Medical Retina

BILATERAL PARACENTRAL ACUTE MIDDLE MACULOPATHY FOLLOWINg SARS-CoV-2 Infection

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PURPOSE**:**
Recently, a few cases of paracentral acute middle maculopathy (PAMM) after covid-19 infection in young patients, have been reported.

PAMM has been attributed to the acute phase of ischaemia of intermediate and deep retinal capillary plexuses.

We describe a case of bilateral PAMM as a postinfectious complication.

METHODS**:**
A healthy 29 years old women presented with acute, bilateral blurring vision and scotoma for 3 days.

As personal history, she referred SARS-COV2 infection two weeks before the onset of symptoms.

Her vision was 20/20 in both eyes. The anterior segment examination and funduscopy were unremarkable in both eyes. Blood test, coagulation profile and cranial CT scan were normal.

The OCT revealed normal foveal contour with a perifoveal area of hyperreflective lesions in the inner retinal layers causing shadowing in underlying retina in both eyes.

We referred the case to internal medicine specialists which decided not to anticoagulate at that time.

RESULTS**:**
We reexamined the patient after 3 weeks. Symptomatically, she reported improvement in her vision and the scotoma was vastly less disturbing. The OCT revealed a significant reduction in size of the lesions noted in the inner layers.

CONCLUSION**:**
D-dimer, commonly elevated in coronavirus disease patients, is a fibrin-degradation product which is increased in thrombotic events. There is the hypothesis that the retinal capillary plexus ischaemia leading to PAMM could be secondary to a thrombotic milieu which is translated in the form of raised blood D-dimer levels.

Routine funduscopy, OCT and D-dimer assay in patients with COVID-19 presenting with PAMM could be important to initiate early treatment.

FINANCIAL DISCLOSURE**:** No