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Ocular pseudopemphigoid after topical multidrug administration and anterior segment surgery in chronic glaucoma
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Purpose: To describe the clinical features and the therapeutic treatment of a case of unilateral ocular pseudopemphigoid with a severe toxic scarring reaction of the ocular surface by preservatives. The patient was treated with long-term therapy based on the use of antiglaucomatous multidrug regimens containing benzalkonium chloride. The pseudopemphigoid developed after surgical procedure for cataract and for pterygium.

Methods: A 72-year old female patient with clinical picture of a cicatricial pemphigoid has been investigated in order to determine the most appropriate therapeutic strategy. The patient has been submitted to a systemic evaluation, examination with a slit-lamp, determination of visual acuity, conjunctival cytology and biopsy with immunofluorescent staining for IgG, IgA, IgM, C3 and polyvalent antibodies.

Results: It has been observed a conjunctival fornices reduction (symblepharon), a dry eye syndrome due to mucous secreting cells loss, corneal opacity with active deep vascularization and very poor visual acuity. The impression cytology was compatible with ocular cicatricial pemphigoid; neither conjunctival, nor circulating anti-basement membrane zone antibodies were found. In this case, the preservative (benzalkonium chloride) contained in the antiglaucomatous drugs and the surgical injury have determined the scarring and keratinization of ocular surface, simulating an ocular pemphigoid. Using the preservative-free eyedrops, in combination with topical treatment with steroids, cyclosporin A and all-trans-retinoic acid, an objective improvement was obtained with reduction of the ocular inflammation. Lubricating ointments and eye drops without preservatives have been given very frequently.

Conclusions: during glaucoma treatment the drug-induced pseudopemphigoid can be induced by a surgical procedure on the anterior segment. The suspension of every medication containing preservatives and the topical treatment with corticosteroids, cyclosporin A, tear substitutes and retinoic acid was effective in improving clinical and functional ocular parameters. We emphasize the importance of recognizing the early signs of the disease to assess the potential risks and the benefits of long-term topical therapy and surgical treatments.