Abstract

Homocysteine, a byproduct of methionine breakdown, plays a crucial role in the body's metabolic processes. Disruptions in homocysteine metabolism can lead to elevated homocysteine levels, which, in turn, heighten the risk of venous thrombosis and atherosclerosis. We present a case of a young patient presented with an elevated homocysteine level of 30.80 µmol/L and a diagnosis of homocysteinaemia, exhibiting signs of retinal vein thrombosis. However, thorough thrombophilic screening yielded negative results. This case underscores the importance of considering homocysteinaemia in the differential diagnosis when a young patient presents with thrombotic symptoms. Early recognition and appropriate investigation can be instrumental in preventing potentially severe complications associated with elevated homocysteine levels, highlighting the significance of vigilance in clinical practice.