What category of bug is implicated in DUSN?
What category of bug is implicated in DUSN?
The nematode
What category of bug is implicated in DUSN?
The **nematode**

What is the common/colloquial name for the nematode?
A

**Diffuse Unilateral Subacute Neuroretinitis**

- **What category of bug is implicated in DUSN?**
  The **nematode**

  *What is the common/colloquial name for the nematode?*
  The **roundworm**
What category of bug is implicated in DUSN? The nematode

Which three nematodes are implicated most often in DUSN?
1)
2)
3)
What category of bug is implicated in DUSN?
The nematode

Which three nematodes are implicated most often in DUSN?
1) *Baylisascaris*
2) *Ancylostoma*
3) *Toxocara*
What category of bug is implicated in DUSN? The nematode

Which three nematodes are implicated most often in DUSN? Which is the most common cause?

1) Baylisascaris?
2) Ancylostoma?
3) Toxocara?
What category of bug is implicated in DUSN?
The nematode

Which three nematodes are implicated most often in DUSN? Which is the most common cause?
1) *Baylisascaris*—most common
2) *Ancylostoma*
3) *Toxocara*
Baylisascaris procyonis (the raccoon roundworm)
What category of bug is implicated in DUSN?
The nematode

Which three nematodes are implicated most often in DUSN? Which is the most common cause?
1) Baylisascaris—most common
2) Ancylostoma
3) Toxocara

What is the infectious load in DUSN, ie, how many worms are typically involved?
What category of bug is implicated in DUSN? The nematode

Which three nematodes are implicated most often in DUSN? Which is the most common cause?

1) Baylisascaris—most common
2) Ancylostoma
3) Toxocara

What is the infectious load in DUSN, ie, how many worms are typically involved? One—there’s a single worm in there
Diffuse Unilateral Subacute Neuroretinitis

DUSN
What category of bug is implicated in DUSN? The nematode

Which three nematodes are implicated most often in DUSN? Which is the most common cause?
1) *Baylisascaris*—most common
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3) *Toxocara*

What is the infectious load in DUSN, ie, how many worms are typically involved? One—there’s a single worm in there

How is DUSN treated?
What category of bug is implicated in DUSN? The nematode

Which three nematodes are implicated most often in DUSN? Which is the most common cause?
1) Baylisascaris—most common
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What is the infectious load in DUSN, ie, how many worms are typically involved? One—there’s a single worm in there

How is DUSN treated? Laser the subretinal critter (if you can find it)
Diffuse Unilateral Subacute Neuroretinitis

Worm

Fried worm s/p laser

DUSN
What category of bug is implicated in DUSN? The nematode

Which three nematodes are implicated most often in DUSN? Which is the most common cause?
1) Baylisascaris—most common
2) Ancylostoma
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What is the infectious load in DUSN, ie, how many worms are typically involved?
One—there's a single worm in there

How is DUSN treated? Laser the subretinal critter (if you can find it)

What are the odds regarding being able to locate the worm?
About 50:50
What category of bug is implicated in DUSN? The nematode

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What is the infectious load in DUSN, ie, how many worms are typically involved? One—there's a single worm in there

How is DUSN treated? Laser the subretinal critter (if you can find it)

What are the odds regarding being able to locate the worm? About 50:50

You strongly suspect DUSN—but can’t find a worm. How should you proceed?
What category of bug is implicated in DUSN? The nematode

Which three nematodes are implicated most often in DUSN? Which is the most common cause?
1) Baylisascaris—most common
2) Ancylostoma
3) Toxocara

What are the odds regarding being able to locate the worm? About 50:50

You strongly suspect DUSN—but can’t find a worm. How should you proceed? Consider a short-but-intense course of systemic antihelminthic therapy—it may immobilize the worm, thereby rendering it easier to find

How is DUSN treated? Laser the subretinal critter (if you can find it)
Who is the typical DUSN pt?
A

**Diffuse Unilateral Subacute Neuroretinitis**

- *Who is the typical DUSN pt?* An otherwise healthy adolescent or young adult
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

DUSN has two stages—what are they?

1) (this stage occurs first)

2)
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

DUSN has two stages--what are they?

1) In the **acute** stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.

2)
A/Q

- **Who is the typical DUSN pt?** An otherwise healthy adolescent or young adult
- **DUSN has two stages--what are they?**
  1) In the **acute** stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.
  2) (then this one)
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

DUSN has two stages--what are they?

1) In the **acute** stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.

2) In **late**-stage disease, the RPE is depigmented, the disc is pallorous and atrophic, and the retinal vessels are attenuated. VA is poor.
Diffuse Unilateral Subacute Neuroretinitis

*DUSN:* Late stage
Diffuse Unilateral Subacute Neuroretinitis

- **Who is the typical DUSN pt?** An otherwise healthy **adolescent or young adult**

- **DUSN has two stages--what are they?**
  1. In the **acute** stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.

  *Hmm... A condition that strikes young, healthy adults...*

  2. In the **late** stage, the RPE is depigmented, the disc is pallorous and atrophic, and the retinal vessels are attenuated. VA is poor.
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

DUSN has two stages--what are they?

1) In the acute stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.

2) In late-stage disease, the RPE is depigmented, the disc is pallorous and atrophic, and the retinal vessels are attenuated. VA is poor.

Hmm…A condition that strikes young, healthy adults…causes decreased vision…
**Who is the typical DUSN pt?** An otherwise healthy adolescent or young adult

**DUSN has two stages--what are they?**

1) In the **acute** stage, **pts c/o decreased VA** and pain. Exam reveals **vitritis**, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.

