KYRIELEIS’ ARTERIOLITIS IN A CASE OF BILATERAL ACUTE RETINAL NECROSIS LEADS TO RETINAL DETACHMENT AND ITS MANAGEMENT

Ophthalmology, Hospital Universitario de Burgos, Spain

Purpose: To describe unilateral periarterial plaque in a case of bilateral acute retinal necrosis (ARN) due to varicella zoster virus (VZV) which lead to retinal detachment (RD) despite off promptly medical and surgical treatment. Methods: Case report. Result: A 47 year-old woman referred to us with visual acuity loss in right eye of hand movements. The right eye showed vitritis, 360º peripheral retinal whitening and periarterial whitish focal Kyrieleis’ plaques and arterial atenuation. Papilitis was observed in the left eye fundus. Serology for HIV, HSV, CMV, syphilis was negative. Polymerase chain reaction (PCR) of aqueous humor was positive for VZV. Intravenous acyclovir followed by oral antiviral along with systemic steroids, foscarnet intravitreal and parsplana vitrectomy with silicone oil endtamponade was performed 15 days after medical treatment was initiated. Two months after first vitrectomy, another vitrectomy was performed to remove silicone oil and a band condensation attached to medial peripheral retina. Two weeks later, she developed a RD resolved by scleral buckle and 23-gauge posterior vitrectomy, endophotocoagulation and silicone oil endtamponade. Conclusion: Combination intravenous and intravitreal antiviral therapy in addition to posterior vitrectomy should be consider for patients with ARN sindrome due to its rapid progression and high likelyhood of RD.