

## Pearls in the Eye

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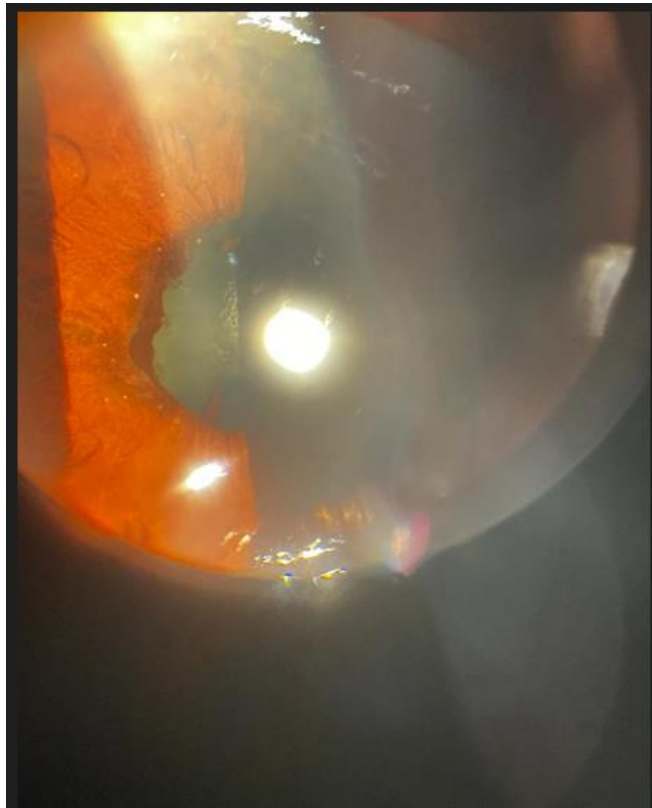
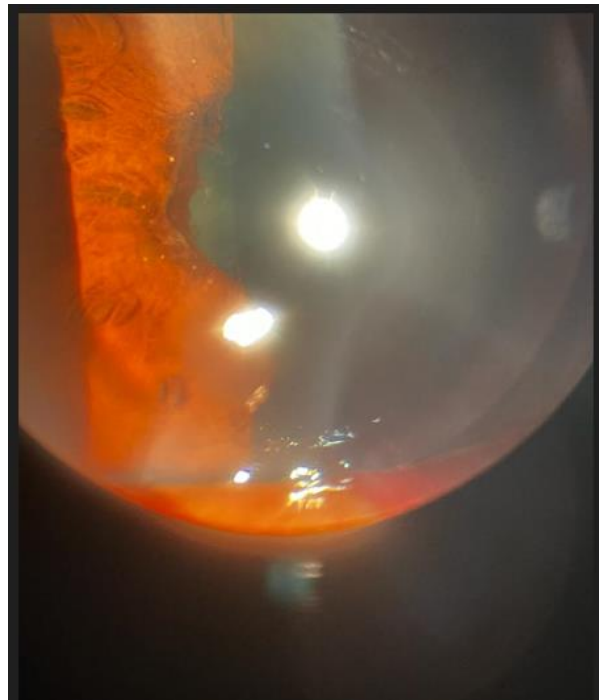
**Abstract:** A 60-year-old female came to our OPD for pain and diminution of vision in her right eye for the past two months.

**Key words:** OPD; B scan; leprosy; ectropion uvea

### Ophthalmic images:

A 60-year-old female came to our OPD for pain and diminution of vision in her right eye for the past two months. Her best corrected visual acuity was 6/60 in the right eye and 6/9 in the left eye. She was a known case of lepromatous leprosy and was on treatment for the past five months from the Department of dermatology. Slit lamp examination of the right eye revealed 1+ cells in the anterior chamber, ectropion uvea plus yellow-white pinhead

sized lesions resembling beads i.e 'iris pearls' around the pupillary area (Figure 1 and 1a) along with posterior subcapsular cataract. Fundus of the right eye could not be seen because of cataract and her B scan was normal. The only significant findings in her left eye were an immature senile cataract. She was started on topical steroids plus cycloplegics and was on a regular followup.

**Figure 1****Figure 1a**

The involvement of eye is seen more commonly in lepromatous leprosy form of the disease. [1] Iris pearls are pathognomonic findings of lepromatous leprosy and are a diagnostic uveal manifestation. They usually resemble a necklace or the beads of a rosary. [2] These are around 0.3 to 1.0 mm in diameter, dull yellow in colour, asymptomatic, and are mostly found around pupillary margins. These bacilli are likely to get lodged in the anterior segment of the eye, as this is the coolest part of the eye. It particularly involves the uveal tissue due to high vascularity of the area. [3] Infectious

uveitis is an uncommon cause of iris nodules. Most cases of uveitis with iris nodules can be attributed to diseases such as sarcoidosis, Vogt-Koyanagi-Harada syndrome, multiple sclerosis, Fuchs heterochromic iridocyclitis and sarcoidosis. [4]

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**Conflicts of Interest:**

The authors declare that they have no competing interest.

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The authors have no proprietary or commercial interest in any material discussed in this article.

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