

# Intravenous Drug Use & Endogenous Endophthalmitis



Dean Elliott

Associate Director, Retina Service  
Massachusetts Eye & Ear Infirmary

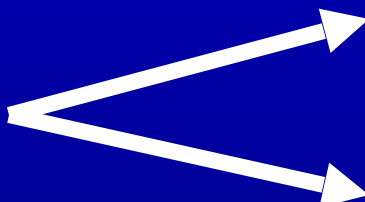
Stelios Evangelos Gragoudas Associate Professor  
Harvard Medical School  
Boston, MA



# Endophthalmitis

- Exogenous
  - Postoperative
  - Traumatic
- Endogenous

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  - Postoperative
  - Traumatic
- **Endogenous**

# Endogenous Endophthalmitis

## Risk Factors

- intravenous drug use
- positive blood cultures
- extraocular site of infection
- chronic antibiotic use
- indwelling catheter
- immunosuppression
  - diabetes, iatrogenic

# Endogenous Endophthalmitis

- Microbiology
  - Fungi (more common)
  - Bacteria

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    - Candida albicans (most common organism)
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# Endogenous Endophthalmitis

- Microbiology
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    - Candida albicans (most common organism)
    - Aspergillus, Cryptococcus, Fusarium
  - Bacteria
    - gram (+) - Staphylococcus, Streptococcus, Listeria
    - gram (-) - N. meningitidis, H. influenzae, enteric organisms

# Endogenous Endophthalmitis

- Fungi
  - Yeasts (single-celled)
    - Candida, Cryptococcus

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    - Candida, Cryptococcus
  - Molds (multicellular hyphae)
    - Aspergillus, Fusarium

# Endogenous Endophthalmitis

- Fungi
  - Yeasts (single-celled)
    - Candida, Cryptococcus
  - Molds (multicellular hyphae)
    - Aspergillus, Fusarium
  - Dimorphic (both yeast and mold; grow as yeast in host)
    - Histoplasma, Coccidioides

# Endogenous Endophthalmitis

- Fungi

- Yeasts

- Candida, Cryptococcus

- Molds

- Aspergillus, Fusarium

- more likely to have history of organ transplantation or iatrogenic immunosuppression
      - more likely to present with short duration of symptoms, poor visual acuity, hypopyon
      - more likely to have poor visual outcome

Endogenous fungal endophthalmitis: risk factors, clinical features, and treatment outcomes in mold and yeast infections

Jayanth Sridhar\*, Harry W Flynn Jr, Ajay E Kuriyan, Darlene Miller and Thomas Albani

 Journal of Ophthalmic Inflammation and Infection  
a SpringerOpen Journal

# Endogenous Endophthalmitis

- Bacteria
  - Caucasians – endocarditis, septic joints
    - gram (+) organisms
    - recent increase in skin infections and MRSA
  - East Asians – hepatobiliary infection
    - Klebsiella

# Endogenous Endophthalmitis

## Risk Factors

- **intravenous drug use**
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- extraocular site of infection
- chronic antibiotic use
- indwelling catheter
- immunosuppression
  - diabetes, iatrogenic



# Endogenous Endophthalmitis

- Tripling of opioid overdose deaths 2000-2014

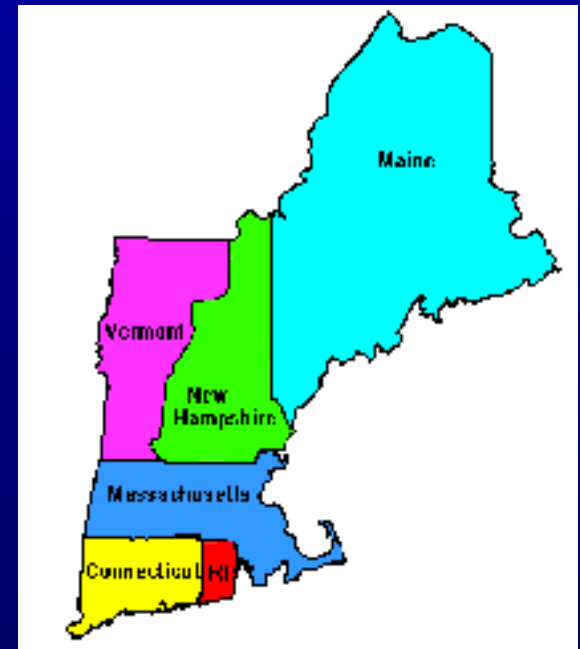
# Endogenous Endophthalmitis

- Tripling of opioid overdose deaths 2000-2014
  - New England



# Endogenous Endophthalmitis

- Tripling of opioid overdose deaths 2000-2014
- New England highest rate 16.1/100,000



