

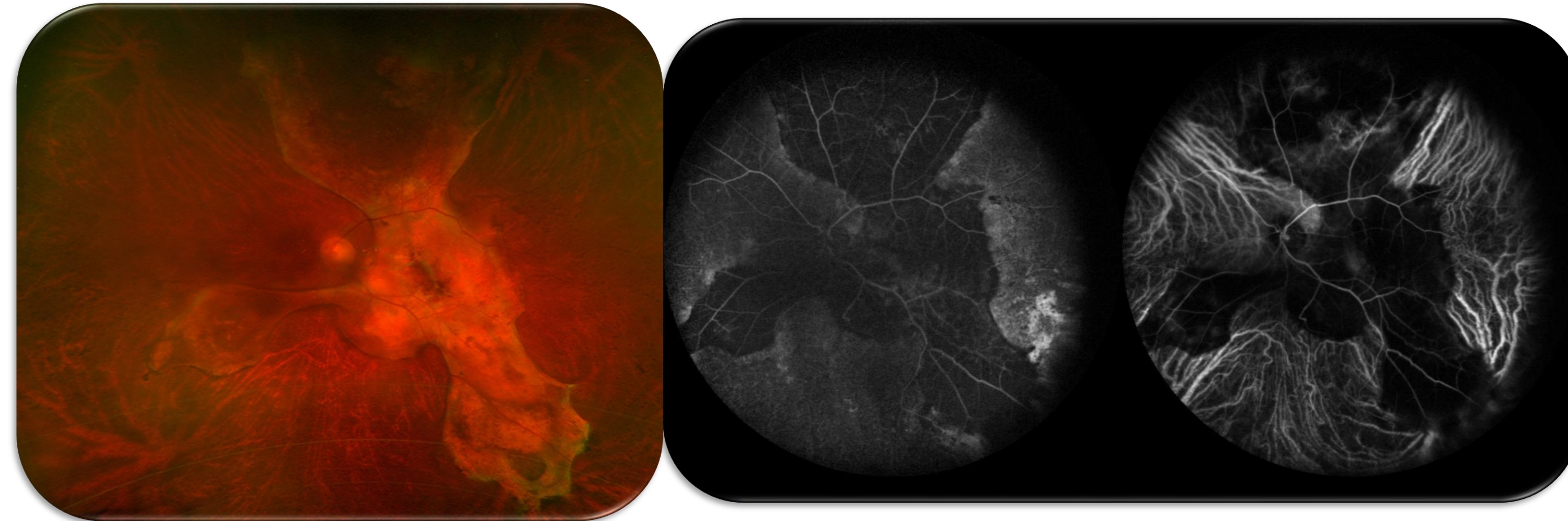
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**INTRODUCTION:** Peripheral exudative hemorrhagic chorioretinopathy (PEHCR) is rare disorder characterized by choroidal and retinal peripheral lesions associated with subretinal or sub-RPE hemorrhages and/or subretinal exudation. Exudation and vitreous hemorrhage can lead to decrease in visual acuity<sup>1,2</sup>.

**PURPOSE:** To present a rare case of PEHCR associated with vitreous hemorrhage and peripheral lesions extending towards the posterior pole, evaluated with multimodal imaging.

