

A case of coats-like ocular toxocariasis

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Abstract

Purpose: To report a case of coats-like ocular toxocariasis clinical feature and treatment.

Methods: We present a case of ocular toxocariasis that occurred in a 22-year-old man misdiagnosed with coats disease. The patient underwent a full ophthalmic examination, a complete blood count; blood chemistry tests for Toxocara immunoglobulin (Ig)G, Toxoplasma IgM, and Toxoplasma IgG; an assessment of total IgE levels; chest X-rays; measurements of angiotensin converting enzyme, antinuclear antibody, hepatitis B surface antigen antibody, and anti-hepatitis C virus antibody levels; and a questionnaire about eating habits and whether the patient had pets.

Results: The patients had a pets feeding history. The patient's left eye had a visual acuity of 0.3 and an intraocular pressure of 10 mmHg. Fundus examination showed a large amount of yellow-white submucosal exudation and exudative retinal detachment, epiretinal membrane traction macular edema, optic disc anterior membrane were all existed. Vitrectomy was performed. During the vitreous surgery, the vitreous body showed a thin gauze-like change, and the yellow-white granuloma was seen in the posterior pole. Through the intraoperative pressure, multiple granulation lesions were found in the peripheral retina. One week after vitrectomy, the retina was flat, the macular edema was reduced, and the visual acuity was increased to 0.5.

Conclusion: The history of pet feeding, gauze-like changes in the vitreous, and typical yellow-white granuloma are strong evidence for the diagnosis of ocular ascariasis. Detailed medical history inquiry, careful fundus examination, blood and intraocular fluid antibody monitoring, UBM examination can more accurately help our diagnosis, to avoid missed diagnosis and misdiagnosis

Biography:

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