

Inflammation of the Back Part of the Eye (Chorioretinitis)

Basics

OVERVIEW

- Inflammation of the choroid and retina; the choroid is located immediately under the retina and is part of the middle-layer of the eyeball that contains the blood vessels; the retina contains the light-sensitive rods and cones and other cells that convert images into signals and send messages to the brain, to allow for vision
- Choroid is also-called “posterior uvea”; the uvea is the entire middle layer of the eyeball that contains the blood vessels; it is composed of the iris (the colored or pigmented part of the eye), the ciliary body (the area between the iris and the choroid), and the choroid (located under the retina)
- Diffuse inflammation may result in separation of the back part of the eye (retina) from the underlying, vascular part of the eyeball (known as the “choroid”; condition known as “retinal detachment”)

SIGNALMENT/DESCRIPTION OF PET

Species

- Dogs
- Cats

Breed Predispositions

- Generalized (systemic) fungal infections (known as “mycoses”)—more common in large, hunting-breed dogs
- Uveodermatologic syndrome—a rare syndrome in which the pet has inflammation in the front part of the eye, including the iris (known as “anterior uveitis”), inflammation of the posterior uvea or choroid (known as “posterior uveitis”), or both and coexistent inflammation of the skin (known as “dermatitis”), characterized by loss of pigment in the skin of the nose and lips—Akitas, chow chows, and Siberian huskies are more likely to develop syndrome than other breeds
- Eye disorder with multiple areas of fluid buildup in the retina (known as “retinal edema”) or loss of tissue in the choroid and retina (known as “chorioretinal atrophy”) resulting in deterioration of the back of the eye (retina), causing pigmented and hyperreflective areas (known as “chorioretinopathy”)—borzois, border collies, beagles
- Generalized (systemic) histiocytosis (condition characterized by the proliferation of histiocytes, a type of scavenging cell, in the area of blood vessels)—Bernese mountain dogs, golden retriever

Mean Age and Range

- Depend on underlying cause

Predominant Sex

- Uveodermatologic syndrome—more common in young male dogs

SIGNS/OBSERVED CHANGES IN THE PET

- Not usually painful, except when the front part of the eye, including the iris (anterior uvea) is affected
- Vitreous abnormalities—the “vitreous” is the clear, gel-like material that fills the back part of the eyeball



(between the lens and the retina); may note inflammatory substances (known as “exudates”), bleeding (hemorrhage), or evidence of the gel becoming liquified (known as “syneresis”)

- Interruption or change of course of the blood vessels in the back of the eye (retina) due to changes in the contour/surface of the retina
- Invasion of the eye by fly larvae (known as “ophthalmomyiasis”); seen in cats—tracts from migrating larvae may be seen when the eye is examined with an ophthalmoscope
- Changes in the appearance of the retina when examined with an ophthalmoscope; may include change in color, darkened or lighter areas, and scars
- Other signs related to underlying disease
- Few or small lesions—may note no apparent visual deficits

CAUSES

Dogs

- Generalized disease caused by the spread of bacteria in the blood (known as “septicemia” or “blood poisoning”) or the presence of bacteria in the blood (known as “bacteremia”)— bacterial or fungal infection of the intervertebral disks and adjacent bone of the spine (vertebral bodies; condition known as “diskospondylitis”); inflammation/infection of the lining of the heart (known as “endocarditis”)
- Viral infection—canine distemper virus; herpesvirus (rare, usually seen in newborn puppies); rabies virus
- Bacterial or rickettsial infections—generalized disease (such as septicemia bacteremia); leptospirosis; brucellosis; inflammation with accumulation of pus in the uterus (known as “pyometra”) that leads to toxic inflammation of the uvea (uveitis); *Borrelia* (Lyme disease); ehrlichiosis; Rocky Mountain spotted fever; bartonellosis
- Fungal or mycotic infection—aspergillosis; blastomycosis; coccidioidomycosis; histoplasmosis; cryptococcosis; acremoniosis; geotrichosis
- Algal infections—protothecosis
- Parasitic—migration of parasitic larvae through the eye (known as “ocular larval migrans”); parasites include *Strongyles*, *Ascarids*, *Baylisascaris*); invasion of the eye by fly larvae (ophthalmomyiasis)
- Protozoal parasite—toxoplasmosis; leishmaniasis; *Neospora*

Cats

- Viral infection—feline leukemia virus (FeLV), feline infectious peritonitis (FIP), feline immunodeficiency virus (FIV)
- Bacterial infection—septicemia or bacteremia (such as bartonellosis)
- Fungal infection—cryptococcosis, histoplasmosis, blastomycosis, others
- Parasitic—ophthalmomyiasis (cuterebra for example), larval migration
- Protozoal—toxoplasmosis

Dogs and Cats

Idiopathic

- Unknown cause (so-called “idiopathic disease”)—common
- Chorioretinopathy is an acquired syndrome where affected dogs (borzoi, border collies, or beagles) have multiple areas of fluid buildup in the retina (known as “retinal edema”) or loss of tissue in the choroid and retina (known as “chorioretinal atrophy”); systemic or malignant histiocytosis in Bernese mountain dogs

