

Trabeculitis during herpetic uveitis: anterior segment optical coherence tomography findings

Trabeculite durante uveíte herpética: achados de tomografia de coerência óptica do segmento anterior

Nisrine Laaribi¹ , Karim Reda¹ 

¹ Department of Ophthalmology, Mohammed VI Faculty of Medicine Rabat, Mohammed VI University of Sciences and Health, Rabat, Morocco.

How to cite:

Laaribi N, Reda K. Trabeculitis during herpetic uveitis: anterior segment optical coherence tomography findings. Rev Bras Oftalmol. 2026;85:e0075.

doi:

<https://doi.org/10.37039/1982.8551.20260075>

Keywords:

Uveitis; Keratitis, herpetic;
Anterior eye segment;
Tomography, optical coherence

Descritores:

Uveíte; Ceratite herpética;
Segmento anterior do olho;
Tomografia de coerência óptica

Received on:
May 8, 2026

Accepted on:
June 3, 2026

Corresponding author:

Nisrine Laaribi
Department of Ophthalmology,
Mohammed VI Faculty of Medicine Rabat,
Mohammed VI University of Sciences and
Health
Rabat, Morocco
E-mail: nisrine.laaribi@gmail.com

Institution:

Department of Ophthalmology,
Mohammed VI Faculty of Medicine Rabat,
Mohammed VI University of Sciences and
Health, Rabat, Morocco.

Conflict of interest:
no conflict of interest.

Financial support:
no financial support for this work.

Associate Editor:

Ricardo Augusto Paletta Guedes
Universidade Federal de Juiz de Fora, Juiz
de Fora, MG, Brazil.
<https://orcid.org/0000-0002-9451-738X>



Copyright ©2026

A 34-year-old man presented with pain and blurring vision in the right eye for 24 hours. The best-corrected visual acuity was 9/10 in the right eye. Slit-lamp examination of the right eye revealed conjunctival injection, three white granulomatous corneal precipitates (Figure 1), one of them behind a stromal infiltrated area. A white tyndall effect in the anterior chamber at one cross and ocular hypertension at 50 mmHg were noticed. Gonioscopy shows a 360° open angle with a flat iris insertion root. Anterior segment optical coherence tomography (AS-OCT) revealed globular corneal precipitates appearing as protrusions attached to the endothelium (Figure 2), floating cells in the anterior chamber and hyper-reflectivity of the trabecular meshwork due to the presence of cellular infiltration (Figure 3). The diagnosis of likely herpetic uveitis was made. The patient received valacyclovir 3 g per day with hypotonizing treatment. The intraocular pressure of the right eye was 17 mmHg after 2 days. Topical corticosteroids were added to the treatment with full improvement of symptoms and signs of herpetic uveitis.

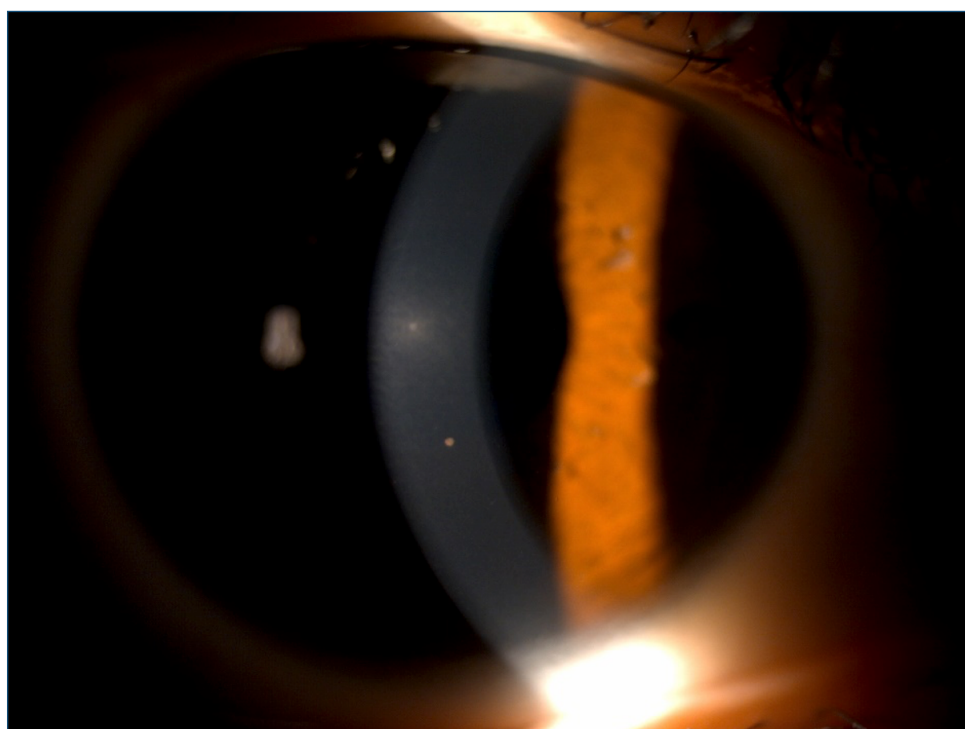


Figure 1. Slit-lamp examination revealed three white granulomatous corneal precipitates, one of them behind a stromal infiltrated area.

