Bilateral Retinitis in Q Fever

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Abstract : Background: Q fever, caused by the obligate intracellular bacterium Coxiella burnetii, is an infectious disease with variable systemic manifestations. Its potential to cause ocular complications has not been reported before in Australia. This case study explores the unusual presentation of asymptomatic acute multifocal retinitis (AMR) in a patient with acute Q fever endocarditis and hepatitis in rural Queensland, Australia. Case Presentation: A 48-year-old male gardener presented with flulike symptoms, weight loss, and encephalopathy. Despite systemic malaise, he had no ocular symptoms. Laboratory investigations confirmed acute Q fever, and imaging studies identified hepatic involvement and endocarditis. The retinal screening revealed asymptomatic AMR, corroborated by fundus examination and SD-OCT. Following treatment with Doxycycline and hydroxychloroquine, both systemic and ocular manifestations improved. Discussion: This is the first documented case of asymptomatic AMR associated with Q fever. The patient's lack of autoantibodies challenges the established understanding of Q fever endocarditis and suggests potential alternative mechanisms. Conclusion: This case report expands our understanding of the multi-systemic impact of Q fever, highlighting the need for comprehensive clinical evaluation and including retinal screening in the setting of acute infection. The disease's underlying mechanism for ocular involvement is not yet established.

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