

Bilateral infectious corneal perforation due to *Neisseria gonorrhoeae*

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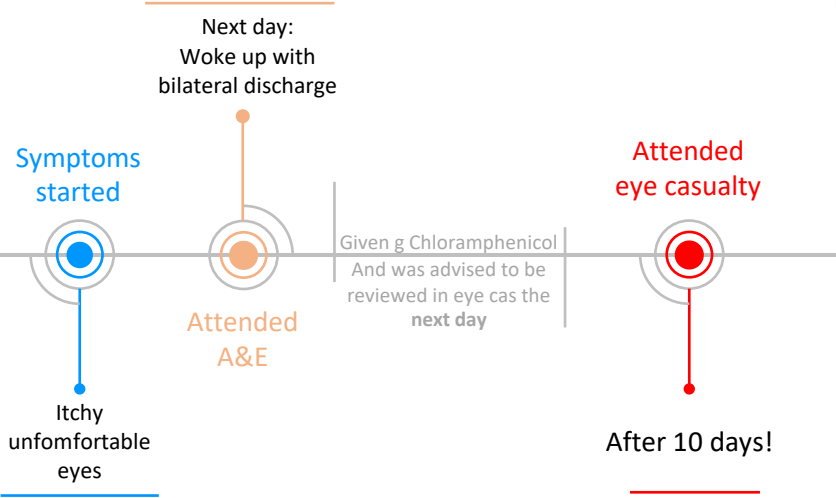


Presentation



Case report of a rare occurrence of bilateral corneal perforation due to gonococcal infection

45 year old male, working as a security guard in a nightclub



Bilateral severe mucopurulent discharge
Subconjunctival haemorrhages

Right superior corneal melt with iris prolapse, shallow AC

Left superior corneal melt and keratitis

VA Right CF, Left PL

Samples for gram staining
Hourly Ciprofloxacin and Cefuroxime drops
IV Ceftriaxone 1g once daily for 7 days
Bloods for HIV, Syphilis, HepB, HepC
Discussed with Genitourinary medicine

(Denied drug use, last sexual contact "long time ago" with the mother of his children)

Next day
Bilateral Corneal gluing

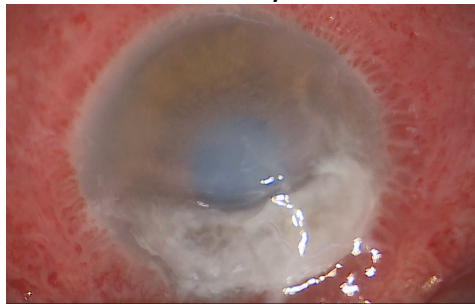
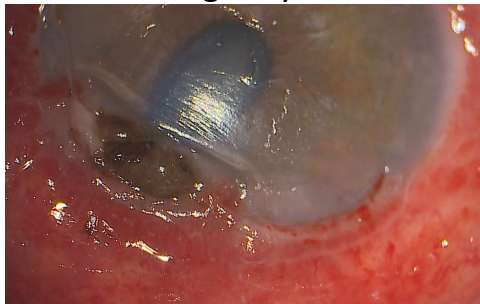
The logo for HSIOIRS (Health Service Infection and Outbreak Reporting System) is a circular emblem with a white center containing the text "HSIOIRS" in blue. The outer ring is composed of various colored segments (blue, green, yellow, red, black) and wavy patterns. Below the logo is a decorative graphic consisting of a semi-circle of colorful dots and wavy lines in shades of blue, green, and yellow.

