9.7.22. Infectious Ocular Inflammatory Diseases (XXII): Bacterial Uveitis (VII): Whipple Disease

- epidemiology
  - Tropheryma whipplei bacterium
    - PAS (+) bacillus
  - rare
  - most common in middle-aged white men
- systemic manifestations
  - migratory arthritis
    - 80%
  - gastrointestinal symptoms
    - 75%
    - diarrhea
    - steatorrhea
    - malabsorption
    - Intestinal loss of protein
      - pitting edema
      - weight loss
  - cardiomyopathy
  - valvular disease
  - CNS involvement
    - 10%
    - seizures
    - dementia
    - coma
    - neuro-ophthalmic signs
      - cranial nerve palsies
        - ophthalmoplegia
      - nystagmus
        - **Oculomasticatory Myorhythmia**
      - progressive supranuclear palsy–like condition
- intraocular involvement
  - rare
    - <5%
  - bilateral panuveitis
    - anterior uveitis
    - moderate vitritis
    - diffuse chorioretinal inflammation
    - diffuse retinal vasculitis
      - perifoveal and midperipheral regions
      - retinal vascular occlusions
      - retinal hemorrhages
  - optic disc edema
    - optic atrophy
  - granular, crystalline deposits on the iris, capsular bag, and intraocular lens
- diagnosis
  - duodenal biopsy
    - periodic acid–schiff–positive bacillus in macrophages within intestinal villi
  - PCR analysis of peripheral blood and vitreous
    - T whipplei DNA
  - culturing of T whipplei
    - difficult but possible
- differential diagnosis
  - sarcoidosis
  - SLE
  - polyarteritis nodosa
  - behçet disease
- treatment
  - trimethoprim-sulfamethoxazole
    - preferred treatment
    - x 1- 3 months
    - 30% relapse
      - treat x ≤1 year
  - patients allergic to sulfonamides
    - ceftriaxone
    - tetracycline
    - chloramphenicol
  - prognosis
    - retinal vasculitis can resolve with treatment
    - neurologic deficits become permanent

marginal corneal infiltrates

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