# Endogenous Endophthalmitis

- Tripling of opioid overdose deaths 2000-2014
  - New England highest rate 16.1/100,000
    - New Hampshire highest state 26.2/100,000



# Endogenous Endophthalmitis

## Vision Loss Associated With the Opioid Epidemic

YVES M. LAORG, BA  
Edmund Tsui, MD  
Nikhil Batra, MD  
Christopher E. Chapras, MD  
Michael E. Fogans, MD

## An Outbreak of Endogenous Fungal Endophthalmitis Among Intravenous Drug Abusers in New England

Aubrey R. Tirpack, MD; Jay S. Duker, MD; Caroline R. Baumal, MD

## Intravenous Drug Use—Associated Endophthalmitis

*Bobek S. Modjtahedi, MD,<sup>1,\*</sup> Auni V. Finn, MD,<sup>1,\*</sup> Thanos D. Papakostas, MD,<sup>1</sup> Marlene Durand, MD,<sup>2,3</sup> Deeba Husain, MD,<sup>1</sup> Dean Elliott, MD<sup>1</sup>*

# Endogenous Endophthalmitis

- Endophthalmitis 338 patients, 8 year period

## Intravenous Drug Use—Associated Endophthalmitis

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Deeba Husain, MD,<sup>1</sup> Dean Elliott, MD<sup>1</sup>*

# Endogenous Endophthalmitis

- Endophthalmitis 338 patients, 8 year period
  - Endogenous 63 patients (~20% versus 2-6% in the past)

## Intravenous Drug Use—Associated Endophthalmitis

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# Endogenous Endophthalmitis

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## Intravenous Drug Use—Associated Endophthalmitis

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# Endogenous Endophthalmitis

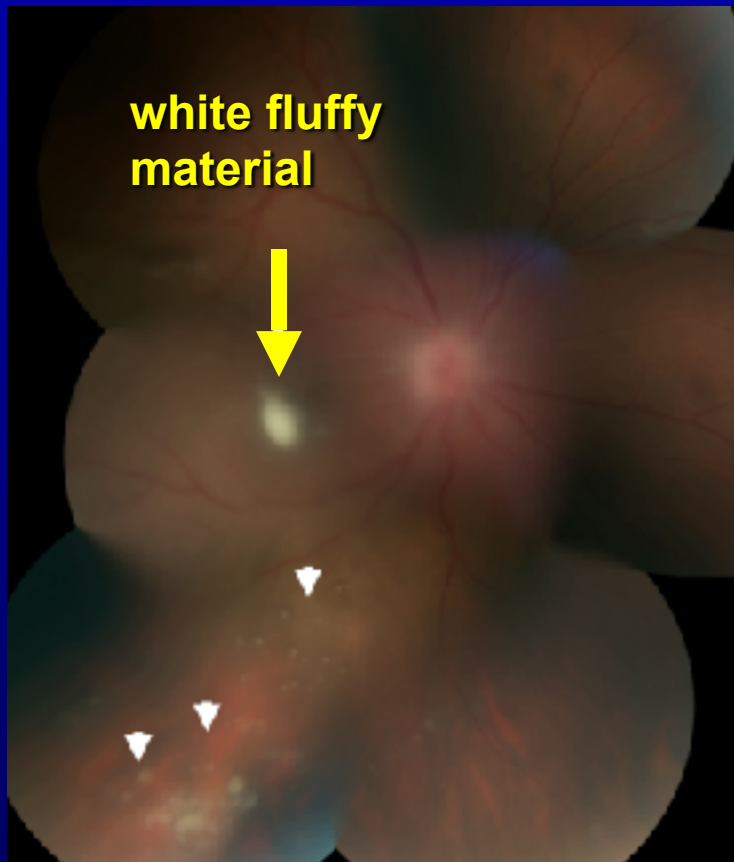
- Endophthalmitis 338 patients, 8 year period
  - Endogenous 63 patients (~20% versus 2-6% in the past)
    - **IVDU 30 patients (~50%) (~10% of all endophthalmitis cases)**
      - culture positivity: 59% fungal, 16% bacterial

## Intravenous Drug Use—Associated Endophthalmitis

*Bobek S. Modjtahedi, MD,<sup>1,\*</sup> Auni V. Finn, MD,<sup>1,\*</sup> Thanos D. Papakostas, MD,<sup>1</sup> Marlene Durand, MD,<sup>2,3</sup> Deeba Husain, MD,<sup>1</sup> Dean Elliott, MD<sup>1</sup>*

