Ophthalmic Images

Subretinal Deposits Associated With Type 1 Cryoglobulinemia

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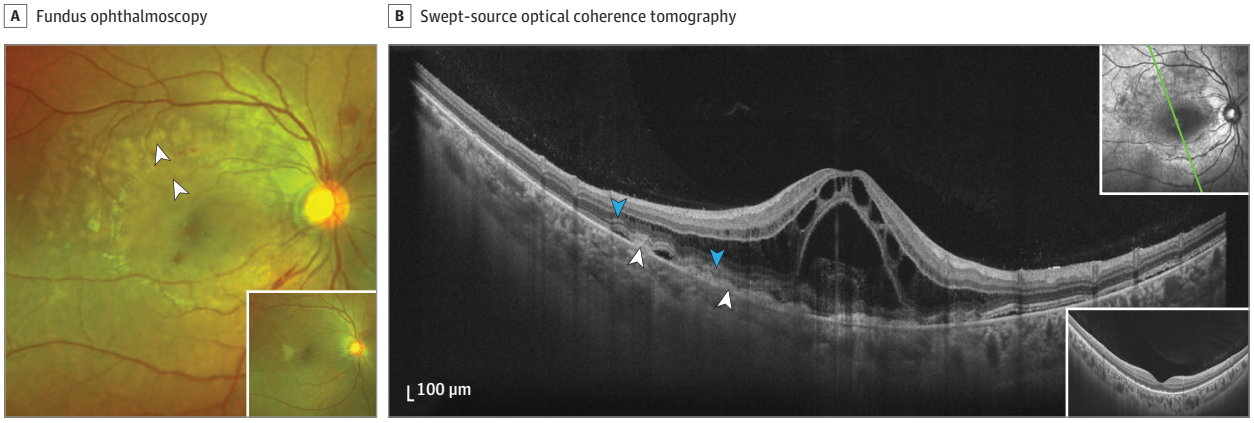

Figure. Subretinal deposits associated with type 1 cryoglobulinemia. Ophthalmoscopic examination revealed multiple subretinal yellowish lesions (A, white arrowheads), which presented as moderate-reflection deposits above the retinal pigment epithelium on swept-source (SS) optical coherence tomography (OCT) (B, white arrowheads). SS-OCT also revealed neurosensory detachment and cystoid macular edema with disruption of the external limiting membrane (B, blue arrowheads).

A 30-year-old female complained of blurred vision in the right eye. One month ago, she was admitted to the hospital for type 1 cryoglobulinemia with high IgG lambda, acute kidney injury, and hypertension. Her corrected visual acuity was 20/80 OD and 20/20 OS. Ophthalmoscopic examination in both eyes revealed multiple subretinal yellowish lesions (**Figure**, A, white arrowheads), which presented as moderate-reflection deposits above the retinal pigment epithelium (RPE) on swept-source (SS) optical coherence tomography (OCT) (Figure, B, white arrowheads). SS-OCT also revealed neurosensory detachment and cystoid macular edema with disruption of the external limiting membrane (Figure, B, blue arrowheads). The deposits were associated with monoclonal immunoglobulins or their components leaked from blood vessels and appeared to accumulate above the RPE, potentially analogous to their deposition in the glomeruli and tubulointerstitium.[1,2] The patient continued to receive chemotherapy. Three weeks later, her vision improved to 20/20 OU, and the deposits and macular edema resolved completely (Figure, A and B, inset).

ARTICLE INFORMATION

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