



ATYPICAL OPTIC NEURITIS FOLLOWING ATT— A CASE REPORT.

Ophthalmology

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ABSTRACT

We report a case who presented with atypical features of Optic neuritis about 6 M after starting Antitubercular treatment comprising of multiple drugs like Ethambutol, INH, Pyrimethamin and Rifampicin for his non-specific lung lesion.

KEYWORDS

CASE REPORT-

44 yr old male patient who is a teacher by profession came to ophthalmology OPD of ASCOMS & Hospital on 20 December 2023 with C/C of sudden diminution of vision in both eyes for last 1 week and dull pain. Initially he observed blurring of vision in 1 eye which was followed by involvement of other eye also in 2 days. His vision was gradually deteriorating.

- Past History**— He is a known diabetic for past 10 years. He had hemoptysis 10 Months back(2 bouts) for which he was investigated. Right lung upper lobe cavitation lesion was diagnosed in June'2023 for which specimen was taken from wedge of Right upper lobe and H/P examination of specimen revealed AFB negative & no evidence of malignancy also.
- Diagnosis of Necrotizing granulomatous inflammation was made for his lung lesion.

Medical History— Patient is on oral hypoglycemic drugs

- He was put on ATT(combination of Rifampicin, ethambutol, INH, pyrimethamine) for his lung lesion though none investigation revealed that he had Tuberculosis, till 20/12/2023 after which it was stopped and he was prescribed multivitamins

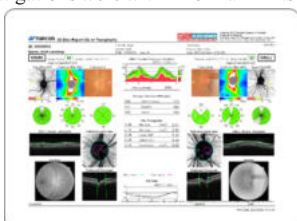
Ocular Examination—

(20/12/2023)

- V.A-OD-6/36 } BCVA-same both eyes
- OS-6/24(P) }
- EOM—painful in all directions
- Colour vision—red-green hue defective
- Contrast sensitivity--reduced
- Ant. Segment—Nuclear Sclerosis grade II with blue dot cataract both eyes.
- IOP(AT)-14mm(OD)
- 16mm(OS)
- Fundus exam-hyperemic disc and tortuous vessels, BGDR in Left eye

Investigations

- OCT ONH/RNFL was performed--inconclusive
- MRI Brain with orbits---suggested small vessel disease indicating Ischemic insults.
- His vision continued to drop till it was 2/60 both eyes. He was advised other investigations like:
- B 12, TSH, NMO & MOG antibodies,
- Ca,P, ALP, SGPT, LIPID PROFILE, UREA, CREATININE, ESR
- ESR was 48mm/1sthr;
- Bl sugar(F&PP) was 144&188,
- S.Triglycerides—349mg/dl.
- Rest all investigations were within normal limits



OCT ONH/RNFL at presentation

Treatment

Pulse steroid therapy was started --- I/V Solumedrol-500mg×5 days
Followed by Oral tab Wysolone 40mg×3wks
30mg×3wks
20mg×3wks
10mg×3wks
5mg×3wks

He was put on Inj Insulin to take care of his hyperglycemic status. In addition, he was on Nepafenac eyedrops and oral neurobion forte tablets.

6m Followup

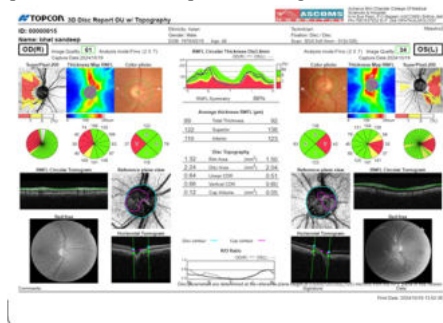
BCVA--6/9 B/E

IOP— 22mm-OD } Applanation
24mm-OS }

Fundus exam--revealed temporal disc pallor in both eyes

Perimetry-- WNL

Followup OCT—showed temporal thinning & RNFL thinning



Patient has been put on Anti-glaucoma therapy and frequent follow-ups have revealed no further progression of disease.

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