CASE REPORT

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This 81-years-old immunocompetent lady presented with a unilateral panuveitis. Visual acuity at presentation was 20/200. Fundoscopy revealed a blurred image, acute retinal necrosis is suspected. PCR-analysis on aqueous humor after anterior chamber tap was highly positive for varicella zoster virus. Treatment with acyclovir 3x750mg intravenously and Brivudine 125mg orally was given. Inflammatory parameters decreased and visual acuity increased up to 20/80. Six months later, a vitrectomy with peeling of an epiretinal membrane was performed; visual acuity increased up to 20/40. There are no signs of active inflammatory disease; anterior chamber tap is negative for VZV.

REFERENCES