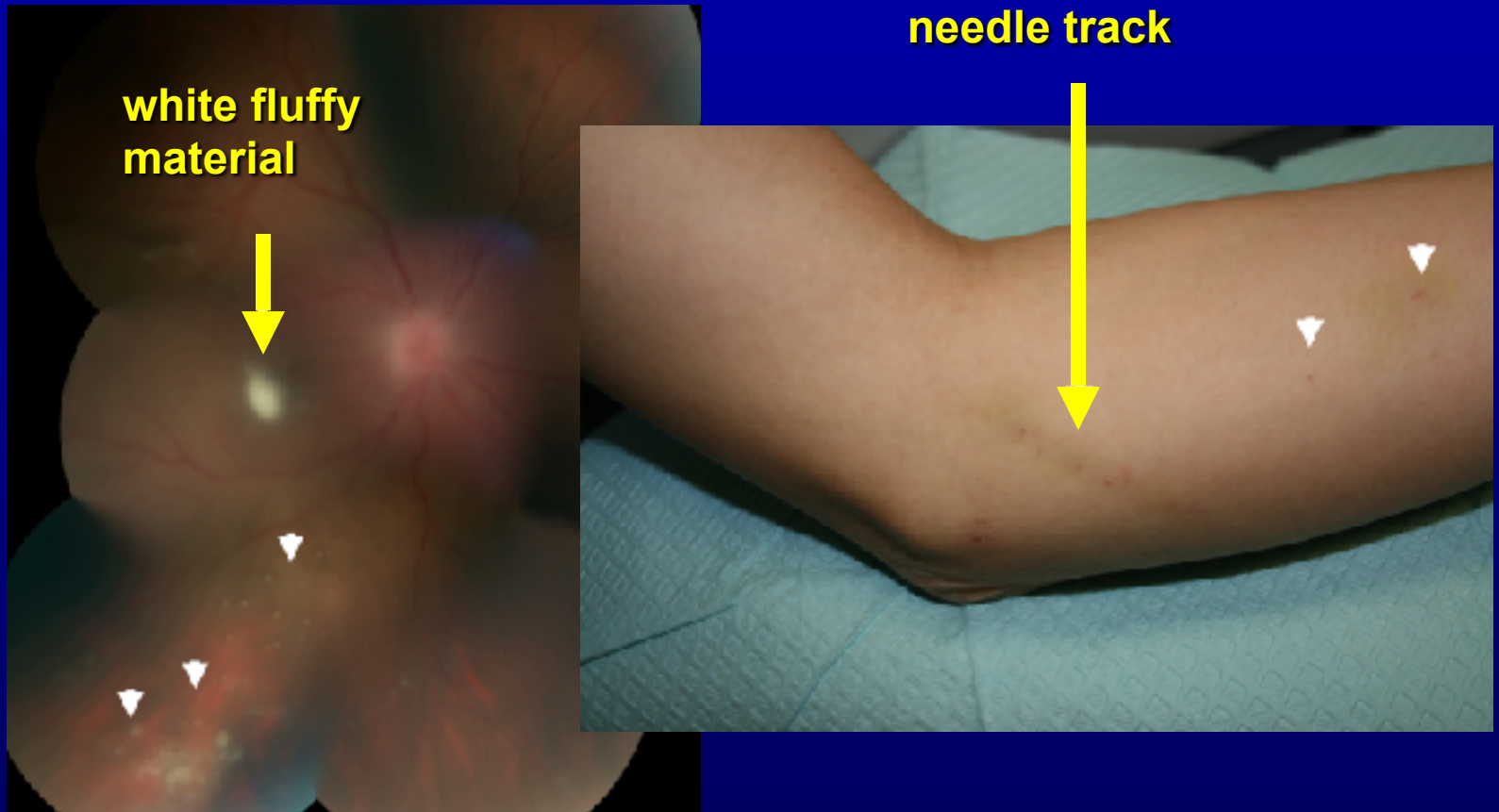
# Endogenous Endophthalmitis

- Intravenous drug use



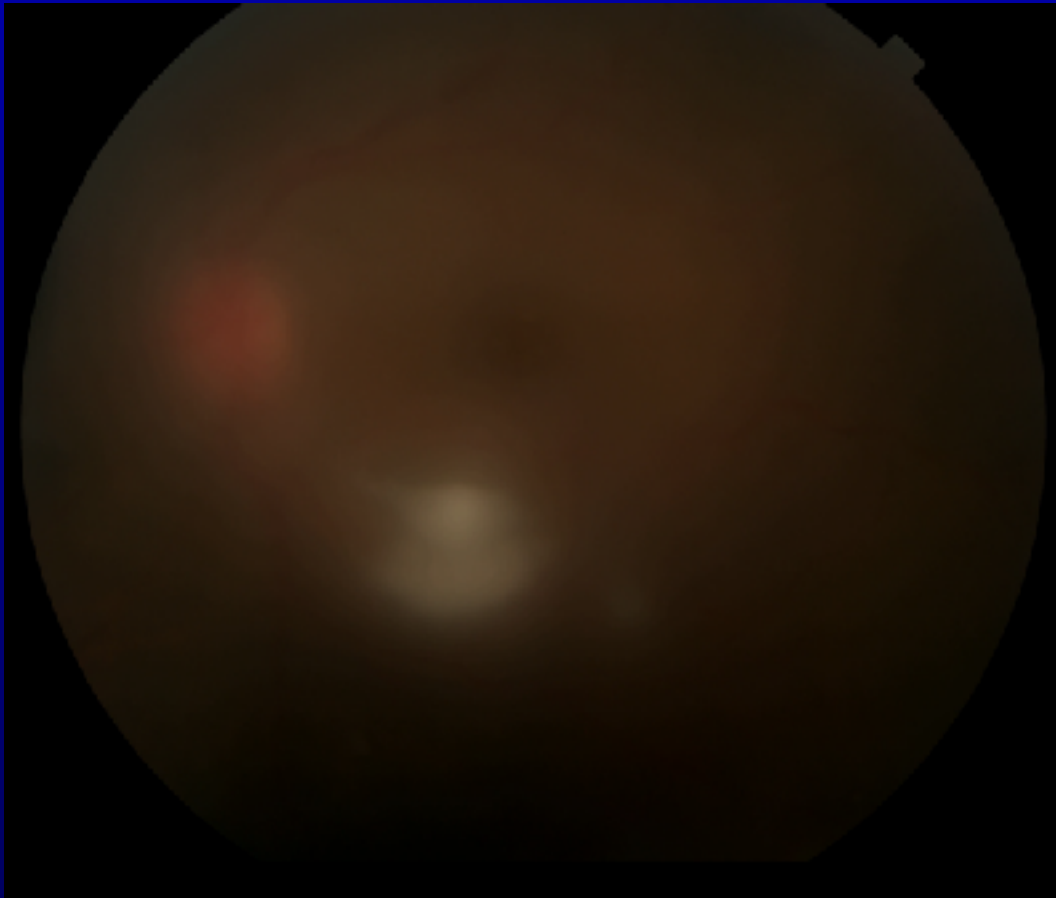
# Endogenous Endophthalmitis

- Fungal endophthalmitis - **Candida**



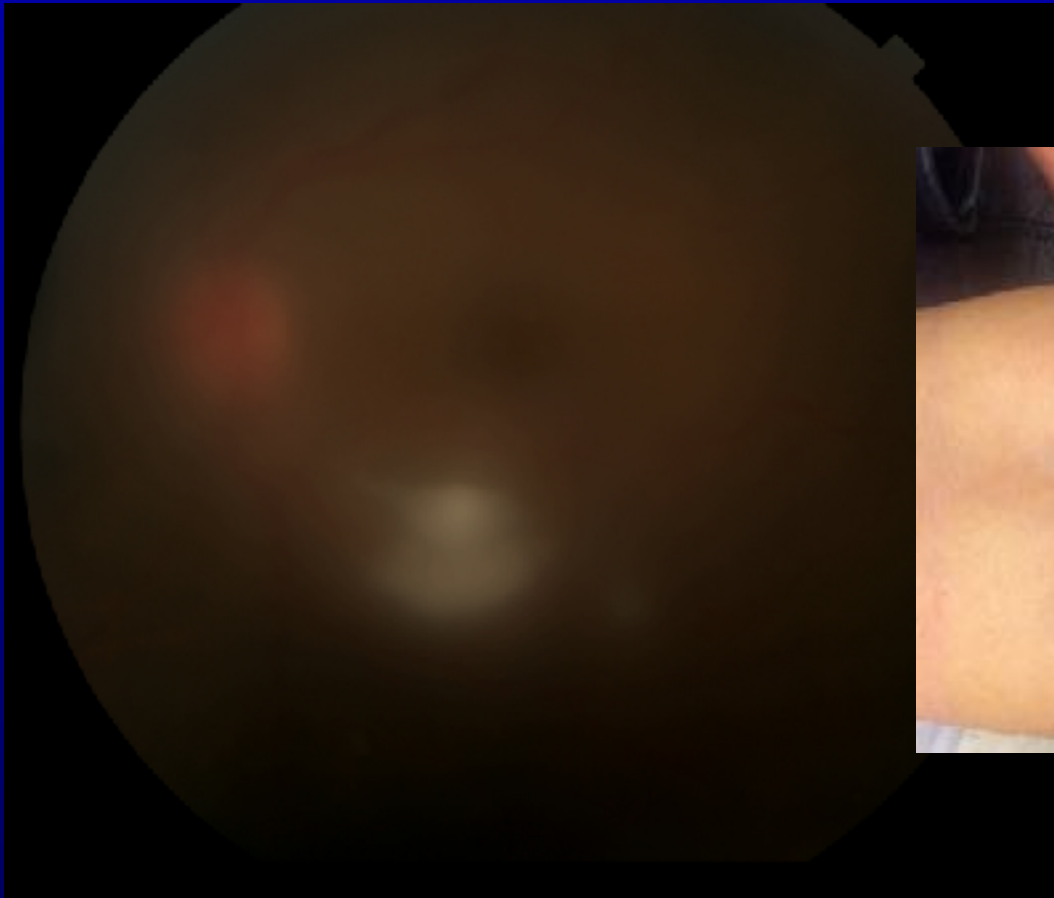
