Choroidal tuberculoma

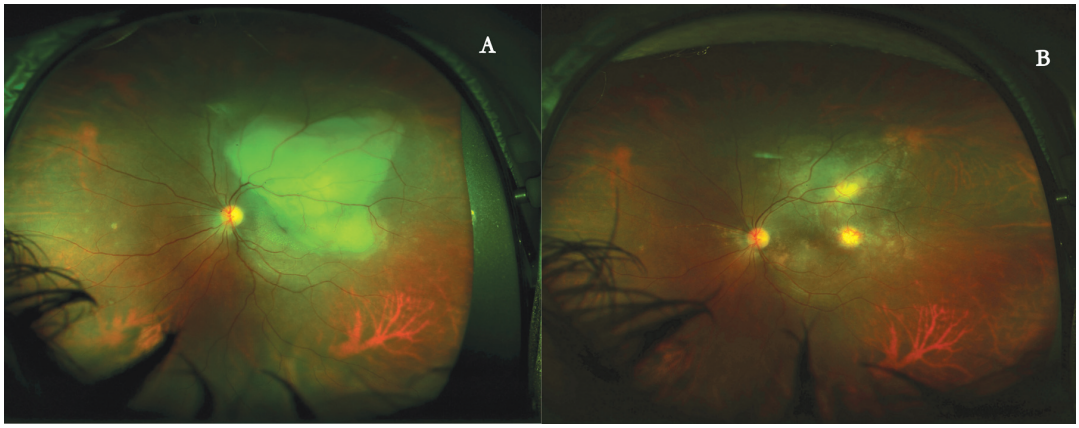

FIG 1. Fundus as seen at the time of diagnosis (A) and after treatment (B)

A 35-year-old woman with pulmonary tuberculosis complained of blurred vision in the left eye for 1 month. Her best corrected visual acuity (BCVA) was finger counting close to her face. She did not have diabetes, was not on any immunosuppressive drugs and her HIV serology was negative. She was taking antitubercular treatment (ATT) regularly for 5 months (2 months intensive and 3 months continuation phase). Her fundus showed a large subretinal yellowish choroidal tuberculoma with overlying exudative retinal detachment and hard exudates surrounding the fovea (Fig. 1A). Optical coherence tomography (OCT) showed subfoveal fluid. Differential diagnoses of a subretinal abscess or granuloma, disseminated bacterial or fungal infection, nodular posterior scleritis and sarcoid granuloma were considered. As the patient was on ATT, tubercular granuloma was also considered. Oral prednisolone 1 mg/kg was started under ATT cover after consultation with the physician. The lesion resolved after 1 month with two small atrophic patches in the choroid (Fig. 1B). OCT revealed resolution of subfoveal fluid and some damage to the photoreceptors. BCVA improved to 6/12. The oral steroids were tapered and stopped. At last follow-up, the patient had completed ATT.

The choroid is involved in approximately 1% of patients with pulmonary tuberculosis.[1] Concurrent therapy with ATT and systemic steroids helps in resolution of the choroidal tuberculoma. Late presentation and subfoveal fluid may suggest poor visual prognosis. Patients with tuberculosis and loss of vision should be referred to ophthalmologists, as an early diagnosis and appropriate management may improve final visual outcome.

ACKNOWLEDGEMENT

We acknowledge the help and technical guidance of Trina Sengupta Tripathy.

REFERENCE

1 Chuka-Okosa CM. Tuberculosis and the eye. *Niger J Clin Pract* 2006;**9:**68–76.

KOUSHIK TRIPATHY, ROHAN CHAWLA
Dr Rajendra Prasad Centre for Ophthalmic Sciences
All India Institute of Medical Sciences
New Delhi
koushiktripathy@gmail.com