Abstract 182

VITREOUS BIOPSY AND MACULAR CHORIORETINAL BIOPSY FOR DIFFERENTIATING VIRAL RETINITIS AND VITREORETINAL LYMPHOMA

Oral

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Purpose:

To describe the role of vitreous and macular chorioretinal biopsy in differentiating viral retinitis and vitreoretinal lymphoma.

Methods:

A 56-year-old, profoundly immunosuppressed, HIV+ patient was referred by the Uveitis to the Vitreoretinal Service at Moorfields Eye Hospital reporting sudden painful blind left eye. Urgent pars plana vitrectomy (PPV), vitreous biopsy and intravitreal Foscarnet were performed for dense vitreitis. PPV with macular chorioretinal biopsy, endolaser and silicone oil was performed, given the lymphoma suspect, the distribution of the subretinal infiltrates in the macular area and the blind eye.

Results:

The immunocytochemistry of the vitreous sample revealed acute-on-chronic inflammatory findings. In particular, there were mostly CD3+ and CD5+ lymphocytes, but also scattered CD79a+, CD20 lymphocytes and CD68+ hyalocytes. The macular chorioretinal biopsy showed a chronic inflammatory cell infiltrate, predominantly composed by macrophages and T-cells, with only occasional CD20+ B-cells. The results were felt in line with suspect of a destructive, reactive process in keeping with viral retinitis.

Conclusions:

Vitreous and chorioretinal biopsy may support the differential diagnosis in atypical scenarios of severe retinitis in profoundly immunosuppressed HIV patient. Macular chorioretinal biopsy has a role in blind eye to support the diagnosis.