

# Birdshot Chorioretinopathy: Report of A Case

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## ABSTRACT

**Birdshot chorioretinopathy is a rare idiopathic pathology. It is characterized by diffuse white spots in the retina and especially in the middle periphery. All patients are carriers of antigen HLA 29. Its treatment is based in the administration of corticosteroids and suppressant medication. We report the case of a young patient who had birdshot chorioretinopathy.**

**Keywords:** Birdshot chorioretinopathy, corticosteroids, HLA 29, white spots in the retina.

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## I. INTRODUCTION

Birdshot chorioretinopathy is a rare idiopathic pathology. It is characterized by diffuse white spots in the retina and especially in the middle periphery. Its treatment is based in the administration of corticosteroids and suppressant medication. We report the case of a young patient who had birdshot chorioretinopathy.

## II. CASE REPORT

We report the case of a young patient of 29 years old. He consults in the emergency room for a bilateral progressive visual loss. The anterior segment examination was normal in both eyes. On the fundus there is hyalitis, and diffuse yellowish-white spots on the fundus. On retinal angiography and Angio-ICG, the lesions are hypofluorescence with vasculitis. Macular OCT showed macular edema in both eyes. A genetic test revealed the presence of HLA 29 antigen. The birdshot diagnosis was retained. The patient was treated with 3 boluses of corticosteroid therapy then he was put on an immunosuppressant treatment. 1 month after treatment the visual acuity rise to 10/10. The evolution was marked by disappearance of the lesions on the fundus and regression of macular edema.

## III. DISCUSSION

Birdshot chorioretinopathy is a rare idiopathic pathology. It is characterized by diffuse white spots in the retina and especially in the middle periphery. It occurs in young healthy patients. All patients are carriers of antigen HLA 29. It is linked to an inflammatory attack of the choroid. they are manifested by a moderate decrease in visual acuity with vitreous syndrome. The examination of the anterior segment

is often normal as we can find sometimes a moderate anterior uveitis, the examination of the fundus found often hyalitis, diffuse white spots on the fundus with vasculitis and Optic disc edema. As it can be complicated by inflammatory macular edema and choroidal neovascular. ICG angiography shows diffuse hypofluorescents lesions on the fundus.

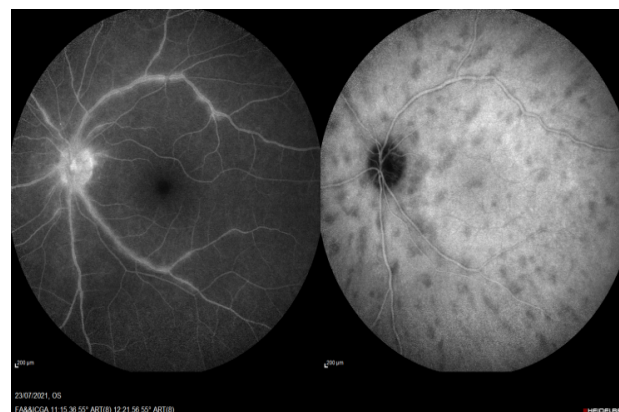


Fig. 1. Indocyanine green (ICG) angiography and fluorescent angiography reveals hypofluorescents lesions and vasculitis.

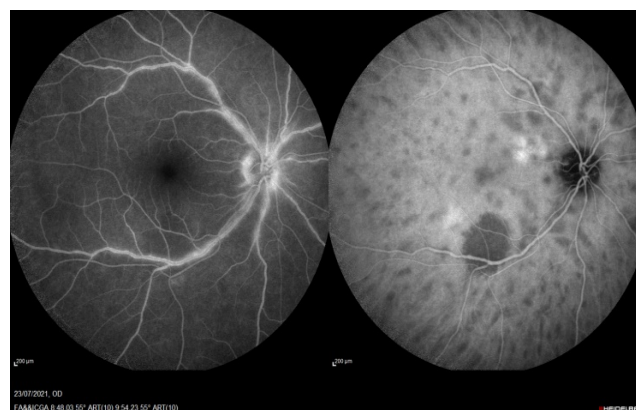


Fig. 2. Indocyanine green (ICG) angiography and fluorescent angiography reveals hypofluorescents lesions and vasculitis.

Electroretinography (ERG) show moderately depressed rod and cone function. The principal differential diagnosis of Birdshot is Sarcoidosis and tuberculosis. Its treatment is based in the administration of corticosteroids. the prognosis of the disease is poor linked to multiple recurrences which need treatment by suppressant medication and immunomodulatory agents. The long-term visual prognosis for patients with BCR is guarded. Macular edema can cause Photoreceptor loss responsible of permanent visual loss.

#### IV. CONCLUSION

Birdshot chorioretinopathy is a rare idiopathic pathology. It is characterized by diffuse white spots in the retina and especially in the middle periphery. The long-term visual prognosis for patients with BCR is poor linked to frequent recurrence which need treatment by immunomodulatory agents.

#### CONFLICT OF INTEREST

Authors declare that they do not have any conflict of interest.

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