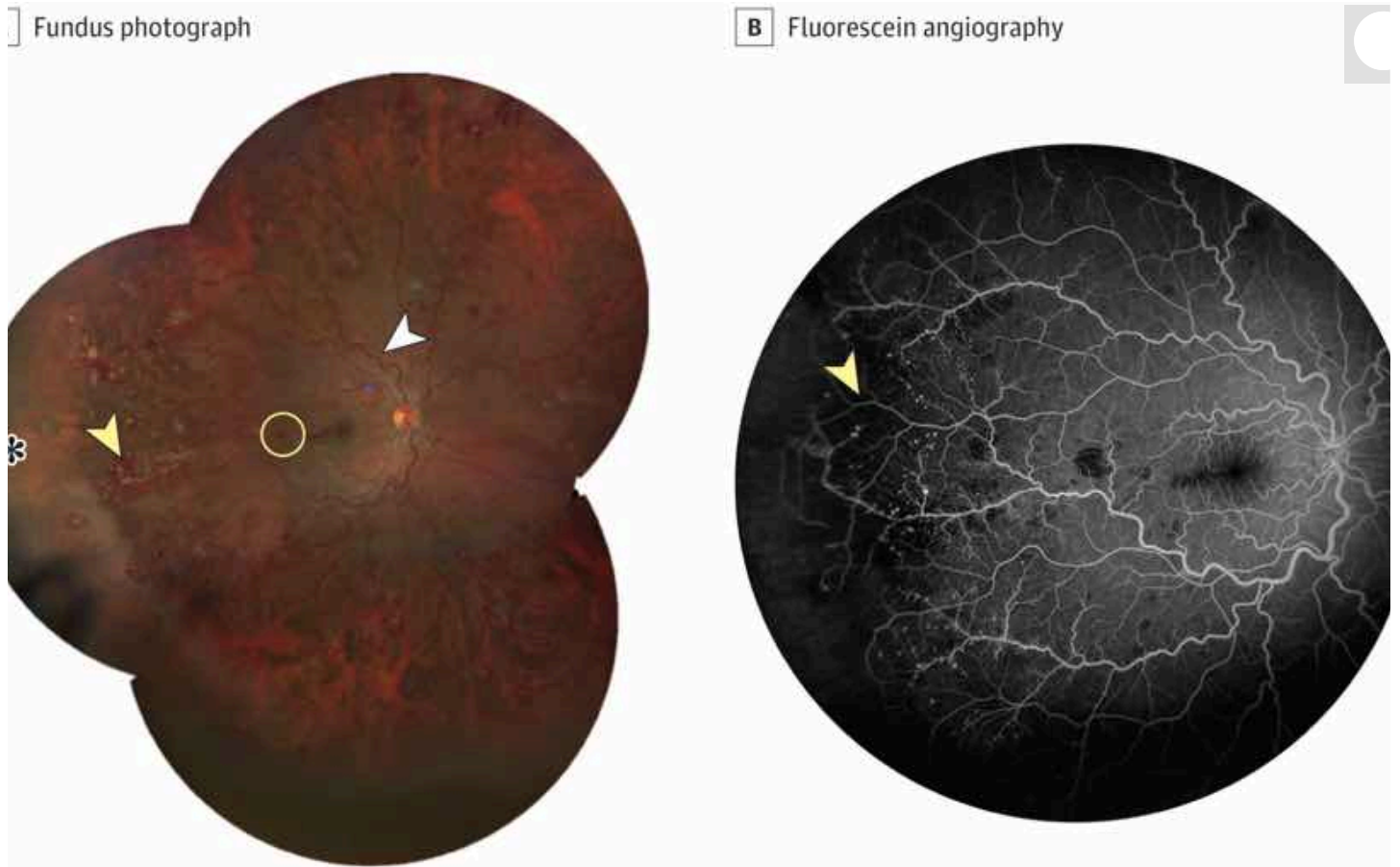


Bilateral Retinal Vascular Tortuosity and Hemorrhages

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A 28-year-old man was referred to the medical retina service for evaluation of bilateral retinal vasculopathy noted by his general ophthalmologist. Medical and family histories were unremarkable, and there was no record of prolonged medication use. The patient reported a decrease in visual acuity in his right eye for the past 2 weeks but did not express any systemic symptoms, such as fever, increased heart rate, or fatigue. His best-corrected visual acuity was 20/25 OD and 20/20 OS. The pupils were round and responsive, and there were no notable abnormalities in the anterior segment. Fundus examination confirmed the presence of dilated and tortuous veins, along with white-centered retinal hemorrhages (ie, Roth spots) (Figure, A). Furthermore, the retinal periphery

exhibited white intraretinal agglomerates and nonperfused areas. Fluorescein angiography demonstrated peripheral retinal vasculopathy with microaneurysms and retinal capillary nonperfusion ([Figure, B](#)).