A RARE CASE WITH ORBITAL APEX SYNDROME, ANTERIOR UVEIT AND NECROTIZING SCLERITIS DUE TO HERPES ZOSTER OPHTHALMICUS

E. Aydin1, M.B. Yilmaz2, S.S. Imre2, F. Koc2, L. Kazancı2, A.T. Ozturk3

1Ophthalmology, İzmir Katip Çelebi University Faculty of Medicine, Turkey
2Eye Clinic, İzmir Katip Çelebi University, Atatürk Training and Research Hospital, Turkey
3Ophthalmology, Dokuz Eylül University Faculty of Medicine, Turkey

Purpose: To describe a case of orbital apex syndrome, anterior uveitis, secondary glaucoma, corneal dellen and necrotizing scleritis following an attack of herpes zoster ophthalmicus, and the placement of an allogeneic scleral graft. Methods: Retrospective chart review. Results: A 64-year-old male patient with blepharoptosis of his right eye and multiple vesicles on the forehead, nose and cheeks, ophthalmoplegia, blepharoptosis, and exophthalmia was eventually diagnosed with ophthalmic zona with orbital apex syndrome. After the treatment with systemic antivirals and steroids, there was complete recovery of the unilateral vesicular eruption, ophthalmoplegia and ptosis at the 3rd month follow-up. However, anterior uveitis, necrotizing scleritis, secondary glaucoma and corneal dellen developed during follow-up. At the 9th month, allogeneic scleral grafting was performed due to progression of the scleral thinning. Graft vascularization was completed. Conclusions: Careful and long-term follow-up of patients with ophthalmic zona is required for possible ophthalmic complications of varicella zoster virus infections. An allogeneic scleral graft might be placed due to the development of necrotizing scleritis.