# Endogenous Endophthalmitis

- Intravenous drug use



# Endogenous Endophthalmitis

- Fungal endophthalmitis - **Candida**



# Endogenous Endophthalmitis

- Intravenous drug use

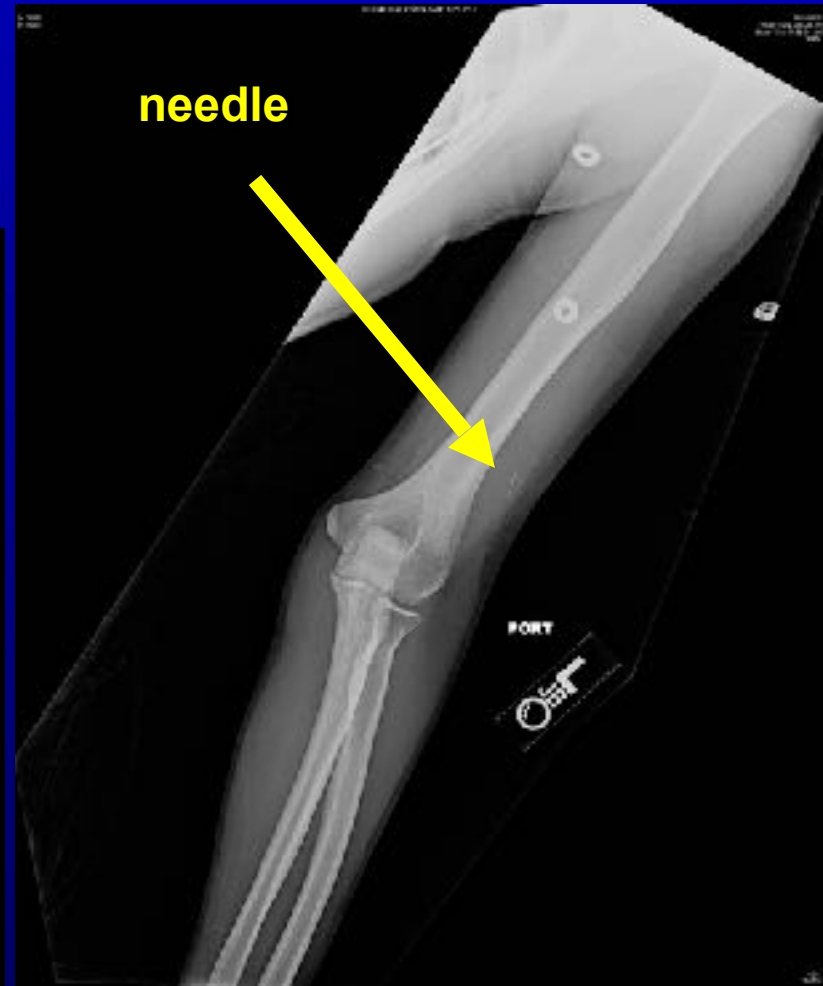


