

Tozinameran

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Multiple evanescent white dot syndrome: case report

A 30-year-old woman developed multiple evanescent white dot syndrome (MEWDS) following vaccination with tozinameran.

The woman presented to an eye clinic with a 1-week history of blurred vision in her left eye. Prior to 13 days of her current presentation, she had undergone vaccination with the first dose of tozinameran [BNT162b2 mRNA SARS-CoV-2 vaccine; *route and dosage not stated*] injection. Post-vaccination, she also experienced injection-site soreness, which subsequently resolved within 24 hours. At current presentation, her best-corrected visual acuity (BCVA) was 20/20 in both eyes (OU). Fundus examination revealed multiple yellowish-white spots in the perifovea region with more spots in the left eye as compared to her right eye.

The woman received treatment with fluorometholone under a presumed diagnosis of acute posterior multifocal placoid pigment epitheliopathy. After 1 week of treatment, the visibility of her yellowish-white spots reduced. The next day, she received the second dose of tozinameran. After 24 hours of vaccine injection, she developed fatigue, joint pain and fever, which showed alleviation with paracetamol [acetaminophen]. After 3 days of her second dose, she presented with blurred vision in her left eye. Previously detected white spots were seen along with additional spots in other parts of the retina of both eyes. She was then referred to a hospital for further management. An ophthalmological analysis revealed intraocular pressure of 13mm Hg OU and BCVA of 30/20 OU. Her extraocular eye movements were full. Slit-lamp examination indicated an elevated flare value in the anterior chamber with 16 photons/ms in left eye and 18 photons/ms in right eye. Dilated fundus examination showed numerous white spots in the perifoveal region and temporal, inferior and superior to the fovea in both eyes, particularly prominent in left eye along with 1+ vitreous cells in left eye and a trace of vitreous cells in the right eye. Fundus autofluorescence of each eye indicated hyperfluorescent dots in the macular region and a fundus fluorescein angiography revealed early hyperfluorescent spots, circumferentially distributed around the fovea. Based on the ocular findings, a diagnosis of bilateral asymmetric MEWDS secondary to tozinameran was confirmed. Thereafter, her treatment was continued with neomycin [fradiomycin sulfate] and betamethasone sodium phosphate. At the 2-month follow-up, her blurred vision had resolved without any relapses and BCVA was at 30/20. Alterations in OCT and fundus autofluorescence were still detected. At the time of the case report, she was receiving no medication for her condition.

Inagawa S, et al. Multiple evanescent white dot syndrome following vaccination for COVID-19 A case report. *Medicine* 101: 1-5, No. 2, 14 Jan 2022. Available from: URL: <https://journals.lww.com/md-journal/pages/default.aspx> 803656659