Immune

- Immune-mediated disease—may cause inflammation of the blood vessels (known as “vasculitis”) or inflammation of the choroid and retina (known as “chorioretinitis”), resulting in separation of the retina from underlying tissue (known as “retinal detachment”); choroid is located immediately under the retina and is part of the middle-layer of the eyeball that contains the blood vessels; may also cause small bleeding spots on the retina (or larger bleeding areas) with low platelets, with associated inflammation; immune complex disease associated with infection
- Auto-immune disease—diseases in which the immune system attacks the body's own tissues; examples include Dogs: uveodermatologic syndrome (a rare syndrome), leading to severe eye inflammation and depigmentation

of skin; SLE or systemic lupus erythematosus (auto-immune disease in which body attacks its own skin and other organs)

- Auto-immune disease—cats; SLE, arteritis

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Metabolic

- Early lesions in the back part of the eye (retina) secondary to high blood pressure (known as “hypertensive retinopathy lesions”) may appear as multiple areas of inflammation of the retina (known as “multifocal retinitis”)

Cancer

- May be primary cancer involving the choroid and/or retina or secondary to the spread of cancer into the back part of the eye (known as “metastasis”); lymphoma, malignant histiocytosis, multiple myeloma

Toxic

- Antifreeze (ethylene glycol)
- Individual pet reaction to medications (such as trimethoprim-sulfa; ivermectin, especially in breeds that are likely to react to it)
- Photic injury (exposure to bright light can burn the retina)

Trauma

- Infection introduced by some external event—wound that enters the eyeball or migrating foreign body; surgery that enters the eyeball (known as “intraocular surgery”)

RISK FACTORS

- Feline leukemia virus (FeLV) or feline immunodeficiency virus (FIV) infection may increase the likelihood that a cat will become infected with other disease-causing agents that involve the eye (such as *Toxoplasma*) that cause inflammation of the back part of the eye (choroid and retina)
- Dogs or cats on medications to decrease the immune response for other medical problems

Treatment

HEALTH CARE

- Depends on physical condition of the pet
- Usually outpatient
- Fluid or other therapy for generalized (systemic) disease

Medications

Medications presented in this section are intended to provide general information about possible treatment. The treatment for a particular condition may evolve as medical advances are made; therefore, the medications should not be considered as all inclusive

- Identify and treat any underlying, generalized (systemic) disease, such as itraconazole or fluconazole for a fungal infection (known as “systemic mycosis”); doxycycline for rickettsial infection; azithromycin or doxycycline for bartonellosis
- Medications applied directly to the surface of the eye (known as “topical medications”)—are not effective for treatment of chorioretinitis in dogs with intact lenses (the lens [singular] is the normally clear structure directly behind the iris that focuses light as it moves toward the back part of the eye [retina]); treat any associated inflammation of the front part of the eye, including the iris (anterior uveitis) with topical steroids (1% prednisolone acetate or 0.1% dexamethasone) and 1% atropine to dilate the pupil and reduce pain
- Treat any secondary glaucoma (increased pressure within the eye) with anti-glaucoma medication (such as timolol or dorzolamide)
- Generalized (systemic) therapy is administered by injection or by mouth (orally)—required for treatment of inflammation of the back part of the eye (choroid and retina; “chorioretinitis”)
- Feline toxoplasmosis—clindamycin for 14–21 days
- Systemic steroids administered by mouth (such as prednisolone) at anti-inflammatory doses—when generalized

(systemic) fungal infection (mycosis) has been ruled out or is being treated with appropriate systemic antifungal therapy; avoid use, unless large areas of the retina are affected and vision is threatened severely

- Systemic steroids administered by mouth at doses to decrease the immune response (immunosuppressive doses) for immune-mediated disease; may facilitate separation of the back part of the eye (retina) from the underlying, vascular part of the eyeball (retinal detachment)
- Cancer—chemotherapeutic agents
- Uveodermatologic syndrome and autoimmune disease—may require azathioprine (a medication that decreases the immune response) and steroids to control inflammation

Follow-Up Care

PATIENT MONITORING

- As appropriate for underlying cause and type of medical treatment
- Bloodwork, including a complete blood count (CBC), platelet count and serum biochemistry tests for liver enzymes—if giving immune system suppressing drugs
- Monitor intraocular pressure (IOP)—for cases with inflammation of the front part of the eye, including the iris (anterior uveitis) to determine if the pressure is increasing and possible glaucoma is developing

PREVENTIONS AND AVOIDANCE

- Tick and flea control measures to prevent infection with various disease-causing agents (such as *Borrelia* that causes Lyme disease)

POSSIBLE COMPLICATIONS

- Permanent blindness
- Cataracts (opacity in the normally clear lens, preventing passage of light to the back part of the eye [retina])
- Glaucoma (increased pressure in the eye)
- Long-term (chronic) eye pain
- Death—secondary to underlying, generalized (systemic) disease

EXPECTED COURSE AND PROGNOSIS

- Prognosis for vision—guarded to good, depending on amount of retina affected; visual deficits or blindness may develop if large areas of the retina were destroyed; localized (focal) disease and multiple areas of disease (multifocal disease) of the retina do not impair vision markedly, but do leave scars
- Prognosis for life—guarded to good, depending on underlying cause

Key Points

- Chorioretinitis may be a sign of a generalized (systemic) disease; therefore, appropriate diagnostic testing is important
- Immune-mediated disease requires lifelong therapy to control inflammation of the back part of the eye (choroid and retina)
- Dogs with uveodermatologic syndrome also may have inflammation of the front part of the eye, including the iris (anterior uveitis) and secondary glaucoma (in which the pressure within the eye [intraocular pressure] is increased secondary to inflammation in the eye), which requires treatment; inflammation of the skin (dermatitis) also may require management