Courtesy of Jennifer Chao

# Endogenous Endophthalmitis

- Fungal endophthalmitis

**Candida**



Courtesy of Jennifer Chao

# Endogenous Endophthalmitis

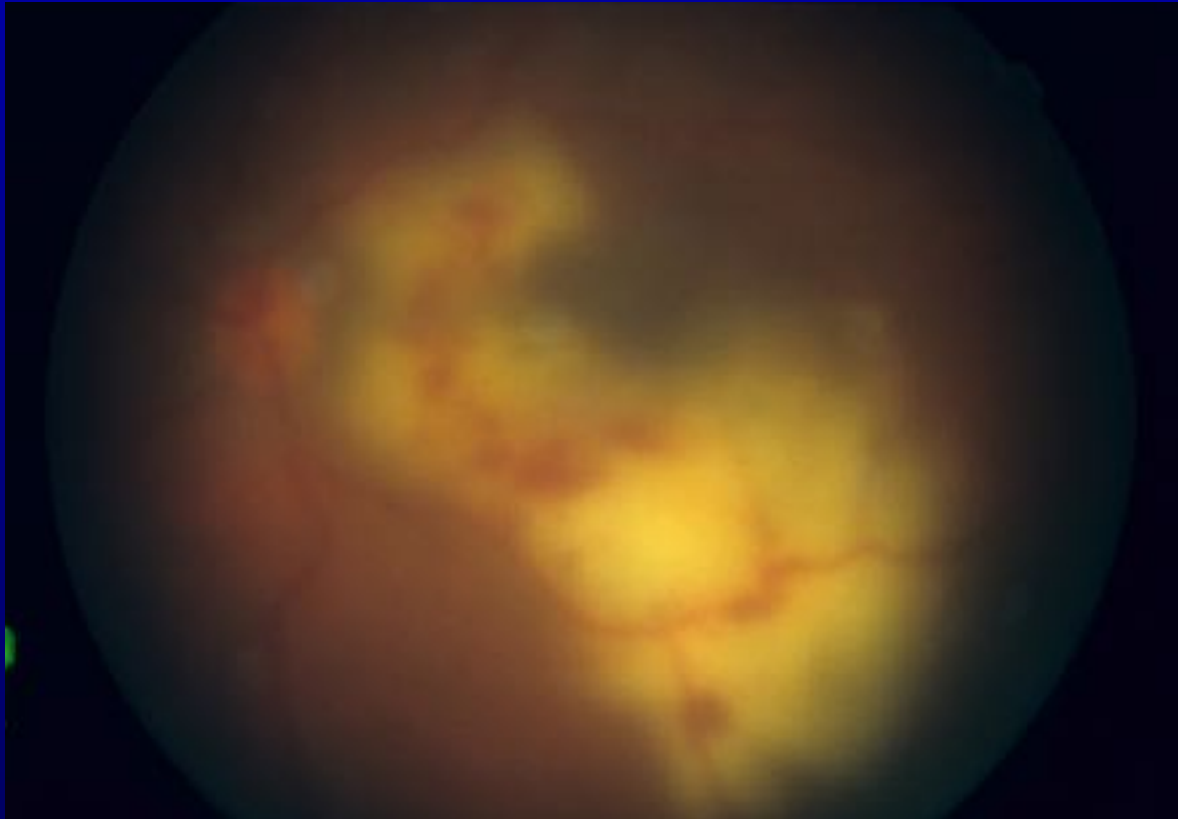
- Intravenous drug use