Intraoperative photos

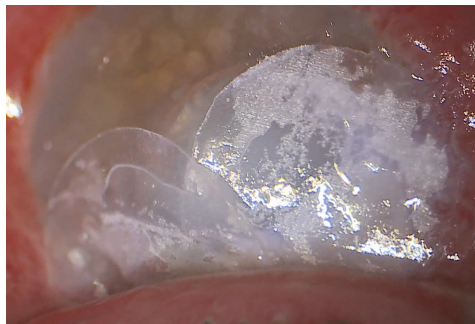
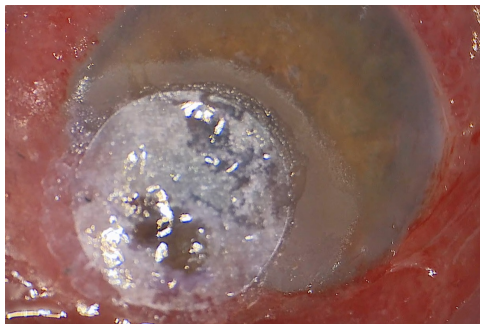
Right eye

Left eye

Before
gluing



After
gluing



Intraoperative notes:

Right iris prolapse with superior peripheral corneal perforation approx 3mm in diameter

Left corneal melting superior third with perforation at the junction between middle and superior third

