A CASE REPORT: TOTAL OPHTHALMOPLEGIA AND OPTIC NERVE INVOLVEMENT DUE TO HERPES ZOSTER
A. Yaman¹, O. Oner², C. Kucukerdonmez², S. Men³, M. Soylev¹
¹Ophthalmology, Dokuz Eylul University, Turkey
²Ophthalmology, Medical Park Hospital, Turkey
³Radiology, Dokuz Eylul University, Turkey

Purpose: To present a case of orbital apex syndrome associated with herpes zoster ophthalmicus. Design: Observational case report. Methods: A 67 year-old female with total ophthalmoplegia who was diagnosed as herpes zoster ophthalmicus was evaluated and treated. Results: Our patient was initially applied to emergency service because of nausea, headache and severe pain on left eye. As the painful eye movements and the T-sign at ultrasound suggested posterior scleritis, oral corticosteroid treatment was started. On first week of the treatment, erythematous rash with vesicles on the left eyelid was identified which was diagnosed as herpes zoster ophthalmicus (HZO). Corticosteroid treatment immediately stopped; oral and topical antiviral was started. On the third week; visual acuity deteriorated on the left eye with the development of eyelid edema, blepharoptosis, exophthalmos and total ophthalmoplegia despite the treatment. The left pupil was fixed and dilated with a reverse RAPD. MRI showed diffuse enhancement of orbit involving the extraocular muscles, optic nerve, nerve sheath and orbital soft tissues. Oral antiviral was replaced with intravenous antiviral and antibiotic therapy considering the diagnosis of orbital cellulitis. As there was no response to treatment of a month orbital biopsy was performed which showed inflammatory cell infiltration, systemic steroid treatment was added. After two months of treatment with corticosteroids ptosis and ocular motility improved almost completely and VA improvement was slight due to a previous macular scar. Conclusions: Orbital apex syndrome is rare and severe manifestation of HZO which can occur despite antiviral treatment. MRI is essential to detect and follow the disease. Keywords: Herpes zoster ophthalmicus, Orbital apex syndrome, MRI findings.