

# POSTERIOR SCLERITIS ASSOCIATED WITH SEROUS RETINAL DETACHMENT AFTER CHIKUNGUNYA VIRAL FEVER: CASE REPORT

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## Introduction

The Chikungunya virus (CHIKV) is a mosquito-borne viral disease caused by an arbovirus in the Togaviridae family. Ophthalmological symptoms can be observed in the acute or chronic phases and ocular involvement is common, from conjunctivitis to optic neuritis, and we will demonstrate in this report one of its possible manifestations

## Methods

Case description, retinography, autofluorescence retinography, OCT and ultrasound B-Scan images.

## Results

ASOM, female, 38 years old, without comorbidities, arrives at the ophthalmologic clinic with a complaint of low visual acuity in her left eye (LE) for 2 weeks associated with pain, mainly during ocular mobility. She reports a previous history of acute fever and polyarthralgia for 3 months with chronic pain since then. She presented visual acuity with correction in OD of 20/20 and 20/200 in LE. Preserved ocular motility and biomicroscopy showed only conjunctival hyperemia in LE. At funduscopy, RE without alterations and in LE presented an elevated area above the papilla.

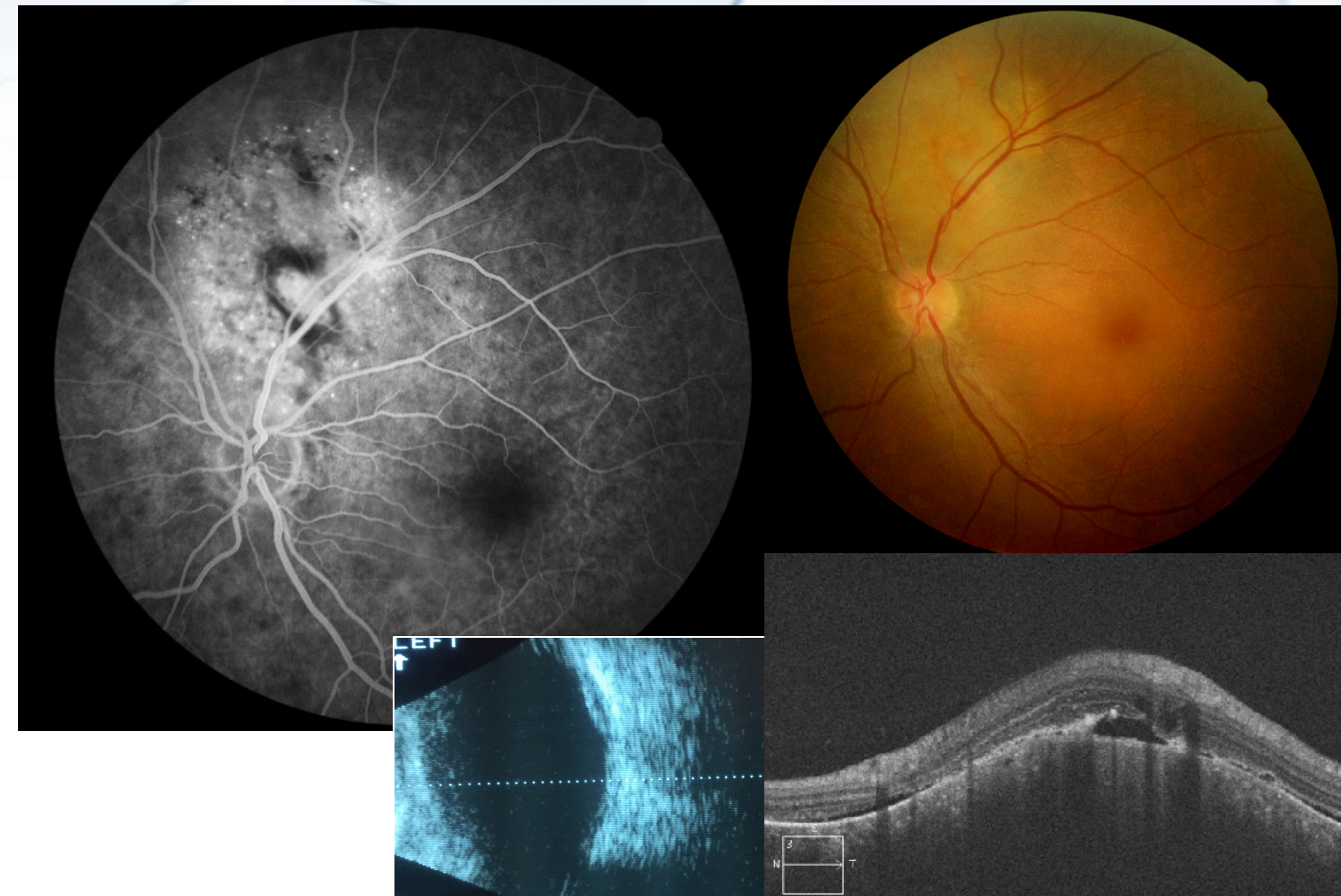
In laboratory tests; VDRL, FTabs, anti-HIV, ANA and FR negative and serology for Chikungunya IGG positive IGM negative by the ELISA method, confirming previous viral condition.

In the angiography, we found in the upper region of the papilla an area of pooling-type hyperfluorescence suggestive of serous retinal detachment, confirmed in the OCT and in ocular ultrasound, we identified a scleral thickening, suggestive of posterior scleritis.

Therapy with prednisone 1mg/kg/day and topical prednisolone was started and referred to the rheumatology service where they started the treatment with methotrexate. Patient returns with improvement in pain and visual acuity reaching 20/30 in LE and remission of serous retinal detachment.

## Discussion

Due to the incidence of chikungunya fever in our environment, we must pay attention to its ophthalmological changes and always consider it as a differential diagnosis when it is associated with a previous clinical history of fever and polyarthralgia.



## References

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## Keywords

Chikungunya, uveitis, scleritis, retina