

Autoimmune Retinopathy

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Outline

1. Making the Diagnosis
 - a. Sudden or rapid onset (typical) where vision was previously normal often with photopsias and scotomata
 - b. Panretinal degeneration without pigment deposits, 90%
 - c. Western blot shows anti-retinal antibodies: some are pathologic and some may not be, number can be taken as a marker of the autoimmune reactivity in the patient.
 - d. Indirect immunohistology validate autoimmune
 - e. Abnormal ERG, negative waveform (suppression is variable)
 - f. Family history of autoimmune disorders very common, and can be used to help make diagnosis
 - g. + Response to immunosuppression therapy
2. Types of Autoimmune Retinopathy (and case examples)
 - a. Cancer Associated Retinopathy (CAR)
 - b. Melanoma Associated Retinopathy (MAR)
All forms (Ciliary, cutaneous, choroidal, flat choroidal nevi.)
 - c. Non-neoplastic AIR with & without cystoid edema
3. AIR Secondary complications
4. Laboratory investigations
 - a. Ins and outs of Western blots, immunoblots
 - b. Immunohistology
5. Current therapeutic approaches
 - a. Anti-oxidant vitamins (e.g, betacarotene, E,C, Lutein, DHA)
 - b. Anti-inflammatories/immunosuppressants