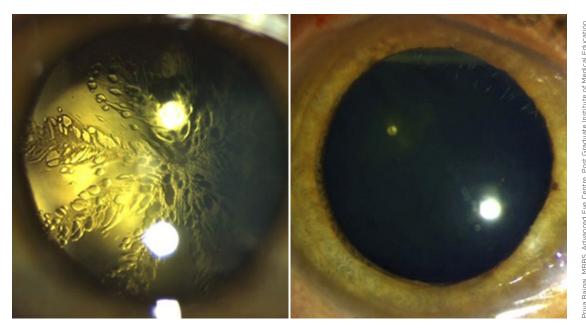
MYSTERY IMAGE BLINK



WHAT IS THIS MONTH'S MYSTERY CONDITION? Be sure to visit aao.org/eyenet to make your diagnosis in the comments area.

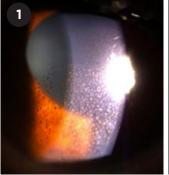
LAST MONTH'S BLINK

Pigmented Keratic Precipitates in Herpes Simplex Virus Anterior Uveitis

27-year-old man presented, complaining of decreased vision in his right eye for 2 weeks. In that eye, best-corrected visual acuity (BCVA) was 20/80 and intraocular pressure (IOP) was 34 mm Hg. The slit-lamp examination showed 2+ cells and flare, along with pigmented keratic precipitates (KPs) in the lower half of the cornea (Fig. 1). In the left eye, BCVA was 20/25, IOP was 12 mm Hg, and the anterior chamber was clear.

Polymerase chain reaction analysis of aqueous humor from the right eye was positive for herpes simplex virus (HSV) DNA. The patient received topical corticosteroids, cycloplegic and antiglaucoma drugs, and oral acyclovir. Three weeks later, the KPs resolved completely and the eye was quiescent (Fig. 2). BCVA at 5 months was 20/20 and IOP was 12 mm Hg.

In addition to high IOP, granulomatous KPs, and sectoral iris atrophy, pigmented KPs are characteristic of HSV-associated anterior uveitis





(though a rare association with postoperative endophthalmitis caused by Propionibacterium acnes has been reported). Our patient exhibited all of these signs. The authors are following up on this case semiannually for uveitis flare-ups.

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