2) In **late**-stage disease, the RPE is depigmented, the disc is pallorous and atrophic, and the retinal vessels are attenuated. **VA** is poor.

Hmm…A condition that strikes young, healthy adults…causes decreased vision…vitritis…
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

DUSN has two stages--what are they?

1) In the acute stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.

2) In late-stage disease, the RPE is depigmented, the disc is pallorous and atrophic, and the retinal vessels are attenuated. VA is poor.

Hmm…A condition that strikes young, healthy adults…causes decreased vision…vitreitis…multiple small whitish lesions…
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

DUSN has two stages--what are they?

1) In the acute stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.

2) In late-stage disease, the RPE is depigmented, the disc is pallorous and atrophic, and the retinal vessels are attenuated. VA is poor.

Hmm…A condition that strikes young, healthy adults…causes decreased vision…vitritis…multiple small whitish lesions…can wax and wane.
Q

- **Who is the typical DUSN pt?** An otherwise healthy adolescent or young adult
- **DUSN has two stages--what are they?**
  1) In the **acute** stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will **wax and wane**.

Hmm…A condition that strikes young, healthy adults…causes decreased vision…vitritis…multiple small whitish lesions…can wax and wane. Given this description, what general class of condition comes to mind?
● **Who is the typical DUSN pt?** An otherwise healthy adolescent or young adult

● **DUSN has two stages--what are they?**

  1) In the **acute** stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will **wax and wane**.

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*Hmm…A condition that strikes young, healthy adults…causes decreased vision…vitritis…multiple small whitish lesions…can wax and wane. Given this description, what general class of condition comes to mind?*

**White Dot Syndromes.** When faced with a presumptive WDS pt, always consider whether it might be DUSN!
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

DUSN has two stages--what are they?

1) In the **acute** stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.

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**White Dot Syndromes.** When faced with a presumptive WDS pt, always consider whether it might be DUSN!

**White dot syndromes are covered in slide-set R16**
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult.

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White Dot Syndromes. When faced with a presumptive WDS pt, always consider whether it might be DUSN!

Why is it so important to consider DUSN in WDS pts?
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

DUSN has two stages--what are they?

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White Dot Syndromes. When faced with a presumptive WDS pt, always consider whether it might be DUSN!

Why is it so important to consider DUSN in WDS pts? Because if the diagnosis is made at this stage, DUSN can be cured.
Diffuse Unilateral Subacute Neuroretinitis

- **Who is the typical DUSN pt?** An otherwise healthy adolescent or young adult
- **DUSN has two stages--what are they?**
  1) In the *acute* stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.
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Hmm…A condition that strikes young, healthy adults…causes decreased vision…vitritis…multiple small whitish lesions…can wax and wane. Given this description, what general class of condition comes to mind?

**White Dot Syndromes.** When faced with a presumptive WDS pt, always consider whether it might be DUSN!

Why is it so important to consider DUSN in WDS pts? Because if the diagnosis is made at this stage, DUSN can be cured. **But if you fail to diagnosis it, it will proceed inexorably to the untreatable late stage.**
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

DUSN has two stages—what are they?

1) In the **acute** stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.

2) In **late**-stage disease, the RPE is depigmented, the disc is pallorous and atrophic, and the retinal vessels are attenuated. VA is poor.

_Hmm…A condition involving RPE changes…_
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

DUSN has two stages--what are they?

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2) In **late**-stage disease, the RPE is depigmented, the disc is pallorous and atrophic, and the retinal vessels are attenuated. VA is poor.

*Hmm…A condition involving RPE changes…optic disc pallor…*
Q

Diffuse Unilateral Subacute Neuroretinitis

- Who is the typical DUSN pt? An otherwise healthy adolescent or young adult
- DUSN has two stages—what are they?
  1) In the acute stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.
  2) In late-stage disease, the RPE is depigmented, the disc is pallorous and atrophic, and the retinal vessels are attenuated. VA is poor.

Hmm…A condition involving RPE changes…optic disc pallor…attenuated retinal vasculature…
Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

**DUSN has two stages--what are they?**

1) In the **acute** stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.

2) In **late**-stage disease, the **RPE is depigmented**, the **disc is pallorous** and atrophic, and the **retinal vessels are attenuated**. VA is poor.

Hmm…A condition involving RPE changes…optic disc pallor…attenuated retinal vasculature…poor vision.
Q

- **Who is the typical DUSN pt?** An otherwise healthy adolescent or young adult

- **DUSN has two stages--what are they?**
  1) In the **acute** stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.
  2) In **late**-stage disease, the **RPE is depigmented**, the **disc is pallorous** and atrophic, and the **retinal vessels are attenuated**. **VA is poor**.

**Hmm…** An incomplete description of the disease:

Given this description, what specific condition comes to mind?

**Diffuse Unilateral Subacute Neuroretinitis**
- Who is the typical DUSN pt? An otherwise healthy adolescent or young adult

- DUSN has two stages--what are they?
  1) In the **acute** stage, pts c/o decreased VA and pain. Exam reveals vitritis, disc edema, and multiple small gray/white retinal lesions. The signs/symptoms will wax and wane.
  2) In **late**-stage disease, the **RPE is depigmented**, the **disc is pallorous** and atrophic, and the **retinal vessels are attenuated**. **VA is poor**.

Hmm…A condition involving RPE changes…optic disc pallor…attenuated retinal vasculature…poor vision. Given this description, what specific condition comes to mind? **Retinitis pigmentosa**. When faced with a case of ‘unilateral RP,’ always consider DUSN.