

Case Report

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Active chorioretinal toxoplasmosis

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Description

A systemically healthy 35-year-old female has complained of blurry vision of the Right Eye (RE) over the past week. The best-corrected visual acuity was 6/120 in both eyes. Mild conjunctival injection, fine keratic precipitates, and 1+ cell in the anterior chamber without hypopyon was detected in the RE. In dilated fundus examination of the RE, vitritis obscured portions of the retina and in the macular region, a creamy, grayish-white, raised retinal lesion was present adjacent to a chorioretinal scar (Figure 1A). In the left eye, two macular chorioretinal scars were seen (Figure 1B), findings that are consistent with chorioretinal toxoplasmosis. The diagnosis was supported by the results of the serologic evaluation. *Toxoplasma gondii* IgG and IgM antibodies were positive. Such lesions are typical of active chorioretinal toxoplasmosis. The patient was treated with intravitreal injection of clindamycin and dexamethasone, oral trimethoprim-sulfamethoxazole, and azithromycin. After 3 months complete healing of the active lesion occurred.

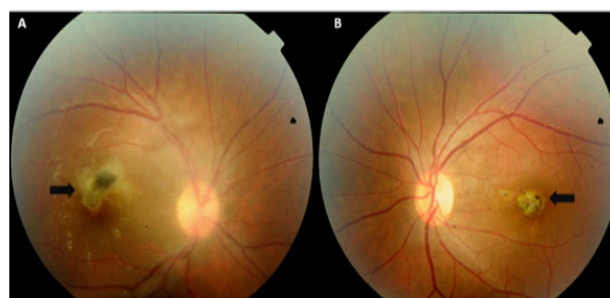


Figure 1 (A,B):