

A case of cryptogenic uveitis

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CASE

- Left eye pain/redness x 2 days
- PCP sends to ophtho
- Anterior and Posterior Uveitis
 - Started on eye drops

CASE Day 4

- Back to PCP with:
- Left knee pain, “palpable purpura”
- Labs: CBC wnl, ESR 80, UA nl, Bld cx’s pending

Day 4

- PCP contacts rheumatologist
– ?Vasculitis, ?Wegener’s
- Biopsy of “palpable purpura”
- Started prednisone

Day 6

- ER – Headaches, worsening knee pain, skin lesions
- IV solumedrol
- CBC slight inc WBC
- CT head negative

Day 8

- ER – fevers, weakness, worsening sx’s
- Blood cx’s from Day 4 – Gram(+) cocci
- Transfer to Spokane

Subconjunctival
petechia



Splinter hemorrhages



Janeway Lesions



Osler nodes



Hospital course – Day 1

- WBC 17K with 13% bands
- ANA neg
- ANCA neg

- TTE – no vegetations
- Left knee tapped - purulent

Day 2

- Ortho I&D left knee – septic
- TEE – 6.5mm aortic vegetation, mod AR
- BC x4 - MSSA

Hospitalization continued

- On further investigation:
- Emboli to brain, spleen and kidneys
- AVR delayed to reduce ICH risk
– 11 days into hospitalization
- Tx'd IV Nafcillin

Follow up

- Right sided weakness remains, but improving
- Eye symptoms completely resolved
