

DELAYED *ASPERGILLUS VERSICOLOR* INFECTION AFTER LASER IN SITU KERATOMILEUSIS -- A CASE REPORT

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Purpose: To report a case of *Aspergillus versicolor* keratitis that developing one month after laser *in situ* keratomileusis (LASIK).

Methods: A 28-year-old man experienced redness and decreased vision in both eyes one month after LASIK. Slit-lamp examination revealed inflammation of the bilateral flap interface with central cornea sparing and no anterior chamber reaction. His symptoms and signs progressed even with topical broad-spectrum antibiotics and topical steroids. Corneal scrapings were obtained for culture.

Results: Cultures revealed *A. versicolor*. Keratitis resolved after topical amphotericin B and natamycin therapy. Visual acuity of 20/22 and 20/25 was achieved one month after antifungal therapy.

Conclusions: This is the first report on *A. versicolor* keratitis after LASIK, demonstrating the risk of fungal keratitis occurring months after LASIK and emphasizing the need for long term postoperative alertness by the patient and physician.

Keywords : laser in situ keratomileusis; LASIK, *Aspergillus versicolor*, keratitis

INTRODUCTION

Laser *in situ* keratomileusis (LASIK) is the most common surgery used to correct refractive errors. As LASIK leaves the epithelium almost intact, a lower risk of microbial keratitis (0.1%) has been reported in comparison with photorefractive keratectomy (PRK: 0.8%).¹

However, the procedure still disrupts the corneal integrity and exposes the stroma to potential infectious organisms. Infectious keratitis is a rare but sight-threatening complication of LASIK, and early detection with adequate treatment is essential to achieve good visual recovery. Most infections occur within 2 weeks after surgery, and a literature review has implicated *Staphylococcus aureus* as the most frequent pathogen². However,

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