

Images in Rheumatology

Severe Hypopyon Uveitis in the Right Eye of Ankylosing Spondylitis

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The most prevailing extraarticular common complication is eye involvement in patients with ankylosing spondylitis (AS), while it is reported that approximately 25–40% patients suffer from acute anterior uveitis, which may occur at any time during the disease course¹.

A 46-year-old man presented with no sight in his right eye for 2 years and was referred to our hospital. Anterior segment photography was done under slit lamp biomicroscopes. It showed that conjunctival congestion with dilated episcleral veins, vascularization in the cornea, and plenty of fibrin and

hypopyon were found in the anterior chamber. Thus, severe hypopyon uveitis was diagnosed. The significant cataract in the eye also led to the unclarity of the vitreous and retina. He had a history of AS for more than 20 years. Physical examination showed limited motion of the lumbar spine. HLA-B27 was positive and computed tomography showed fusion of both sacroiliac joints. He had uveitis when diagnosed with AS but did not take his medication regularly. The patient was then treated with infliximab at this visit and was followed up.

Hypopyon is a severe inflammatory reaction characterized

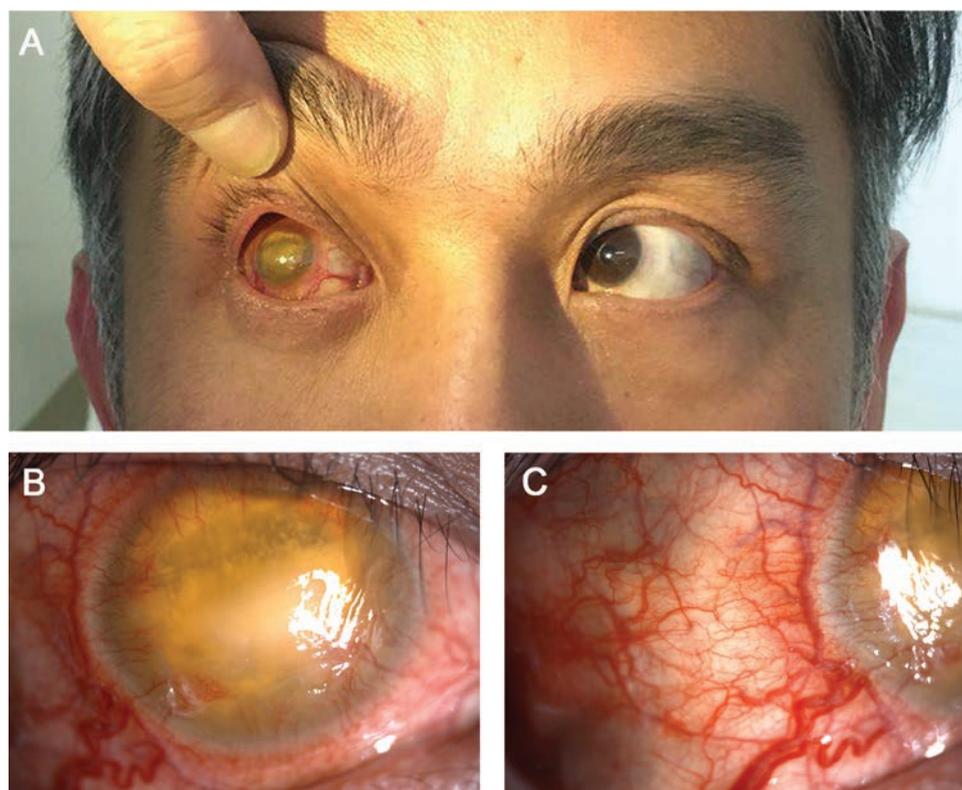


Figure 1. (A) The patient presented with severe hypopyon uveitis that gave rise to no sight in the right eye. (B,C) Anterior segment photography showed that conjunctival congestion with dilated episcleral veins, vascularization in the cornea, and plenty of fibrin and hypopyon were found in the anterior chamber.

by a layer of white blood cells in the anterior chamber, of which approximately 37% were considered to be associated with positive HLA-B27 or spondyloarthropathy (HLA-B27–positive or –negative)². Thus, hypopyon will provide clinicians with clues for the diagnosis of a rheumatic disease.

REFERENCES

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