

OCULAR TOXOPLASMOSIS IN A LARGE TERTIARY REFERRAL CENTRE IN SYDNEY, AUSTRALIA

Purpose: to determine the epidemiology, clinical features, diagnostic and therapeutic options as well as visual morbidity associated with acquired ocular toxoplasmosis infection in Australia.

Method: a retrospective cohort of patients with chorioretinitis due to ocular toxoplasmosis. Baseline demographics including age, country of birth, immune status and pregnancy status was recorded. Vision was recorded in LogMAR. The chorioretinitis was graded using the SUN classification included the grading of anterior cells, vitritis and the location of the lesions in relation to the macula. Treatment modalities including topical, systemic corticosteroids and antimicrobials agents were included for analysis.

Results: 42 patients (44 eyes) were included in this study from 2007 to 2017. The median age was 35.5 (IQR 21-50) with 26 (62%) with no previous symptomatic episodes or evidence of chorioretinal scarring. Laboratory testing was not routinely used nor helped with positive predictive value. Visual acuity at presentation was 0.51 6/19 (SE 0.096) and at follow up 0.31 or 6/9 (SE (0.094). 9 patients experienced a recurrence during the period of observation with time to recurrence 2.2 years (SE 0.45). The relapse rate (1 or more) 0.09/person-year. Location of lesion was predominantly within the vascular arcades (n=23) with macular involvement in 9 patients. Most patients received clindamycin therapy (n=30) with pyrimethamine + sulfadiazine used for those with macula involvement.

Conclusions: ocular toxoplasmosis in Australia appears to be a milder disease than other parts of the world. Most patients received antimicrobial therapy and systemic corticosteroids especially if there was activity within the vascular arcades. Reactivation rate was low in this cohort during the period of observation.