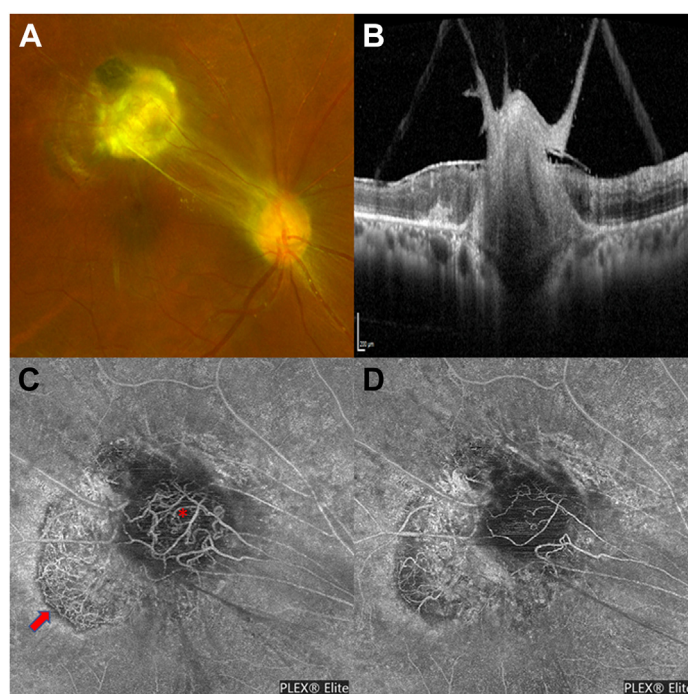


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Pictures & Perspectives



Double Trouble in a Patient with Toxoplasma Chorioretinitis

A 35-year-old woman with active *Toxoplasma* chorioretinitis (serum IgG > 650) and secondary branch retinal vein occlusion in the right eye was treated with a combination of oral trimethoprim/sulfamethoxazole, prednisone, and intravitreal clindamycin with improvement. On follow-up, fundus examination revealed preretinal neovascularization (NV) (A) and vitreous traction overlying the chorioretinal lesion on OCT (B). Swept source OCTA revealed choroidal NV (arrow) and preretinal NV (C, asterisk). The patient received intravitreal aflibercept with regression of both neovascular lesions, and visual acuity improved from 20/40 to 20/25 (D) (Magnified version of Figure A–D is available online at www.aaojournal.org).

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