A 35-year-old woman came to our hospital on November 22, 2010, after the onset of unilateral blurred vision and scotomata, purpuric rash over bilateral lower limbs, and metrorrhagia for four days. She had visited Vietnam for 11 days and fever, chills, and headache subsequently developed one day after returning to Japan. Fever and headache subsided six days after onset of disease.

Laboratory data showed a platelet count of 109,000 cells/μL, dengue virus nonstructural protein 1, and IgM against dengue virus 10 days after onset of disease. Visual acuity was reduced to 20/25 in the left eye. Humphrey visual field testing showed nonspecific visual field defects. Funduscopic examination showed retinal hemorrhages and white spots (Figure 1). She was observed without treatment.

Blurring of vision and scotomata typically coincides with thrombocytopenia and clinical features include blot hemorrhages. Visual recovery usually corresponds with improving platelets levels, however, scotomata may persist for several weeks in some cases despite the resolution of ocular signs. The patient described small scotomata 19 days after onset of disease despite the resolution of thrombocytopenia and hemorrhagic spots (Figure 2). Her visual symptoms improved and visual acuity improved to 20/17 at 84 days after onset of disease.

Received February 28, 2011. Accepted for publication June 29, 2011.

Financial support: This study was supported in part as project “Research on Emerging and Re-emerging Infectious Diseases” by the Ministry of Health, Labor and Welfare, Japan (H23-Shinkou-Ippan-010).
Disclosure: None of the authors have any conflicts of interest.

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