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### Rare neurological and ocular complication of adalimumab therapy in psoriasis: aseptic meningitis coexisting with Posner-Schlossman syndrome

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#### Introduction

Aseptic meningitis is a condition in which cerebrospinal fluid shows increased white blood cells despite no detectable infection. It is most often caused by viral infections or drug reactions, but in some cases the cause remains unknown. Posner-Schlossman syndrome is a rare eye disorder that leads to inflammation of the anterior part of the eye and temporary increases in intraocular pressure.

#### Materials and Methods

A 35-year-old male patient with severe plaque psoriasis treated with adalimumab was hospitalized in the 12th week of therapy due to a three-week history of frontal headache, right ocular pain, fever, nausea, and vomiting. Diagnostic work-up included laboratory and cerebrospinal fluid tests, microbiological and molecular screening, serology, and brain MRI. Ophthalmology consultation was performed because of vision worsening.

#### Results

Laboratory tests showed mildly elevated C-reactive protein levels. Analysis of cerebrospinal fluid revealed lymphocytic pleocytosis with borderline protein and glucose concentrations. Extensive microbiological and molecular testing of CSF and blood, including PCR for CMV, enteroviruses, herpesviruses (HSV-1, HSV-2, HHV-6, VZV), *Cryptococcus*, and common bacterial pathogens, were all negative. SARS-CoV-2, HIV, HBV, HCV, and tick-borne encephalitis were excluded. Brain MRI showed no abnormalities. Ophthalmologic evaluation revealed unilateral acute secondary open-angle glaucoma with concomitant anterior uveitis, consistent with Posner-Schlossman syndrome. Symptomatic treatment and intraocular pressure-lowering therapy resulted in slight clinical improvement. However, after cessation of adalimumab use and switch to tildrakizumab, complete resolution of neurological symptoms was observed.

#### Conclusions

This case highlights a rare complication of adalimumab therapy presenting as aseptic meningitis coexisting with Posner-Schlossman syndrome. It emphasises the importance of considering drug-induced neurological and ocular adverse events in patients receiving biological therapies, particularly in the presence of atypical or persistent symptoms. Early recognition and timely modification of biological therapy may prevent further neurological and ocular complications and improve clinical outcomes.

