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Clinical Findings and Management of Disc Edema due to Lyme Meningitis

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Disc edema due to increased intracranial pressure is called papilledema. Most of the papilledema due to meningitis will be accompanied with cranial nerve IV palsy. We report here a case report of disc edema due to Lyme meningitis. A 16-year-old African American male presented with no visual complaints. Fundus Examination revealed bilateral disc edema. Visual field test and OCT/GDx of the Optic Nerve has been ordered and a copy of his blood test results, that he just had recently. His blood test results were positive for Lyme's serology and he was treated with intravenous ceftriaxone for 2 weeks. Patient disc edema was resolved within 6 weeks of the follow-up visit. Practitioners need to be mindful of the importance of the case history, the importance of dilation, and the need for a thorough exam, particularly though the case does not have a visual complaint.

Keywords: Papilledema, meningitis, Lyme disease, Visual Field, Bell's Palsy, Optical Coherence Tomography (OCT) Dilated Fundus Exam (DFE)

Biography

Al-Namaeh is a clinician and a consultant in Kentucky, USA. She has been also an adjunct professor at Oulu University of Applied Sciences in Finland, Europe. Al-Namaeh is a regular member of grant review panels for a national organization. Al-Namaeh is a committee member at various professionals' meetings. She has been selected at the Editorial Boards of national journal in the field. She has lectured by invitations to national and international meetings. She has several articles and abstracts publications.