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Fundoscopic Evaluation in Vogt-Koyanagi-Harada Syndrome

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Purpose: To evaluate the anatomic and functional retinal changes in patients with Vogt-Koyanagi-Harada (VKH) synd rome using fluorescein angiography (FA), indocyanine green angiography (ICGA), optical coherence tomography (OCT) and electroretinogram (ERG). Methods: Twenty patients with VKH syndrome were studied. Thirteen patients (65%) were examined in convalescent phase, and seven patients (35%) were examined in the acute phase. All patients were examined with FA, ICGA, OCT, full field and focal ERG. Results: Bilateral ocular involvement was observed in all patients. The most frequent ocular findings were "Dallen-Fuchs nodules (45%), sunset glow fundus" (30%) and disc hyperemia (30%). FA showed focal areas with delayed choroidal perfusion (35%), multifocal areas of pinpoint leakage (15%), large placoid areas of hyperfluorescence pooling (15%) and optic nerve staining (25%). ICGA showed irregular hypofluorescence, slow or patchy choroidal filling, and focal leakage in the acute phase. OCT was useful to demonstrate macular complications as serous retinal detachment (15%) and CNV (7,5%). Full Field ERG was reduced in 4 (20%) patients and the focal ERG was subnormal in 17 patients (85%). Conclusions: Focal electroretinogram was reduced in 85% of patients with VKH syndrome, many persisted reduced after clinical recovery suggesting the development of permanent functional or morphological changes in the fundus. OCT was useful to demonstrate some macular complications. ICG angiography was more sensitive than fluorescein angiography in delineating abnormalities in the deeper layers of the sensory retina and choroid.