BILATERAL CORNEAL PERFORATION CAUSED BY OCULAR ROSACEA -- A CASE REPORT

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Purpose: To present a case of bilateral corneal perforation caused by ocular rosacea

Method: A case report.

Result: A 22-year-old female was referred to our hospital due to impending corneal perforation of her left eye. Upon examination, her eyes showed lid crusting, meibomitis, lid margin telangiectasia, and palpebral conjunctival hyperemia with papillary reaction (OS>OD). The iris was incarcerated by a 3.5 x 3.5 mm descemetocele in the inferior portion of the left cornea. The right cornea had a 4 x 4 mm area of central thinning with iris adherence and an inferonasal pannus. Numerous erythematous papules and pustules were observed over the patient's cheeks, nose and chin and intermittent skin flushing was also noticed. Penetrating keratoplasties were performed in both eyes six months apart. Oral doxycycline (100 mg bid) was prescribed for the diagnosed acne rosacea. Post-operative best corrected visual acuity was 20/30 (OS) and 20/25 (OD). Both facial and ocular conditions improved markedly after treatment.

Conclusion: Ocular rosacea is rare in adolescents and young adults. Cutaneous manifestations are often misdiagnosed as acne vulgaris. Ophthalmologists should be alert to the possibility of ocular rosacea in young adults with meibomian gland disease, chronic blepharitis, recurrent chalazia and corneal epitheliopathy which do not respond to usual treatment. Such patients respond well to doxycycline or tetracycline. Early diagnosis and treatment can improve visual outcome and prevent serious complications.

Key words: ocular rosacea, corneal perforation, acne vulgaris

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