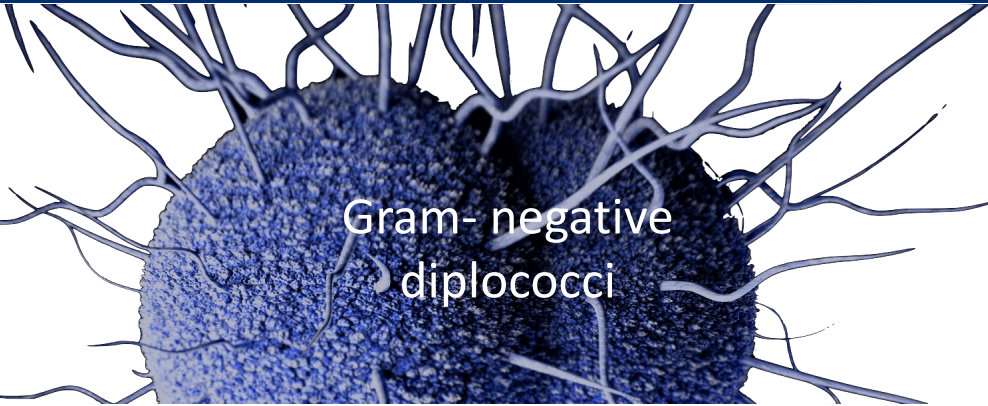
One 6mm disc used to glue right cornea

Two 6.5mm discs used to glue left cornea

Scrapes taken



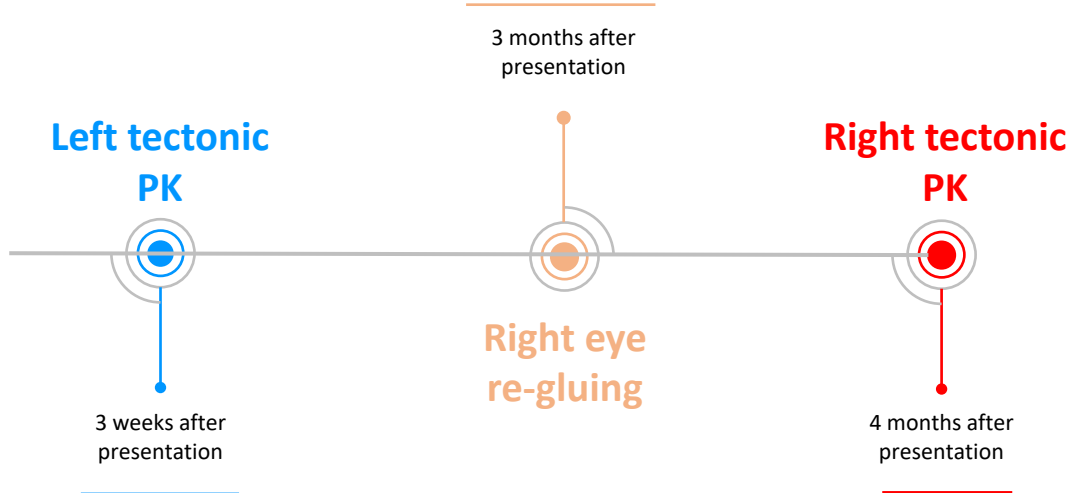
Microbiology and further management



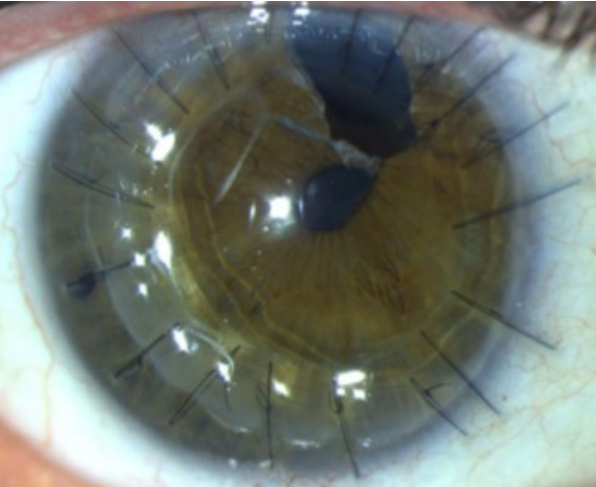
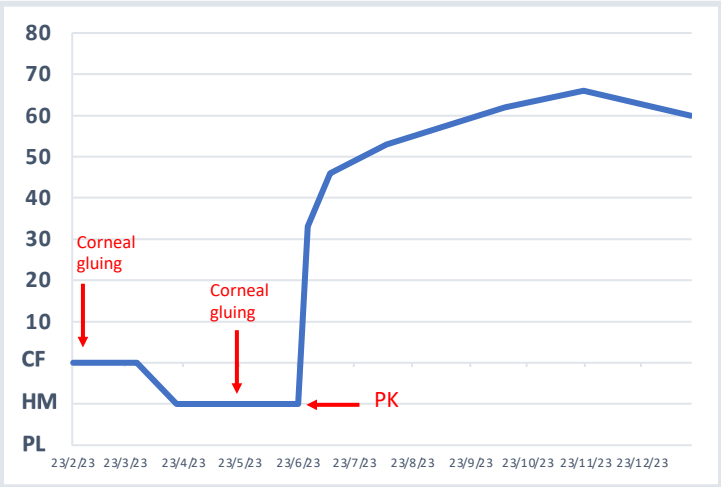
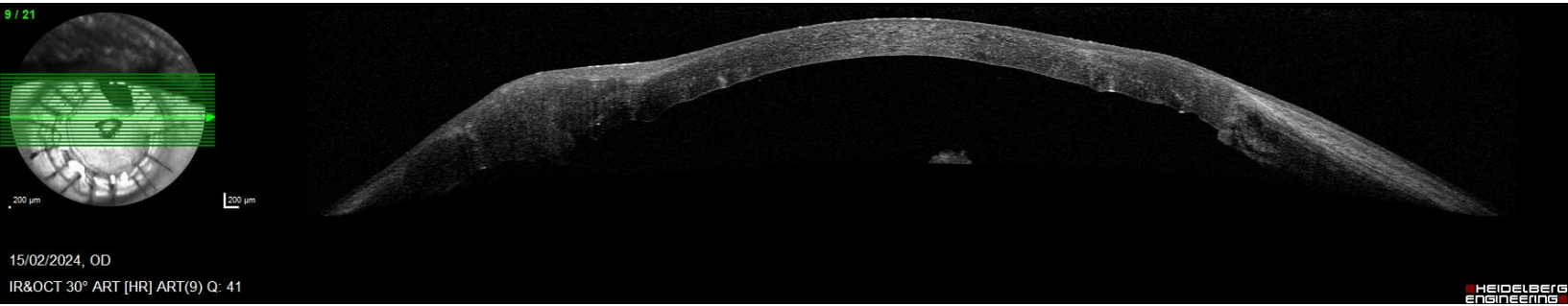
Gram- negative diplococci

