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Chairs: Vladimir Pfeifer and Petra Schollmayer

OR-087

Prevalence of keratitis in General hospital Novo Mesto in year 2023 and 2024

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Purpose: To examine the data of patients treated for keratitis in the past two years at the General Hospital Novo mesto. Metode: From Birpis, we obtained data on all patients who were diagnosed with the following conditions in 2023 and 2024: H16.0 (Corneal ulcer), H16.1 (Superficial keratitis), H16.3 (Interstitial and deep keratitis), H16.8 (Other types of keratitis), and H16.9 (Unspecified keratitis). A total of 236 cases were reviewed. We excluded improperly diagnosed cases, keratopathy as part of dry eye syndrome, and repeated patients.

Results: In 2023 and 2024, the General Hospital Novo mesto treated 109 patients with keratitis, of which 66 were women and 43 were men. Patients ranged in age from 2 months to 83 years, with an average age of 48 years. 36 patients were contact lens wearers (32%). Eight patients were treated before arriving at our hospital. Swabs were taken from 42 patients, of which 5 were taken before coming to us (at the Eye Clinic or abroad). Microorganisms grew in 31% of the collected swabs, with the most common being *P. aeruginosa*, followed by *S. aureus* and *S. pneumoniae*. *Pseudomonas aeruginosa* was exclusively found in contact lens wearers. Two microbiological analyses of contact lenses were performed, in both cases, 3-4 microorganisms grew. The duration of topical antibiotic treatment averaged 3 weeks, with recurrences occurring in 5 patients. Twelve patients required systemic therapy. There were 2 telephone consultations with the Eye Clinic and 6 referrals to the Eye Clinic, the reasons included ulcer perforation, hypopyon, no improvement in a child, young age (2 months), and worsening despite dual antibiotic therapy.

Conclusion: We found that microorganisms grew in only one-third of the collected swabs. The microbiological analysis of contact lenses was more successful in terms of microorganism growth, but microorganisms that did not cause inflammation on the cornea and did not require antibiotic or antifungal treatment also grew. There was an increased growth of *Pseudomonas aeruginosa* in contact lens wearers, so it would be advisable to improve awareness regarding hygiene and contact lens wear, keep records of the length of contact lens wear, and how often these patients change their lens cases and clean their lenses. In the future, we can also expect more cases of keratitis or other eye inflammations due to the use of artificial eyelashes; in the last two years, we have had two such patients.

Prevalenca keratitiso v Splošni bolnišnici Novo mesto v letih 2023-2024

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Namen: Preučiti podatke pacientov, zdravljenih zaradi keratitisa v zadnjih dveh letih v Splošni bolnišnici Novo mesto. Metode: Iz Birpisa sva pridobili podatke vseh pacientov, katerim so bile v letih 2023 in 2024 postavljene sledeče diagnoze: H16.0 (Ulcus corneae), H16.1 (površinski keratitis), H16.3 (intersticijski in globoki keratitis), H16.8 (Keratitis druge vrste) in H16.9 (Keratitis, neopredeljen).Pregledanih je bilo 236 primerov. Izključili sva neustreznost postavljene diagnoze, keratopatijo v sklopu suhega očesa in ponovljene paciente.

Rezultati: V letih 2023 in 2024 smo v Splošni bolnišnici Novo mesto zdravili 109 pacientov s keratitisom, od tega 66 žensk in 43 moških. Pacienti so bili stari od 2 mesecev do 83 let, povprečna starost je bila 48 let. 36 je bilo nosilcev kontaktnih leč (32%). Pred prihodov v našo bolnišnico je bilo zdravljenih 8 pacientov. Bris je bil odvzet pri 42 pacientih, od tega pri 5 pacientih pred prihodom k nam (na Očesni kliniki ali v tujini). Mikroorganizmi so porasli pri 31% odvzetih brisov, največkrat porasel mikroorganizem je bil *P. aeruginosa*, temu sledi *S. aureus* in *S. pneumoniae*. *Pseudomonas aeruginosa* je porasel izključno pri nosilcih kontaktnih leč. Narejeni sta bili 2 mikrobiološki analizi kontaktnih leč, v obeh primerih so porasli 3-4 mikroorganizmi. Trajanje topikalnega antibiotičnega zdravljenja je bilo v povprečju 3 tedne, recidivi so se pojavili pri 5 pacientih. 12 pacientov je potrebovalo sistemsko terapijo. Opravljeni sta bili 2 telefonski konzultaciji z Očesno klinikou in 6 napotitev na Očesno klinikou, razlogi so obsegali perforacijo ulkusa, hipopion, neizboljšanje pri otroku, nizko starost (2 meseca) in poslabšanje kljub dvotirni antibiotični terapiji.

Zaključek: Ugotovili smo, da so mikroorganizmi porasli le pri tretjini odvzetih brisov. Mikrobiološka analiza kontaktnih leč je bila v smislu porasta mikroorganizmov večkrat uspešnejša, vendar so porasli tudi mikroorganizmi, ki na roženici niso povzročili vnetja in jih antibiotično oz. antiglivično ni bilo treba pokriti. Pri nosilcih kontaktnih leč je bilo zaslediti povečan porast *Pseudomonasa aeruginose*, zato bi bilo smiselno izboljšati ozaveščanje glede higiene in nošnje KL, voditi podatke

o dolžini nošenja KL, kako pogosto ti pacienti menjajo posodico za leče in kako pogosto leče čistijo. V prihodnosti lahko pričakujemo tudi več pojavov keratitisov ali drugih očesnih vnetij zaradi uporabe umetnih trepalnic, pri nas smo v zadnjih 2 letih imeli dve takšni pacientki.