  - Fungal endophthalmitis - **Candida**



courtesy of Jennifer Chao

# Endogenous Endophthalmitis

- 25 year old man
  - Intravenous drug use

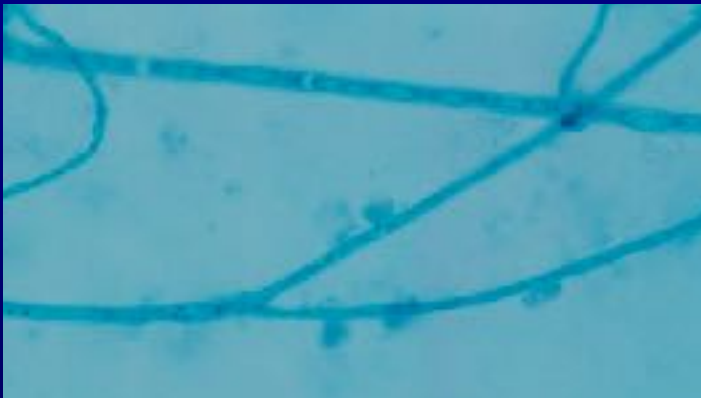
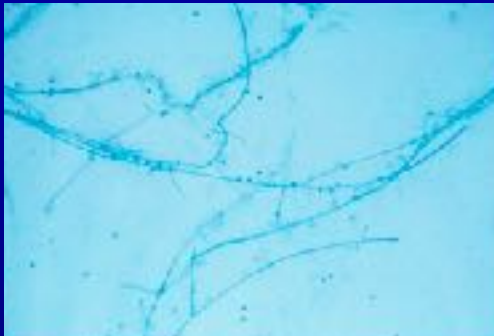


