

Various clinical presentations of uveitis associated with durvalumab treatment

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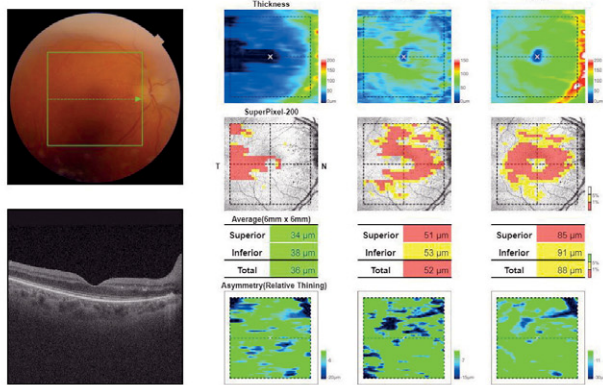
SUPPLEMENTARY TABLE 1. Case I. Work up of patient data. Results were within normal limits

Complete blood cell count
C-reactive protein
Erythrocyte sedimentation rate
Serum angiotensin-converting enzyme
Treponemal chemiluminescence immunoassay
Interferon-gamma release assay
Chemiluminescence immunoassay for detection of <i>Borrelia burgdorferi</i>

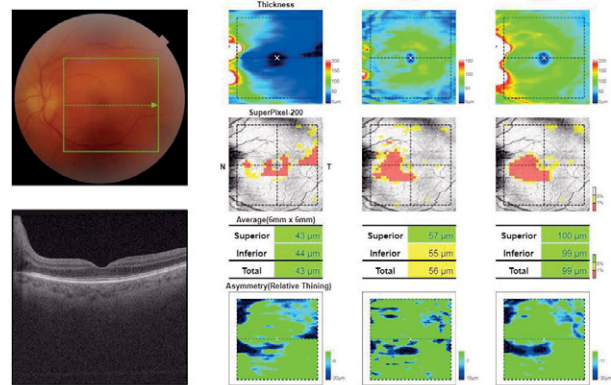
SUPPLEMENTARY TABLE 2. Case II. Work up of patient data. All serology and PCR results were negative, except for positive *Toxoplasma gondii* IgG antibodies that indicated past infection

Complete blood cell count
C-reactive protein
Erythrocyte sedimentation rate
Serum angiotensin-converting enzyme
Treponemal chemiluminescence immunoassay
Interferon-gamma release assay
Chemiluminescence immunoassay for detection of <i>Borrelia burgdorferi</i>
Toxoplasma, <i>Toxocara</i> and <i>Bartonella</i> serology testing
SARS CoV-2 antigen testing
Rheumatological autoantibody testing (HEp-2, aCL, anti-beta2GPI, ANCA/MPO/PR3)
Aqueous humour PCR (<i>Toxoplasma</i> , Varicella zoster virus, Herpes simplex 1, Herpes simplex virus 2)

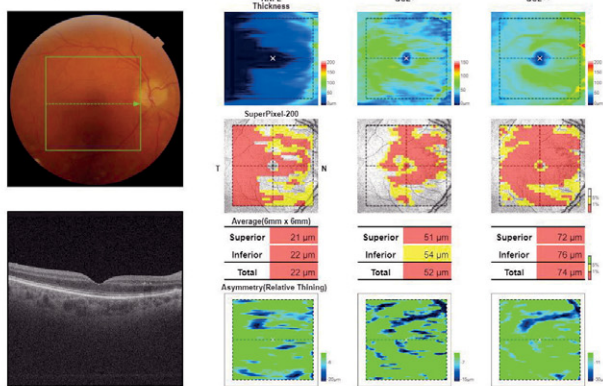
OD(R) at presentation



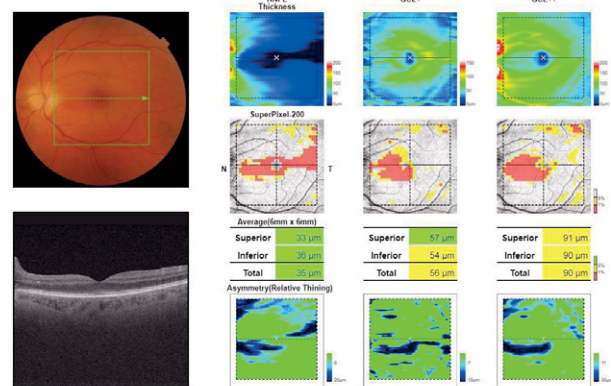
OS(L) at presentation



OD(R) 5-week follow-up



OS(L) 5-week follow-up



SUPPLEMENTARY FIGURE 1. Case I. Retinal nerve fibre and ganglion cell layer trend. Right and left eye at presentation and five weeks on methylprednisolone treatment.

OD(R) = oculus dexter (right); OS(L) = oculus sinister (left)