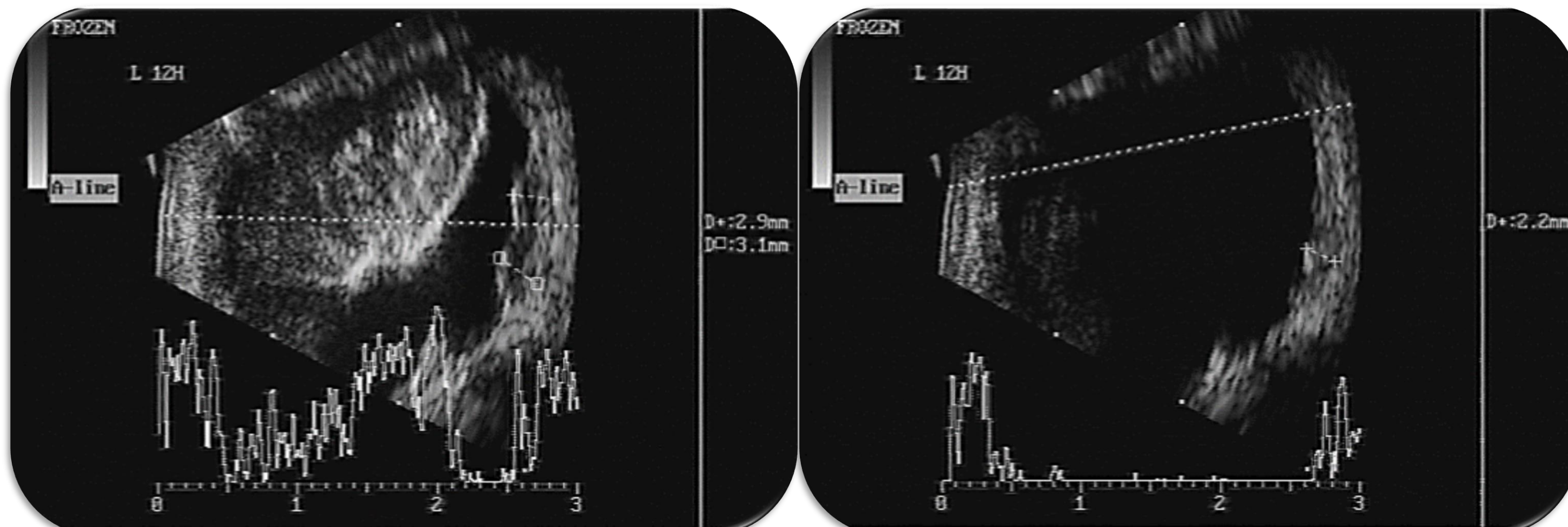
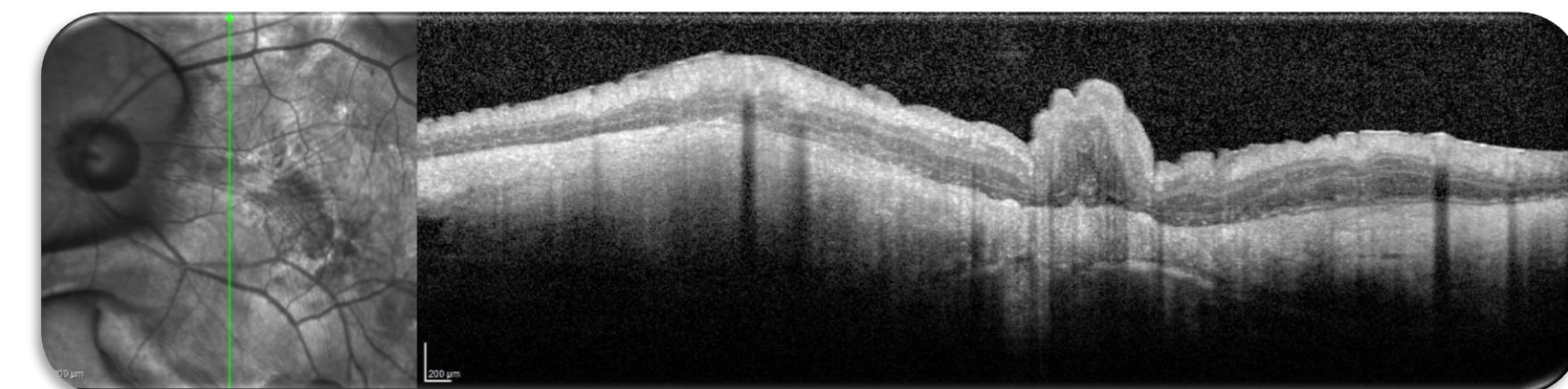
**METHODS:** Case report

**RESULTS:** A 67-year-old male patient referred to Centro Brasileiro da Visão (CBV)/Hospital de Olhos, Brasília, Brazil, for evaluation of visual loss due to vitreous hemorrhage. He complained of decreased vision in the left eye for approximately one month, with no systemic symptoms, no history of ocular trauma, and negative hematologic investigation. Upon examination, best-corrected visual acuity was 20/30 in the right eye (RE) and light perception in the left eye (LE). Binocular indirect ophthalmoscopy revealed no alterations in the RE and dense vitreous hemorrhage in the LE. Ocular ultrasound was performed at presentation and during follow-up, which demonstrated dome-shaped choroidal lesions in periphery and posterior pole, with a medium reflective heterogeneous internal structure, with size reduction during follow-up.



Posterior vitrectomy was performed, allowing better assessment for multimodal imaging. Wild-field retinography showed multiples exudative lesions in peripheral retina, posterior pole and macular area. ICGA and FA showed blockage of choroidal fluorescence related to massive exudation and window defect from peripheral atrophic RPE changes, with no visualization of choroidal neovascularization or polyps. OCT revealed increased macular thickness and subretinal fibrosis.

**DISCUSSION:** In this report, we document the evolution of a challenging case of unilateral PEHCR in a 67-year-old man who, after vitrectomy for vitreous hemorrhage and multimodal imaging analysis, was found to have lesions resembling PEHCR in the peripheral retina, extending towards the posterior pole and macular area.



**References:**

1. Vandfonteyne S, Caujolle J, Rosier L, et al. Diagnosis and treatment of peripheral exudative haemorrhagic chorioretinopathy. Br J Ophthalmol 2019;0:1–5.
2. Shields CL, Salazar PF, Mashayekhi A, et al. Peripheral exudative hemorrhagic chorioretinopathy simulating choroidal melanoma in 173 eyes. Ophthalmology 2009;116:529–35.