Optic Neuritis Due to Toxoplasmosis: First and Only Manifestation of Newly Diagnosed AIDS

Rajesh Kumar MD
Lehigh Valley Health Network, Rajesh.Kumar@lvhn.org

Yehia Y. Mishriki MD
Lehigh Valley Health Network, Yehia.Mishriki@lvhn.org

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Abstract:
In the pre-HAART era, toxoplasma infections in AIDS patients were not uncommon and primarily involved the CNS. Optic nerve involvement with toxoplasma is exceedingly rare. Herein, we report a case of optic neuritis due to toxoplasma which was the first and only manifestation of a newly diagnosed case of AIDS.

Case Presentation:
A 56 year old male presented with left monocular blindness which began with retro-orbital pain followed by progressive vision loss. He worked at a meat packing factory. He was heterosexual, denied any history of recreational drug abuse and blood transfusion. On examination, the conjunctivae, sclera and corneas were normal. Pupils were round and equal with a left afferent pupillary defect. On funduscopic exam, cup to disc ratio was 0.2 with pallor of the optic nerve. There were no hemorrhages or exudates. HIV serology was positive and the CD4 cell count was 21 cells/mm$^3$. CSF cell count was 1. Toxoplasma IgG was positive in high titer; IgM was negative. CSF oligoclonal band was positive with six (normal <4). MRI with gadolinium of the brain only revealed left optic nerve intracanalicular and intraorbital enhancement consistent with optic neuritis. MRI of the cervical and thoracic spines revealed no demyelinating lesions.

The patient was started on HAART, TMP/SMX and folinic acid and clinically improved. Re-imaging showed decreased enhancement of the optic nerve.

Discussion:
CNS Toxoplasmosis is the presenting opportunistic infection in AIDS in about 5% of patients. Diagnosis is by serology. MRI with and without gadolinium shows one or more ring enhancing lesions. Treatment is with TMP/SMX with re-imaging to confirm shrinkage of the lesion(s). To our knowledge, this is the first case of isolated optic neuritis as the presenting and sole manifestation of AIDS.