

## Abstract 171

### SURGICAL MANAGEMENT OF EPIRETINAL MEMBRANE WITH WIDE RETINAL FIBROSIS SECONDARY TO OCULAR TOXOPLASMOSIS: A CASE REPORT

Oral

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#### **Purpose:**

To describe a surgical case of an epiretinal macular membrane (ERM) associated with a wide fibrosis involving the posterior pole and the peripheral retina, secondary to toxoplasmosis chorioretinitis and vasculitis.

#### **Methods:**

A 40 yo Nigerian man was referred to the ophthalmology department of Piero Palagi hospital for a monolateral thickened macular pucker with a wide epiretinal fibrosis, associated to multiple pigmented chorioretinal scars on the temporal side of the macula and signs of previous vasculitis without any sign of current inflammation. A preliminary diagnosis of toxoplasmosis infection was made based on the clinical findings. Antibiotic prophylactic therapy was prescribed. A lens sparing pars plana vitrectomy with ERM peeling without air tamponade and with a collection of the vitreous sample for parasite testing was performed. Patient's blood was drawn for serological testing.

#### **Results:**

Vitreous sample analysis did not confirm any parasitic infection; serological tests confirmed previous toxoplasmosis infection. At 3 months the BCVA of this patient slightly improved. A repeat Spectral-domain optical coherence tomography (SD-OCT) test showed a reduction in central macular thickness.

#### **Conclusions:**

Ocular toxoplasmosis infection could have heterogeneous clinical ocular manifestations, one of these could be a wide epiretinal fibrosis. Vitrectomy combined with ERM peeling is an effective treatment for ERM secondary to ocular toxoplasmosis; gas endotamponade could be avoided to prevent further vitreal inflammation and retinal contractions.