Photophobia in a Patient with Hashimoto’s Thyroiditis

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A 31-year-old Vietnamese woman presented to our hospital for photophobia. On an examination, right-sided mydriasis with a poor reaction to light (Picture A, arrow) and non-tender goiter (B) were noted. No dyshidrosis or areflexia was observed. Positive anti-thyroid peroxidase and thyroglobulin antibodies and diffusely enlarged thyroid goiter that exhibited a heterogeneous pattern of the parenchyma by ultrasound (C) led to the diagnosis of Hashimoto thyroiditis with Adie’s tonic pupil. Her photophobia gradually resolved with pilocarpine eye-drops. Adie’s tonic pupil is an autonomic nervous system disorder characterized by mydriasis with a poor light response. It is 3 times more common in women than in men and is unilateral in 80% of cases. Patients may have areflexia. Infection, malignancy, trauma and granulomatous diseases, such as sarcoidosis, have been suggested to cause the syndrome. Coincidence of Adie’s tonic pupil with autoimmune hepatitis, celiac diseases and scleroderma has been reported (1, 2). However, there have been no reports regarding autoimmune thyroid disorders and Adie’s tonic pupil. Therefore, when encountering a case of photophobia of unknown etiology, the thyroid should be routinely checked.

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