

Teaching NeuroImages: A case of Vogt-Koyanagi-Harada disease with bilateral retinal detachment

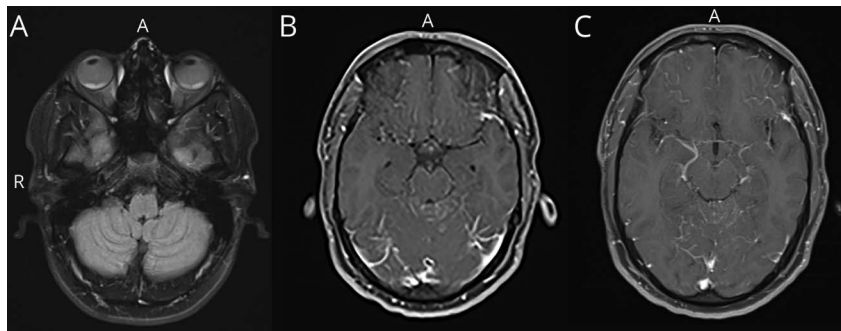
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Figure Radiologic findings in Vogt-Koyanagi-Harada disease



(A) Fluid-attenuated inversion recovery MRI shows bilateral serous retinal detachments and bilateral retinal/choroid thickening. (B, C) T1 postcontrast images show leptomeningeal enhancement most pronounced along the inferior aspect of the frontal lobes and in the superior aspect of the medial cerebellum.

A 28-year-old East African man with progressive visual impairment and keratitis presented with new symptoms including headache, nausea, disequilibrium, tinnitus, and right leg paresthesias. MRI showed bilateral retinal detachments and diffuse leptomeningeal enhancement (figure). Lumbar puncture showed lymphocytic pleocytosis and elevated protein. His clinical picture was consistent with Vogt-Koyanagi-Harada (VKH) disease: an autoimmune inflammatory disorder with ocular, auditory, skin, and neurologic involvement.¹ VKH disease is more common in Asian, Middle Eastern, and Hispanic populations.¹ Treatment includes early high-dose corticosteroids with prolonged taper over months.^{1,2} His symptoms improved following high-dose methylprednisolone.

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Author contributions

M. Al Banna: drafting/revising the manuscript, data acquisition, study concept or design, accepts responsibility for conduct of research and final approval. S. Reeder: drafting/revising the manuscript, data acquisition, analysis or interpretation of data, accepts responsibility for conduct of research and final approval, acquisition of data. M. Ghannam: data acquisition, study concept or design, accepts responsibility for conduct of research and final approval, acquisition of data. J. Robertson: drafting/revising the manuscript, analysis or interpretation of data, accepts responsibility for conduct of research and final approval, study supervision. A. Stutz: data acquisition, accepts responsibility for conduct of research and final approval.

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Disclosure

The authors report no disclosures relevant to the manuscript. Go to Neurology.org/N for full disclosures.

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