Joint Event

32nd International Congress on

Vision Science and Eye

5<sup>th</sup> International Conference on

**Advances in Neonatal and Pediatric Nutrition** 

37th World Cardiology Conference

**September 26, 2022** 

**WEBINAR** 

Maryam I. Toma Al Najjar, Gen Med (Los Angeles) 2022, Volume 10

## Bilateral anterior uveitis due to latent reactivation of Varicella Zoster Virus

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**Introduction**: Latent reactivation of <u>Varicella Zoster Virus</u> (VZV) infection is one of the causes of anterior uveitis. The patient is usually presented with unilateral iridocyclitis with elevation of intraocular pressure, and later sequences of sectorial iris atrophy after recurrent attacks.

**Case Presentation**: We are reporting a case of unusual presentation of bilateral anterior uveitis due to latent reactivation of VZV in an immune competent patient. A 44-year-old man was referred to our hospital, with a history of three weeks of bilateral eye pain, redness and <u>photophobia</u>. The patient had been treated in another clinic by topical steroid eye drops without improvement.

On examination, the best corrected visual acuity was 20/60 in each eye. Anterior segment examination: Marked ciliary injection, corneal epithelial edema, and fine keratic precipitates, flare +2, and anterior chamber reaction was +3 cells in each eye and intraocular pressure was 19 mmHg in each eye. Fundus examination was within normal.

The patient underwent full review of systems and complete work up to exclude infectious and autoimmune diseases. After three days, the blood tests revealed a high titer of VZV, more than 2000 mIU/ml. The other blood tests returned within normal limits.

**Treatment**: We prescribed the patient oral Val acyclovir 1gm twice daily and besides the oral treatment, we prescribe topical steroid eye drops, antiglaucoma eye drops on the second visit as the intraocular pressure spiked to 35 mmHg in the right eye and 38 mmHg in the left eye.

**Follow Up**: On examination, the best correct visual acuity after three weeks of oral and topical treatment, the best corrected visual acuity had been improved to 20/20 in each eye, anterior segment examination showed clear anterior chamber with fine pigmentation on endothelium, intraocular pressure was within normal limits. We taper the topical treatment and we kept the oral Val acyclovir till the next visit in two months.

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## **Biography**

Maryam I. Toma Al Najjar is the youngest Ophthalmologist graduated in the Middle-East and obtaining the Arab Board of Health Specializations in Ophthalmology and the first Paediatric Ophthalmologist who is internationally subspecialize in Ocular Genetics, Uveitis and Ocular immunology diseases besides the pediatric ophthalmology. She finished her medical degree at younger age at 22-year-old from Al - Nahrain University in Baghdad, Iraq. Later on, she graduated from McGill University with distinction in 2018. She discovered a new genetic mechanism for Leber Congenital Amaurosis and her discovery was published in Nature Journal/Scientific reports in March 2018. She completed her Clinical Paediatric Ophthalmology Fellowship and Ocular Genetics Fellowship at McGill University while she finished the Uveitis and Ocular immunology Fellowship at University de Montreal. In addition to be a missionary ophthalmologist, she dedicated clinical scientist to fight blindness in everywhere. She is a multitalented physician, she plays Harp, Organ, Piano; and a skilled poet and painter.

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