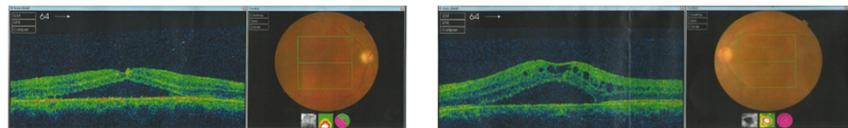


Figure (2): OCT scans of right and left eye 4 weeks after starting treatment

Results

A diagnosis of Intermediate uveitis caused by Multiple sclerosis was made, with Oral steroid started at 60 mg daily with a gradually tapered dose. Visual outcome 2 weeks after starting treatment: 6/12 right eye, and 6/24 left eye, and 4 weeks after starting treatment: 6/12 right eye, and 6/18 left eye., with displayed OCT results, figure (2).

Discussion

Optic neuritis is the most frequent ophthalmic manifestation of MS, however intraocular inflammation may also occur (1). The most common types of uveitis were intermediate (pars planitis) and panuveitis. These findings are in line with Markomichelakis's and Biousse 's findings (2,3)

About 3-27% of patients with multiple sclerosis (MS) develop IU/pars planitis, (4,5) and 7.8-14.8% of patients with IU/pars planitis develop MS (6,7)

References

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