DIABETIC CAPILAROPATHY: A CASE REPORT

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INTRODUCTION.

Uncontrolled diabetes mellitus is a disease with a wide range of systemic and ocular complications. Eye complications may seriously threaten quality of live. Diabetic retinopathy is the most frequent diabetic ocular complication. However, diabetic capilaropathy is a little known condition of diabetic retinopathy. It is an acute optic disc edema, and/or macular edema; due to an acute hyperglycaemia. We present a case of a diabetic 14-years-old female with diabetic capilaropathy.

RESUME OF THE CASE.

A 14-year-old female with poor control of diabetes mellitus who suddenly shows loss of visual acuity associated with headache. Valued in ophthalmology, she presents a decrease in visual acuity associated with bilateral optic disc and macular edema. Eye fundus, angiography, visual evoked potentials, electroneuroreinogram and macular optical coherence tomography are initially altered.
The initial study with blood test, chest X-ray and cranial computerized tomography is normal. Study continues with lumbar puncture, obtaining cerebrospinal fluid with normal opening pressure and normal cytochemical and microbiological analysis. Finally, tuberculin skin test, quantiferon and cranial magnetic resonance are normal too.

OCULAR IMAGES AT THE BEGINING OF DIABETIC CAPILAROPATHY

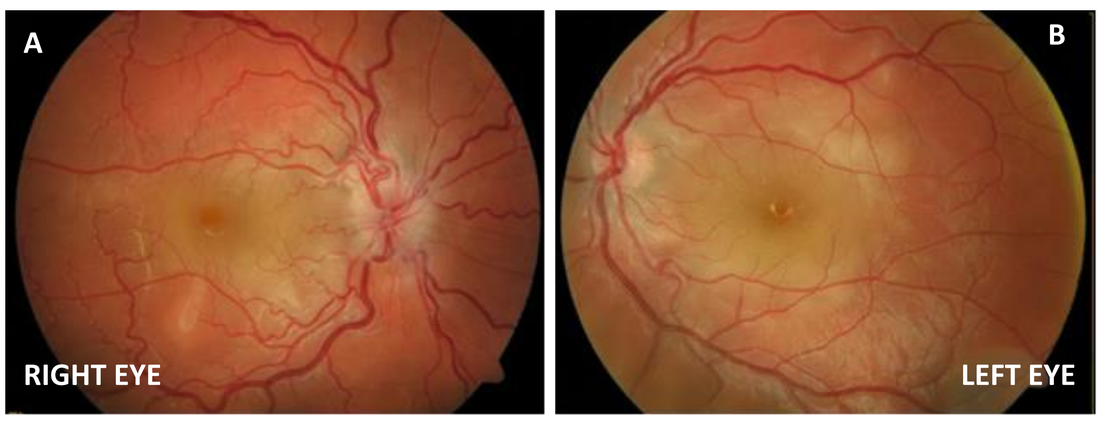

FIGURE 1. EYE FUNDUS
A) Optic disc edema and macular edema. **B)** Small papilar affectation and macular edema.