# Endogenous Endophthalmitis

- 25 year old man
  - **Aspergillus**

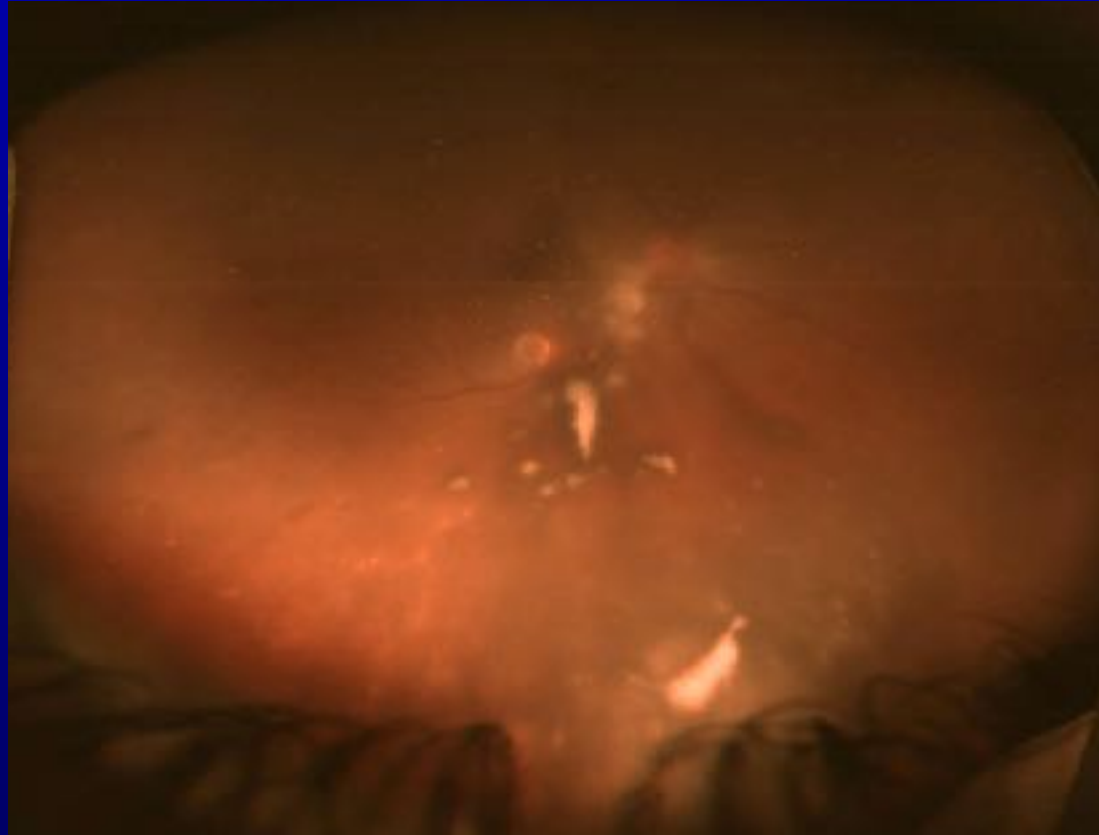
Emerging Infectious Uveitis:  
*Aspergillus* and Other Fungi

