We present the case of a 72-year-old female with invasive ductal mammary carcinoma undergoing neo-adjuvant chemotherapy with paclitaxel, who was referred to our service for decreased visual acuity in her only functional eye. Retinography revealed a hyperreflective macula, with sheathing and diffuse decrease in arteriolar caliber, as well as bilateral optic disc pallor (Fig. 1 A). Swept-source optical coherence tomography showed retinoschisis and cystoid macular edema in both eyes (Fig. 1 B), with no leakage on fluorescein angiography (Fig. 1 C). Paclitaxel was discontinued after discussion with her oncologist and topical treatment with dorzolamide was initiated, achieving complete resolution of the pharmacological toxicity 8 months later, although with the persistence of choriotirenal folds (Fig. 1 D)

Conflicts of interest

The authors declare no conflicts of interest.

Ethical disclosures

Protection of human and animal subjects. The authors declare that no experiments were performed on humans or animals for this study.

Confidentiality of data. The authors declare that no patient data appear in this article.

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