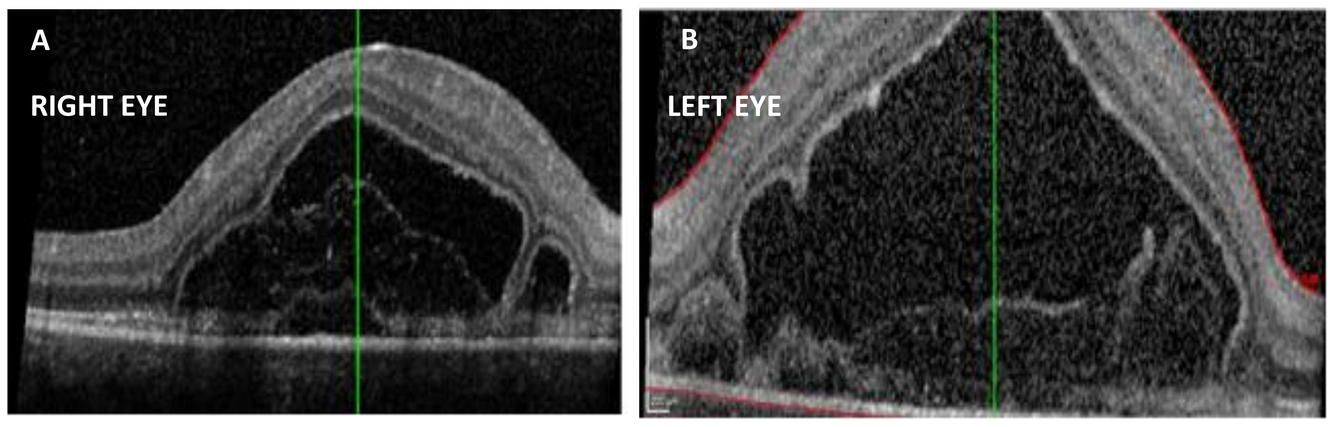

FIGURE 2. OPTICAL COHERENCE TOMOGRAPHY WHEN THE PATIENT STARTS WITH SYMPTOMS
A) B) Sensorineural detachment in both eyes

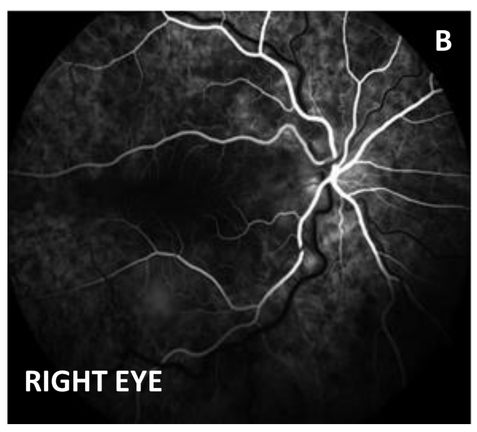

FIGURE 3. RIGHT EYE'S ANGIOGRAPHY
Early macular hipofluorescence **(A)** maintained until the end **(B).**

Metabolic control of diabetes is optimized by insulin therapy. After optimizing the treatment of the diabetes, a good evolution of visual acuity is observed with clinical normalization. Finally, macular optic coherence tomography and eye fundus tests are normalized.

OCULAR IMAGES AT THE END OF DIABETIC CAPILAROPATHY AFTER OPTIMIZING INSULIN THERAPY

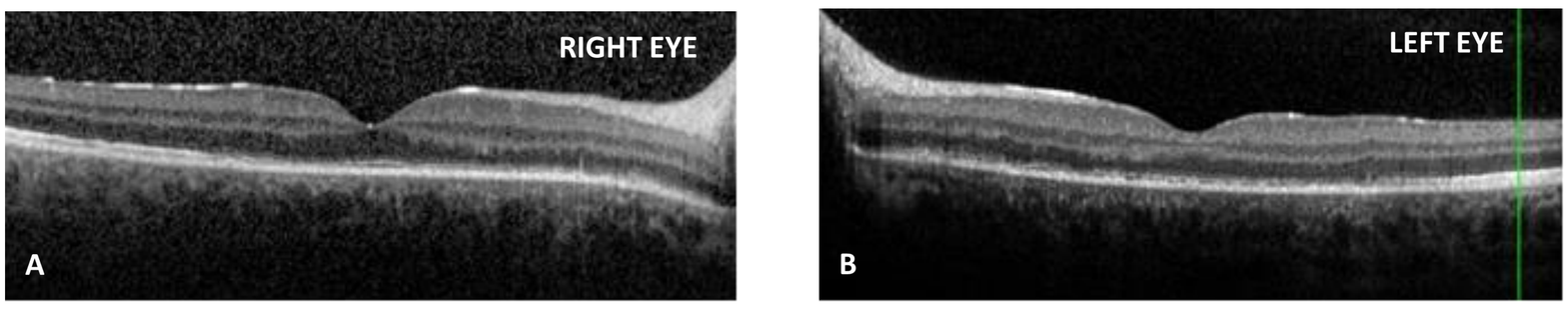

FIGURE 4. OPTICAL COHERENCE TOMOGRAPHY AFTER OPTIMIZING TREATMENT WITH INSULIN
A) B) Normal macular Optical Coherence Tomography

CONCLUSIONS.

1) Poor blood glucose control of diabetes may generate systemic and ocular complications.
2) Although the most well-known ocular complication is diabetic retinopathy, there are other ocular complications derived from poor diabetic control, such as diabetic capilaropathy.
3) The optimization of the treatment with insulin, can improve the diabetic capìlaropathy.