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Retinal vasculitis in juvenile idiopathic arthritis

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BACKGROUND

Anterior uveitis is the main ophthalmologic complication in patients with juvenile idiopathic arthritis, however there are other complications such as retinal vasculitis present in approximately 2.5% of JIA patients. We report a case of retinal vasculitis in a girl with JIA, which despite the institution of early treatment, visual loss was important.

CASE REPORT

L.H., female, 11 years, 60kg, diagnosis of JIA from 3 years of age with ocular complication (visual eye loss) by chronic anterior uveitis. It was attended in March 2019 by a picture of arthritis in both knees and decreased visual acuity in the left eye with onset 6 months ago, HSV: 38, PCR: 12, FAN 1/320 nuclear fine dense dotted, negative FR. He was using methotrexate 6cp / week, folic acid 2cp / week and presnisone 5mg / day. In the laboratory of 03/22/2019 the result of the test of Hemosedimentação Speed: 38, C-Reactive Protein: 12 and Positive Anti-Nuclear Factor was demonstrated, demonstrating an active state of the disease. After a month, she developed orbital hyperemia, pain and loss of visual acuity in the right eye and retinography evidencing retinal vasculitis (Fig 1). Patient received pulse of methylprednisolone 1gr / day for three days, prednisone 1mg / kg and Adalimumab.

CONCLUSION

Ophthalmologic evaluation in patients with JIA should be careful and rigorous in order to not only diagnose anterior uveitis, but also other complications such as retinal vasculitis.