



## GLAUCOMA, SUP. OCULAR EXTERNA

14:30 | 16:30 - Sala Delfim

Mesa: Fernando Trancoso Vaz, Miguel Ribeiro, Luís Torrão

**PO178- 14:55/15:00**

### OCULAR REACTIONS TO PINE PROCESSIONARY SETAE

Bruno de Sousa Pina, Olga Berens, Paula Ramos, João Rosendo  
(Hospital do Espírito Santo, Évora)

#### Introduction

*Thaumetopoea pityocampa* Schiff. or Pine Processionary is common on the Mediterranean and Middle East regions. Penetration of the urticating hairs (*setae*) from the Pine Processionary caterpillar delivers their allergenic content in addition to causing mechanical and toxic injury.

There are only a few case reports of eye injuries associated with these caterpillars in medical literature.

#### Material and Methods

Case 1: A 42 year-old woman who had been experiencing foreign body sensation for two days after having had contact with caterpillar's *setae*. The biomicroscopy revealed severe conjunctival hyperemia with *quemosis*, corneal oedema with Descemet's folding and multiple linear filaments covering the corneal epithelium, with some buried into the corneal stroma. She had fibrin in the anterior chamber and Tyndall 4+.

Case 2: A 57 year-old man who presented in the emergency room with intense eyelid swelling, *quemosis* and acute keratitis after being exposed to caterpillar's *setae* brought by the wind. He had multiple linear brown strands embedded in the corneal stroma but no apparent anterior chamber reaction.

#### Results

Case 1: She was treated with topical dexamethasone t.i.d. for one month then switched to topical fluorometholone and N-acetyl aspartyl glutamic acid until the absence of infiltrates and filaments in the corneal thickness. The reaction to the remaining superficial filaments was controlled with a slow taper of fluorometholone accompanied by application of bromfenac drops.

Case 2: He got better after two weeks of topical dexamethasone t.i.d. and oral desloratadine. Unfortunately, he failed the follow-up appointment one month later.

#### Conclusions

Exposure to Pine Processionary *setae* can have different clinical presentations. Due to its allergenic and toxic potential, topical corticosteroids are needed.

