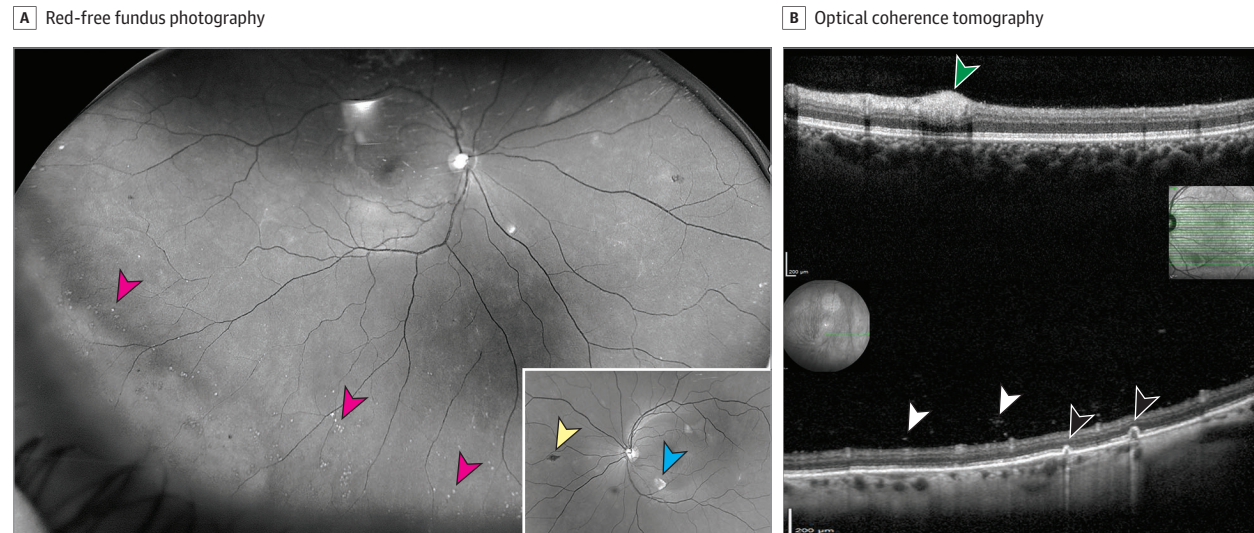


## Ophthalmic Images

## Hemophagocytic Lymphohistiocytosis After Dengue Fever and Its Ocular Features

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**Figure.** A, Red-free fundus photographs showing whitish outer retinal lesions (pink arrowheads), retinal hemorrhages (yellow arrowhead), and nerve fiber layer infarcts (blue arrowhead). B, Optical coherence tomography showing a nerve fiber layer infarct (green arrowhead), posterior vitreous cells (white arrowheads), and subretinal pigment epithelium deposits (black arrowheads) at the area of the whitish lesions.

**A man in his early 40s** presented with history of dengue fever requiring admission in the intensive care unit. His serum inflammatory parameters were markedly elevated: lactate dehydrogenase, 939 IU/L



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(normal, 100-250 IU/L; to convert to microkatal per liter, multiply by 0.0167); ferritin, 16 282 ng/mL (normal, 30-400 ng/mL; to convert to micrograms per liter, multiply by 1); C-reactive protein, 101 mg/L (normal, <5 mg/L; to convert to milligrams per deciliter, divide by 10); triglycerides, 667 mg/dL (normal, <150 mg/dL; to convert to millimoles per liter, multiply by 0.0113); and serum fibrinogen, 363 mg/dL (normal, 180-350 mg/dL; to convert to grams per liter, multiply by 0.01). The patient had developed thrombocytopenia,

anemia, hyponatremia, viral meningoencephalitis, transaminitis, splenomegaly, and acute kidney injury. He was diagnosed with hemophagocytic lymphohistiocytosis (HLH)<sup>1</sup> secondary to dengue fever. We reported the ophthalmic features in this case of HLH. Visual acuity was 20/20 OU, anterior-segment examination was normal, and fundus examination revealed vitritis, 1+ vitreous haze, nerve fiber layer infarcts, retinal hemorrhages, and whitish outer retinal lesions in the inferior periphery in both eyes (Figure, A). Optical coherence tomography over the whitish lesions revealed subretinal pigment epithelium deposits, which could be the lymphohistiocytic aggregates seen in HLH as described in the literature (Figure, B).<sup>2</sup> At a recent follow-up visit, visual acuity was stable with resolving fundus lesions.

## ARTICLE INFORMATION

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