What is the causative organism in Bartonellosis?



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Bartonella henselae: Gram(-) rods



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How does CSD present?

--First, a

\_\_\_

three words

appears at the inoculation site

### **Basics**

*How does CSD present?* --First, a focal vesciculopustular rash appears at the inoculation site









Bartonellosis: Focal vesciculopustular rash



#### **Basics**

How does CSD present?

--First, a focal vesciculopustular rash appears at the inoculation site

--1-2 weeks later, regional lymphadenopathy develops, accompanied by a flulike syndrome







Bartonellosis: Regional LAD

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POS: Granulomatous conjunctivitis



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# Uveitis: Bartonellosis





POS: Massive enlargement of submandibular lymph node on the affected right side

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What about the other S/S—impaired upgaze, lid retraction, nystagmus, and light-near dissociation?



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Do Parinaud syndrome and Parinaud oculoglandular syndrome have anything to do with each other?



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# Uveitis: **Bartonellosis**

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--Chlamydia trachomatis

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--Syphilis

--TB

--(There are a considerable number of other, rarer infectious causes)



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There are several noninfectious causes of Parinaud oculoglandular syndrome. Which should come to mind here?



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--Syphilis! --TB! --Sarcoid! *Why should sarcoid come to mind?* Because once again, it is showing up in a DDx alongside syphilis and TB. The three 'great imitators' strike again!

There are several noninfectious causes of Parinaud oculoglandular syndrome. *Which should come to mind here?* 



# Uveitis: **Bartonellosis**

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How does CSD present?

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--1-2 weeks later, regional lymphadenopathy develops, accompanied by a flulike syndrome

What percent of pts will go on to develop ophthalmic involvement? 5-10

What is the most common ophthalmic manifestation? Parinaud oculoglandular syndrome (POS)



What is the other common ophthalmic manifestation?



# Uveitis: **Bartonellosis**

#### **Basics**

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What are the two hallmarks of POS?

--A unilateral granulomatous conjunctivitis (note: NOT anterior uveitis)

-- Ipsilateral preauricular and/or submandibular lymphadenopathy

Is Bartonella the only bug that causes POS?

No, a handful of others can as well:

--Chlamydia trachomatis

--Francisella tularensis

--Syphilis!

--TB!

--Sarcoid!

**Neuroretinitis** 

Before discussing Bartonella neuroretinitis specifically, let's review posterior uveitis more generally

What is the other common ophthalmic manifestation?







What are the four basic anatomic locations in which uveitis can originate?



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Which location is most likely to manifest uveitis caused by Bartonella?



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# Uveitis: **Posterior**



Speaking broadly, how many forms of posterior uveitis are there?

(Note: Not just secondary to Bartonella—think more generally)

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Four

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#### Four...?

What defines each form, ie, what separates them one from another? Speaking broadly, how many forms of posterior uveitis are there?

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### Uveitis: **Bartonellosis** Neuroretinitis

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Bartonellosis: CSD: Neuroretinitis with 'macular star'



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*Will slit-lamp exam reveal other signs of inflammation?* Yes, anterior and vitreous cell are both usually present



How is the diagnosis of CSD neuroretinitis made?



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What about steroids--should they be given? The Uveitis book says their efficacy is "unknown"