Gram negative Diplococci

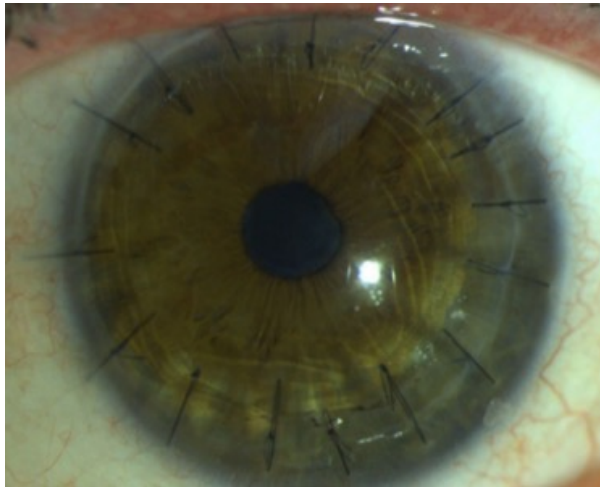
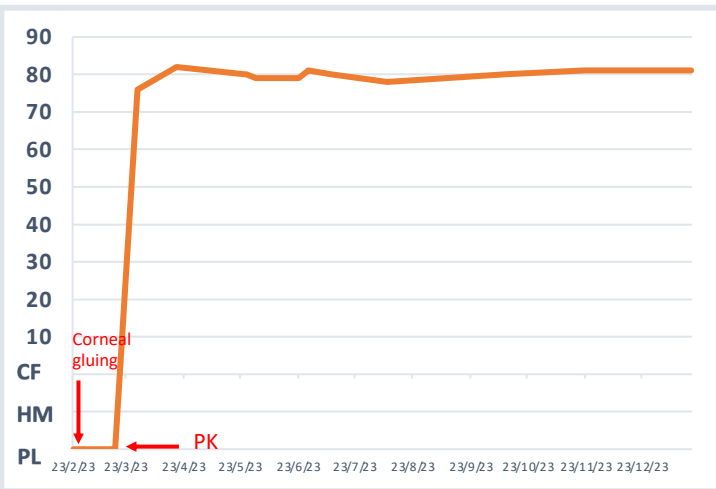
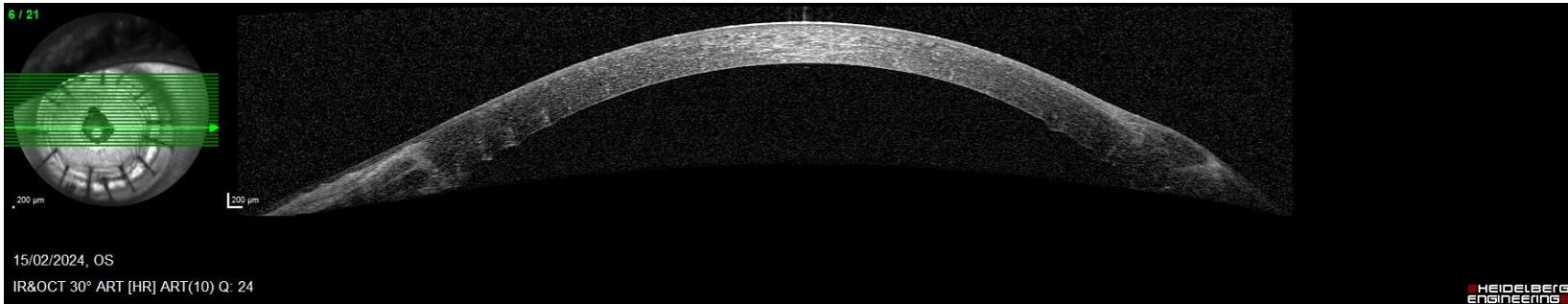
- Resistance to Azithromycin and Ciprofloxacin
- Sensitive to ceftriaxone
- Switched to oral Cefuroxime 500g BD after 1 week of IV Ceftriaxone



Outcomes Right eye



Outcomes Left eye





- Always suspect gonococcal infection in patients with mucopurulent discharge and corneal involvement
- Neisseria gonorrhoeae can penetrate intact epithelium leading to corneal perforation
- Prompt medical and surgical treatment can restore vision

*thank
you*

For any questions, please feel free to contact me
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