



Different Affections of Ocular Tuberculosis

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Abstract

Introduction: Ocular tuberculosis is a rare serious affection that can affect the visual function.

Materials and Methods: Retrospective study including 12 patients.

Results: Ocular tuberculosis affected different layers of the eye with heterogeneous clinical manifestations and prognosis.

Discussion: Uveitis is the most common manifestation of the ocular tuberculosis, but this disease can affect all the anatomical structures of the eye with variables symptoms and prognosis.

Conclusion: Ophthalmological examination must be done for every patient who suffers from systemic tuberculosis.

Introduction

The ocular localization of tuberculosis is rare and can be seen in the context of a primary tuberculosis infection or secondary lesions to general tuberculosis. The clinical manifestations are polymorphic and can affect all the layers of the eye and lead to serious visual sequelae in the absence of an early diagnosis and appropriate treatment.

The aim of our work is to describe the clinical and paraclinical particularities. Indeed, the prognosis and the outcome of treatments might be improved.

Materials and methods

This was a retrospective study, conducted at the ophthalmology department of the military hospital of Marrakech, Morocco. Over a period of 4 years, including twelve patients. All our patients have had a complete ophthalmological check-up. Additional examinations were requested as needed: a phthysiological, biological, serological (HIV), radiological and fluorescein angiography assessment.

Results

Twelve patients were included in the study. They were seven men and five women with an average age of 37 years old.

The main symptoms are: decrease in visual (8 cases), visual blurring (3 cases), fever (2 cases), eye pain (4 cases) and eyelid nodule (1 case). The ophthalmological examination showed granulomatous uveitis in 1 case; necrotic scleritis in 1 case; a papillary granuloma in 1 case; A palpebral nodule in 1 case; interstitial keratitis in 3 cases; multifocal choroiditis in 1 case; bouchut nodules in 3 cases (image 1) and serpiginous choroiditis in one case (images 2 and 3).

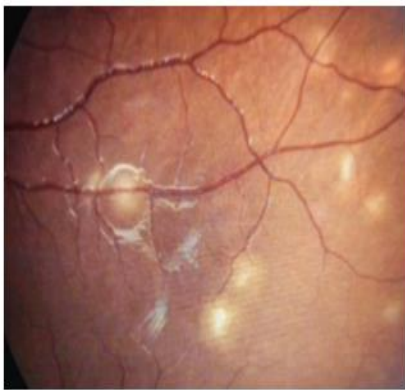
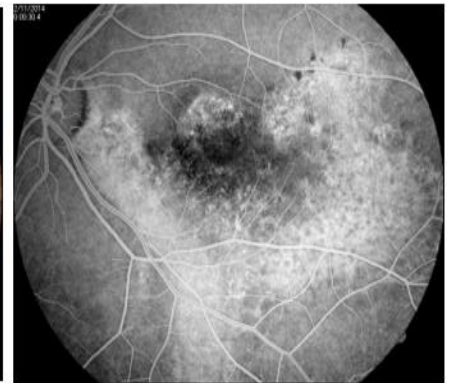


Image 1: Bouchut Nodules



Images 2 and 3: Serpiginous Choroiditis

Tuberculin IDR was positive in 8 cases. A Quantiferon-TB test carried out in five patients was positive (5/5). Human immunodeficiency virus serology was negative for all our patients. Antituberculosis treatment was given for an average duration of 8.5 months, associated with corticosteroids in 4 cases. The evolution was favorable in 10 cases with regression of clinical signs. Two patients had sequelae : persistence of decreased acuity in and visual blurring.

Discussion

Ocular tuberculosis can affect the various anatomical structures of the eye or its annexes. Involvement of the uvea is the most common manifestation. The diagnosis of ocular involvement is difficult in the absence of general manifestations. The efficacy of anti-tuberculosis treatment in cases of presumed ocular tuberculosis is an additional argument of this diagnosis.

Conclusion

Tuberculosis is a serious disease, ocular localization is very rare and can badly affect the visual function. Our study shows the importance of an ophthalmological examination for the patients that have systemic tuberculosis.