1

A boat not to miss

Joan Marie Palikat, Syed Shoeb Ahmad, Mimiwati Zahari

Department of Ophthalmology, University Malaya Medical Centre
Department of Ophthalmology, Queen Elizabeth Hospital, Kementerian Kesihatan Malaysia

ABSTRACT

Objective: Clinical suspicion of giant cell arteritis (GCA) should be high in the elderly presenting with central retinal artery occlusion (CRAO). **Method:** a Case report. **Results:** A 76-year old gentleman presented with sudden, painless vision loss in the left eye (LE) for 1 day. He has had a long-standing poor vision in the right eye (RE) which remained unchanged. His visual acuity (VA) was CF (RE) and 3/60 (LE). The relative afferent pupillary defect was positive on the left. An old macular scar was noted on the RE while the LE macula was pale with the presence of a cherry-red spot. He was diagnosed with LE CRAO and managed accordingly. Upon review ten days later, VA had deteriorated to HM bilaterally. Further history revealed that he had a low-grade fever, headache and pain on combing his hair for the past 3 weeks. On examination, previously unnoticed superficial temporal arteries (STAs) were prominent, firm and pulsatile bilaterally. A new finding of a pallid oedematous disc with peripapillary splinter haemorrhages was seen in the RE. Biochemically, there was an elevated ESR 107mm/hr and CRP 126.7mg/dL. A presumptive diagnosis of RE arteritic anterior ischemic optic neuropathy and LE CRAO secondary to GCA was made. High-dose corticosteroid was commenced. An STA biopsy showed characteristic inflammatory changes but no multinucleated giant cells. Over time, the right optic disc swelling resolved and VA was 1/60 (RE) and HM (LE) on his last follow up. **Conclusion:** Increased clinical suspicion of GCA in the elderly presenting with CRAO is imperative to avert fellow eye involvement.

KEY WORDS:
Giant cell arteritis, central retinal artery occlusion, arteritic anterior ischemic optic neuropathy

2

A case on a rare cause of fungal keratitis

Sivashangkari Sugumaran

Hospital Sungai Buloh, Kementerian Kesihatan Malaysia

ABSTRACT

Objective: To present a case on a rare cause of fungal keratitis. **Method:** a Case report. **Results:** A 36 years old lady complaint of Right Eye sudden pain and reduced vision for the past four days. Patient has a history of dust entered the eye while burning trash a few days prior to presentation. The patient is a known case of both eye lattice dystrophy with right eye corneal scar since 2015. On examination, right eye vision was hand movement. There is a central corneal ulcer measuring 3.5mm vertically and 3.5mm horizontally with an overlying similar size epithelial defect. There is also small central descematocele with hypopyon 3mm. Corneal scraping culture and sensitivity revealed Penicillium sp. Left eye unremarkable. Patient has no predisposing factor. **Conclusion:** We treated this patient with intensive topical and systemic antifungal which resulted in resolution of the ulcer with scarring. The incidence of keratitis due to Penicillium.sp is very low. Hence we report this case.