Table 3. Best-corrected visual acuity, treatment and outcomes in 16 patients with CV and ocular manifestations.

Patient no.	BCVA A	BCVA B	Follow-up (months)	Anti-HCV regimen	Additional treatment	Virologic, cryoglobulin and systemic outcome	Ophthalmologic outcome
1	0.4–0.6	0.3–0.25	37	IFN-α2b + RBV	Ocular lubricants, cyclosporine drops, LD-GCs	SVR, no detectable CGs and improvement of extra-ocular manifestations	Remarkable improvement of all ocular symptoms and recovery of visual acuity
2	0.5–.0.7	0.5–0.6	15	IFN-α2b + RBV	Ocular lubricants, LD-GCs	SVR. Cryocrit and clinical features of vasculitis decreased by roughly 50%	Persistence of itching but disappearance of burning sensation
3	1.0–0.8	0.8–0.7	45	Sofosbuvir/velpatasvir	Artificial tears, LD-GCs	SVR. CGs reduced but still present; overall clinical improvement	Pain, grittiness and excessive blinking partially improved
4	0.9–0.5	0.8–0.5	66	Sofosbuvir/Ledipasvir	Artificial tears, cyclosporine drops	No viral clearance and no change in the level of CGs	Ocular symptoms mostly unchanged
5	1.0–1.0	0.7–0.7	32	Sofosbuvir/ledipasvir	Ocular lubricants, GCs, RTX	SVR, disappearance of CGs and major signs of vasculitis	Remarkable improvement of all ocular symptoms
6	1.3–1.0	1.1–0.9	29	None	Serum tears, punctal plugs OU, HCQ, Leflunomide	<50% reduction of CGs, persistence of xerostomia and polyneuropathy	No subjective improvement, corneal keratopathy mostly unchanged
7	1.2–0.75	1.0–0.7	43	None	Cyclosporine drops, MMF, RTX,	Disappearance of CGs, improvement of oral sicca symptoms and arthralgias	Significant improvement in lacrimal gland function
8	0.6–1.4	0.6–0.6	51	IFN-α2b + RBV	GCs, MTX, RTX	SVR, disappearance of CGs and CV	Complete resolution of the ulcer
9	1.0–0.7	1.1–0.8	25	IFN-α2b + RBV	GCs, MTX, RTX	SVR, disappearance of CGs and CV	Improvement in visual acuity
10	0.8–0.7	0.3–0.3	39	None	Therapeutic apheresis followed by Ibrutinib + RTX	>75% reduction of CGs, very good partial response of Waldenström macroglobulinemia	Regression of ocular manifestations and recovery of visual acuity
11	0.8–0.9	0.7–0.8	33	None	GCs + RTX resulting in partial response of the B-NHL	<50% reduction of CGs. At relapse, 16 months later, very good partial response achieved with R-CHOP regimen	Limited improvement of fundus findings and visual acuity
12	1.0–0.95	0.8–0.6	36	Sofosbuvir/velpatasvir	Losartan, hydrochlorothiazide, CPH, RTX	SVR, undetectable CGs, remarkable improvement of renal function	Regression of flame–shaped hemorrhages and papilledema
13	1.2–1.0	1.1–1.1	14	3D-combo	Losartan, hydrochlorothiazide, intermittent hemodialysis	SVR, minor reduction of CGs, slight improvement of renal function and cutaneous vasculitis	Minor improvement of arteriolar narrowing in OD, unchanged visual acuity in OU
14	0.8–0.5	0.6–0.1	29	3D-combo	GCs, CPH, ramipril, furosemide	SVR, no detectable CGs, disappearance of CV manifestations	Normalization of fundus findings and restoration of visual acuity
15	1.1–0.8	0.9–0.5	31	IFN-α2b + RBV	GCs, RTX, therapeutic apheresis	SVR, > 75% reduction of CGs, disappearance of CV manifestations	Improvement of fundus findings and partial restoration of visual acuity

16	0.8–1.2	0.5–0.8	56	3D-combo	GCs, three intravenous pulses of CPH, RTX, ramipril	SVR, disappearance of CGs and CV manifestations	Disappearance of Purtscher flecken and relevant recovery in visual acuity

Abbreviations. BCVA: best-corrected visual acuity; A: at diagnosis; B: at last follow-up; CHOP: cyclophosphamide/doxorubicin/vincristine/prednisone; CPH: cyclophosphamide; 3D-combo: ombitasvir/paritaprevir/ritonavir ± dasabuvir; GCs: glucocorticoids; HCQ: hydroxychloroquine; IFN-α2b: pegylated interferon-α; LD-GCs: low-dose glucocorticoids; MMF: mycophenolate mofetil; MTX: methotrexate; NSAIDs: non-steroidal anti-inflammatory drugs; RBV: ribavirin; RTX: rituximab; SVR: sustained virologic response.