

**RETINAL HEMORRHAGES AFTER CARDIOPULMONARY RESUSCITATION: A  
CASE REPORT**

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**PURPOSE:** Present a clinical case of a 26 years old woman who developed retinal hemorrhages after prolonged Cardiopulmonary Resuscitation

**METHODS:** Case report

**RESULTS:** A 26 years old obese and hypertensive woman was brought to the hospital because of abdominal pain and hypotension, with posterior collapse and cardiopulmonary arrest. Before return of spontaneous circulation (ROSC), she received 1 dose of Alteplase at 30 min of CPA and 1 hour and 10 minutes of Cardiopulmonary Resuscitation (CPR) with chest compressions. Computed Tomography Pulmonary Angiography revealed pulmonary embolism (PE) with signs of right ventricular dysfunction. She was admitted to an intensive care unit, until stabilization, and received anticoagulation with Low Molecular Weight Heparin.

12 days after hospital admission she reported decreased vision in the right eye. On examination, her best-corrected visual acuity was counting fingers in the right eye and 20/20 in the left eye. The anterior segment examination was normal in both eyes, though fundus examination revealed multiple intraretinal and subhyaloid hemorrhages throughout the posterior poles bilaterally, with macular involvement in right eye, supported by Optical coherence tomography findings.

**CONCLUSIONS:** We present a 26 years old woman with PE and cardiogenic shock leading to prolonged resuscitative measures. Adult presentation of Retinal Hemorrhages after CPR is uncommon, and there is little evidence in the literature, however, clinicians should be aware of visual symptoms reported for patients who survived resuscitation attempts, especially in the setting of coexisting risk factors as systemic coagulopathy.