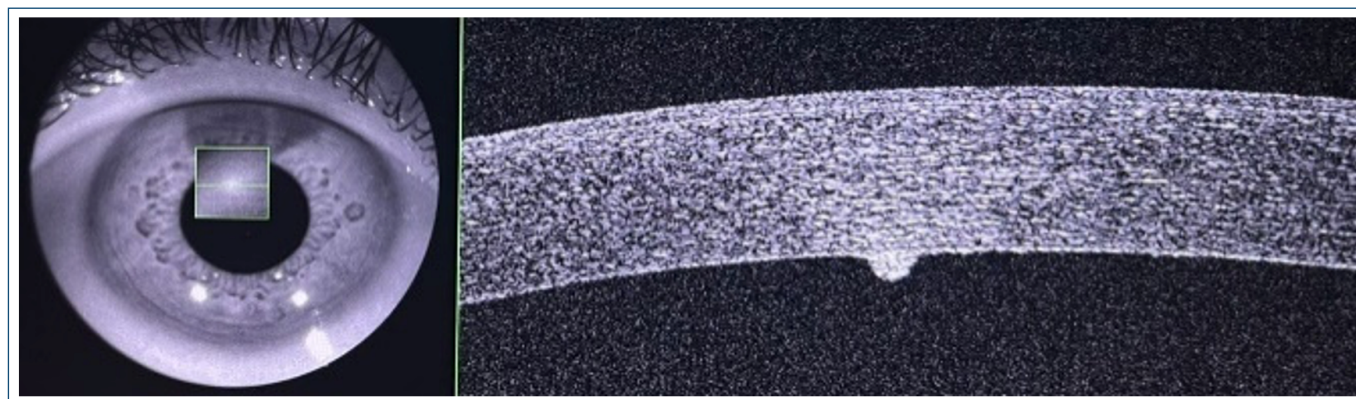


Figure 2. The anterior segment optical coherence tomography revealed globular corneal precipitates appearing as protrusions attached to the endothelium.

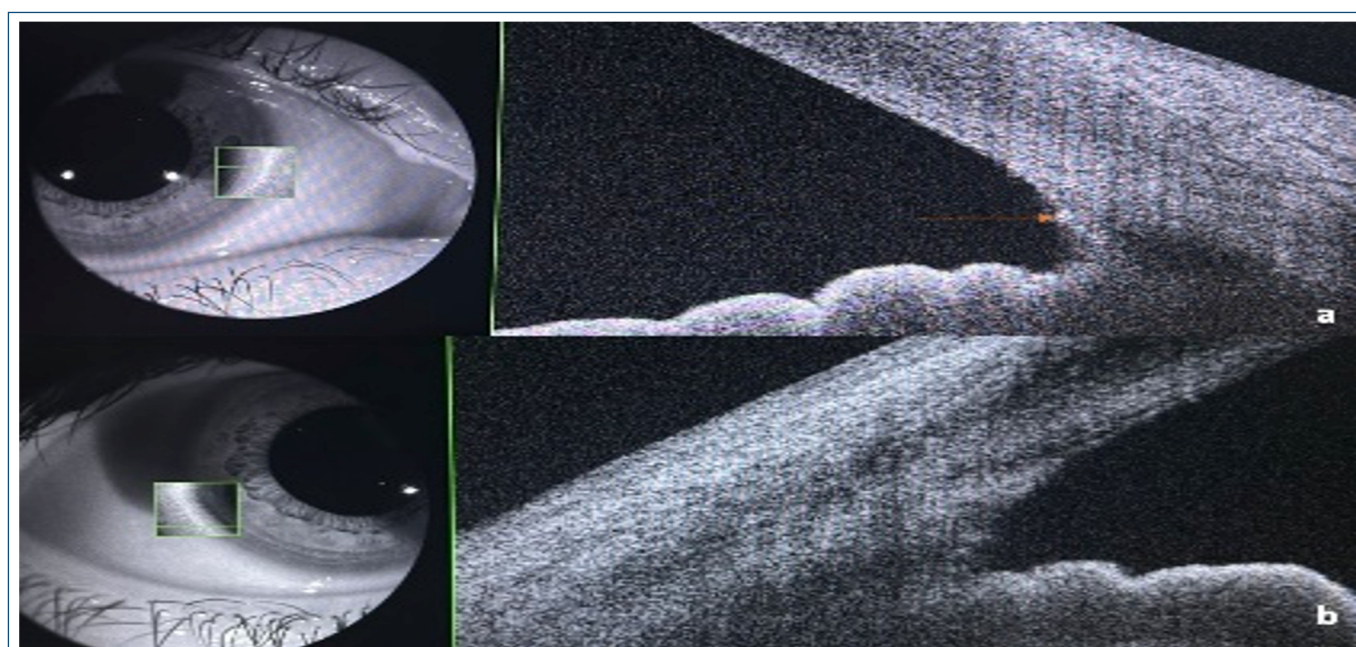


Figure 3. (A) Trabeculitis on anterior segment optical coherence tomography: hyper-reflectivity (arrow) of the nasal trabecular meshwork due to the presence of cellular infiltration. (B) Normal reflectivity of the temporal trabecular meshwork.

Granulomatous corneal precipitates and stromal infiltrate are typical signs of herpetic uveitis, especially when associated to intraocular hypertension. In this case, we report hyper-reflectivity of the trabecular meshwork as tomographic sign of trabeculitis associated to herpetic uveitis. Trabeculitis would be the cause of ocular hypertension. This sign is rarely reported.⁽¹⁾

AUTHORS' CONTRIBUTION

Laaribi N and Reda K contributed equally to the writing and critical revision of the manuscript. All authors approved the final version of the manuscript.

REFERENCES

1. Soliman W, Nassr MA, Abdelazeem K, Al-Hussaini AK. Appearance of herpes simplex keratitis on anterior segment optical coherence tomography. *Int Ophthalmol*. 2019;39(12):2923-8.