

Vogt-Koyanagi-Harada disease

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Figure 1. A clinical photograph of a 35-year-old male with right eyebrow and eyelash poliosis and a hypochromic area on the right upper eyelid.

This was a 35-year-old male with loss of color in his right eyebrow and eyelashes (poliosis) and contiguous palpebral hypochromia (Figure 1). An exam showed ipsilateral hypoacusis with the Rinne test and contralateral lateralization of the Weber test. Vision in his right eye was 60/20 and 20/20 in the left eye using the Snellen chart. He was diagnosed with type 2 Vogt-Koyanagi-Harada (VKH) disease and was referred to ophthalmology for evaluation and follow up.

Vogt-Koyanagi-Harada disease was described by Ali Ibn Isa in 940 B.C., iridocyclitis was described by Vogt in 1906 and Koyanagi in 1926, and encephalitis-associated uveitis was described by Harada in 1951. Its characteristics include panuveitis, retinal detachment and evidence of auditory and central nervous system dysfunction (1). Diminished visual acuity is the norm. Its etiology is uncertain, immunomediated in melanocytic tissues (2). Long-term corticosteroids generally arrest the eye damage.

References

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