Uveitis

ACUTE RETINAL NECROSIS (ARN) AND VASCULITIS AS POSSIBLE MANIFESTATIONS OF SYPHILIS – CASE REPORT

Inés Artola Canales, Mar Esteban Ortega, Manuel Morales Sánchez, Sergio Pernas Martín, Eduardo Conesa Hernández, Cristina María Sevilla García, Carmen Isabel García Lozano, Manuel Moriche Carretero

Ophtalmology, Hospital Infanta Sofía, Spain

PURPOSE
The purpose of this communication is to remember treponema pallidum as the great simulator, and to present two of its multiple different presentations: vasculitis (case 1) and ARN (case 2).

METHODS
We selected two recent cases, which represent the chameleonic ability of treponema pallidum. Both claimed vision loss. Case 2 had already been diagnosed as bilateral acute anterior uveitis (AAU) with panuveitis in RE in a private center. A complete ophthalmologic exploration was carried out.

RESULTS
We confirmed important vision loss in both cases.

Case 1 showed hemovitreous, vasculitis and retinal haemorrhage in LE. Treatment with corticosteroids was established. Clinical worsening leaded to vitrectomy with vitreous sample extraction and syphilis serology, which came out positive.

Case 2 showed bilateral AAU and a whitish plaque compatible with an ARN in RE (FAG compatible). She was hospitalized under “herpetic acute retinal necrosis” diagnosis and we started treatment with iv acyclovir. During hospitalization, positive anti-treponemic IgG were discovered, and this, added to a VA worsening and persistence of vitritis and inflammatory coriorretinal foci, leaded us to the diagnosis of neurosiphylis.

Both cases had a good response to G penilicin, with vision recovery and vitreo-retinal disease left.

CONCLUSIONS
Eventhough treponema pallidum is not a common etiologic agent in both, ARN and vasculitis, we should always take this agent into account as possible cause due to its numerous and little specific presentations.

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