

## Central Retinal Venous Occlusion Associated O Bilateral Optic Nerve Infiltration Revealing Relapse Of An Acute Lymphoblastic Leukemia

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**Abstract :** Introduction: Ocular infiltration of leukemia can involve orbit, uveal tract, retina and optic nerve. It may result from direct ocular infiltration by leukemic cells or indirect ocular involvement resulting from secondary hematologic changes, opportunistic infections and complications of various modalities of therapy. We here in report a case of central venous retinal occlusion associated to optic nerve infiltration as presenting signs of a relapse of acute lymphoblastic leukemia. Case Report: A twelve-year-old male -patient of acute B lymphoblastic leukemia presented with headaches and bilateral blurred vision in the left ee. Ophthalmic examination showed a visual acuity reduced to counting fingers in the right eye and no light perception in the left eye. Funduscopy revealed a voluminous disc edema surrounded by retinal haemorrhages in the right eye, and venous tortusities, papillary edema, and hemorrhages suggesting central retinal venous occlusion in the LE. Swept source optical coherence tomography revealed a serous retinal detachment in the RE and .hyperreflective inner layers with macular edema in the left eye. Cerebro-orbital MRI showed bilateral thickened left optic nerve. There were no radiological signs of true papillary edema due to intracranial hypertension secondary to central nervous system involvement. Myelogram and lumbar punctum demonstrated blast infiltration and confirmed ocular relapse of the leukemia. Conclusion: Ocular involvement lymphoblastic acute leukemias decreased since the introduction of a systematic prophylactic treatment of central nervous system. Periodic ophthalmic examination is necessary to allow early diagnosis and treatment.

**Keywords :** acute leukemia, optic nerve, infiltration, relapse

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