A Post Traumatic Sequelae with Paracentral Epithelial Defects by Dematiceous Fungi – Curvularia Sp., Causing Corneal Ulcer Due To Trauma by Vegetation.

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INTRODUCTION:

Mycotic keratitis has been discovered in the year of 1879 by leber (1). Corneal ulceration is due to the virulent pathogens. The invading of the pathogens and certain endocrinal disorders, the cornea and the eyeball get perforated corneal ulcer (2). The habitat of the fungi is observed in the tropical and subtropical regions that leads to the corneal injury by the simple accidental incidences (1). These region are infected by the plant debris due the increase rate of agronomy occupation. (4,5). In the year of 2000 melvyl medicine obtain 12 cases of laser insitu keratomycosis among the one of the cases the curvularia species is identified (3). Curvularia has been the most important fungi involved in mycotic keratitis (6). The major objective of this study reveals the dematiceous fungi – curvularia sp, causing corneal ulcer due to trauma by onion peeling, which may be help in early diagnostics and conventional microbiological techniques such as microscopical analysis and culture methods are leading to be effective management and effective treatment to decrease the ocular morbidity.

CASE REPORT

A 50 old female working in onion godown, when she peel the onion skin a small particle hit the eyes. She was presented with pain and redness in the right eye along with photophobia and edema in the upper and lower eyelid.

CLINICAL EXAMINATION:

The upper and lower eyelid got oedema. The ocular movement is full in cornea, the ulcer is seen at the periphery of the cornea. Both the eye the tension is normal. visual acuity of the right eye is 6/60 w, visual acuity of the left eye is shows blurred vision. The corneal vascularization is seen with epithelial defects with retro corneal abscess.

Acqueous chamber is flat with whole vascularised mass in the papillary arc. No evidence in corneal perforation.

MICROBIOLOGICAL EXAMINATION:

MICROSCOPIC EXAMINATION

The smear was carried out and the following microscopical analysis was done.

KOH MOUNT: Fungal filaments was observed under 40x

GRAMSTAINING: Gram positive cocci was observed under 100x

MACROSCOPIC EXAMINATION

CULTURAL METHODS:

The material is inoculated in the following medium

Blood agar, sabourauds dextrose agar.

CULTURE OBSERVATION:

In blood agar no growth is observed after the 48 hours of incubation. In sabourauds dextrose agar the velvety with dark brown to black at 25 c after 4 days with the help of the inoculation needle the fungal colony is teased and stains with lactophenol cotton blue stain observe under the highpower objective the LPCB mount were done and reveals the conidiogenous cell, with has transverse septa and is shaped like an ellipse with three to five cells, the central cells is bulged with dark brown in colour from the microscopic observation the curvularia sp., was identified.

TREATMENT:

At the time of admission, ciprofoloxacin, Voveran was prescribed to the patient. After the
Treatment the patient was reviewed by uvea clinic, by the clinical examination aqueous chamber is flat, and whole vascularised mass in the papillary arc. No evidence of perforation.

After five days the patient was reviewed that a case of post traumatic sequelae with paracentral epithelial defects and the treatment was carried out. the drug was prescribed to the patient such as natamycin, moxifloxacin and ranitidine the ulcer was healed and visual acuity was improved. She was discharged after four days from the second review.

DISCUSSION:

Mycotic keratitis is a more prevalent infection which is seen in tropical and sub-tropical regions. Due to the fungal keratitis there is an increase in the ocular morbidity. The majority of the fungal infection is due to trauma by accident with the vegetative matter(1). Trauma with onion peel or onion dust by fusarium (2). But our case study deals with the Curvularia causing the corneal ulcer due to onion peel. The most of the fungi seen in the vegetative matter causes to damage the corneal tissues and leads to the lethal complications. The Natamycin is the only antifungal drug to cure corneal ulcers. While administering, the natamycin should be administered for 6 times per day which gives a good result, and the patient is easily recovered within 15 days.

CONCLUSION:

From this case report we conclude that the fungal infection in the contaminated vegetable matter is relatively easy to cause the infection which leads to increase the loss of vision and other ophthalmic complications. An accurate microbiological diagnostics and treatment with antifungal drug that makes the patient to get a better vision. To see this blooming world.

REFERENCES:

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