THE TALE OF NON-PARANEOPLASTIC AUTO-IMMUNE RETINOPATHY

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Autoimmune retinopathies are a group of immune-mediated diseases of the retina characterized by the presence of antiretinal antibodies, visual field deficits, and photoreceptor dysfunction in the setting of progressive otherwise unexplained vision loss. In biomedical literature this entity is divided in 3 categories: carcinoma-associated retinopathy, melanomaassociated retinopathy and non-paraneoplastic autoimmune retinopathy (NP-AIR). There is considerable overlap between NP-AIR and late onset inherited retinal disease (IRD), more precisely rod-cone dystrophy (retinitis pigmentosa - RP). Clinically, both present with progressive nyctalopia, peripheral visual field loss, centripetal retinal external layer loss and more pronounced dark-adapted ERG changes. Published literature on NP-AIR is scarce and while malignancy workup by appropriate physician is recommended, no specific workup for IRD was common practice in published cases nor part of the recommendations. Furthermore, it is known that RP is oftentimes associated with signs easily confused with inflamatory conditions such as vitreous cells, macular edema, Coats disease-like exsudation, optic disk edema and the presence of antiretinal antibodies. Through extensive literature review the authors discuss wether the exclusion of retinal dystrophy was satisfactory to exclude retinal dystrophy etiology in reported NP-AIR cases or not.