Avni V. Patel and Dean Elliott



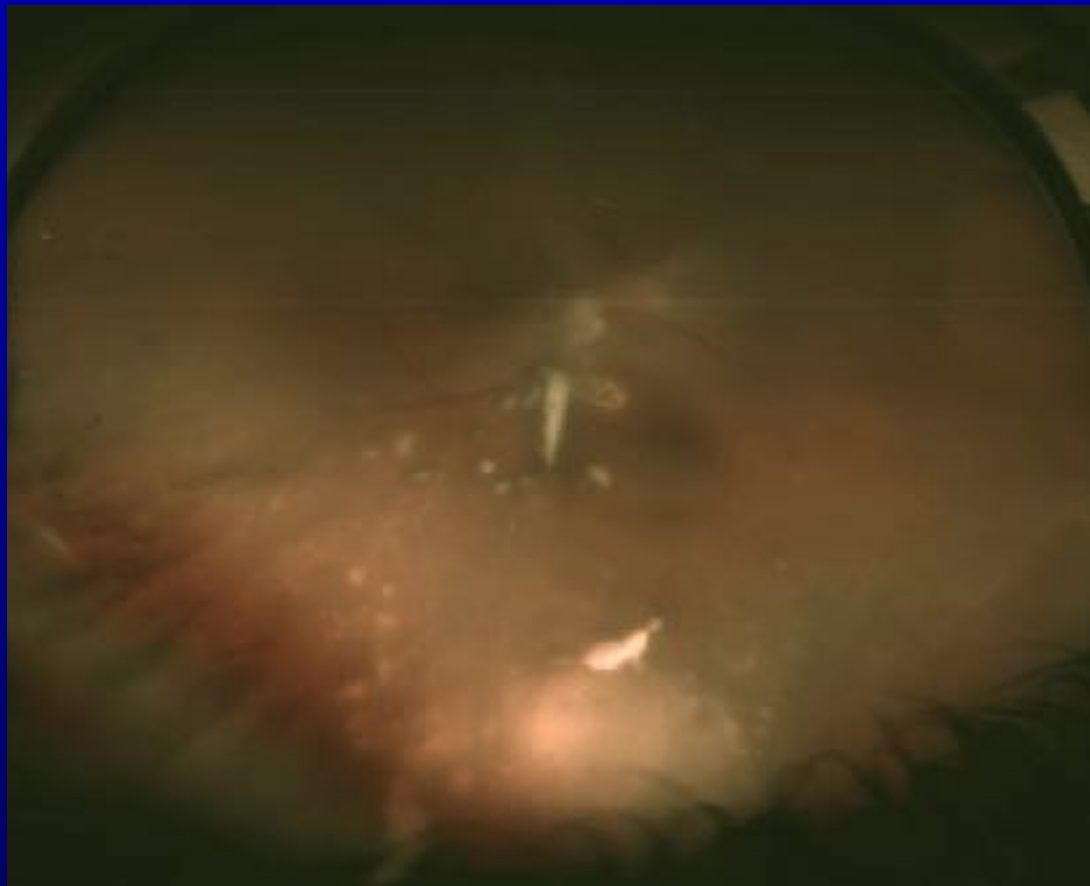
# Endogenous Endophthalmitis

- Intravenous drug use



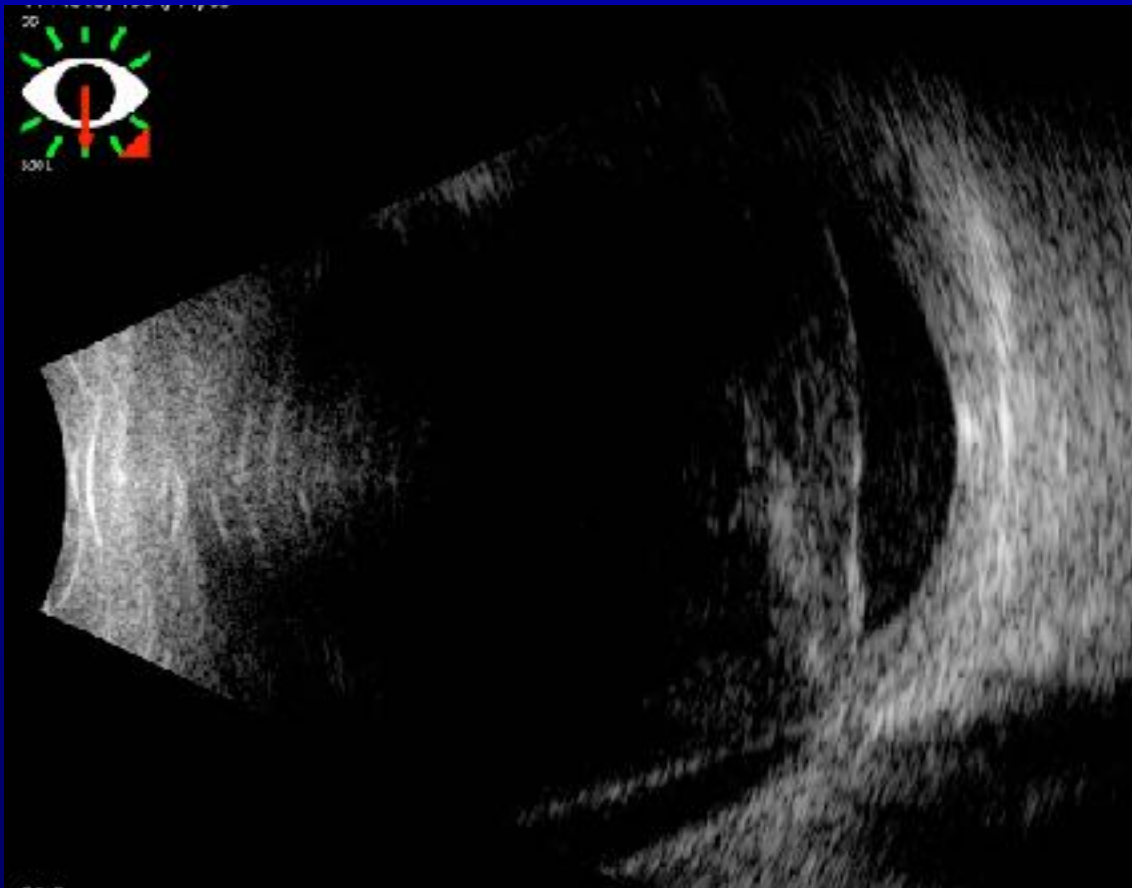
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- Intravenous drug use



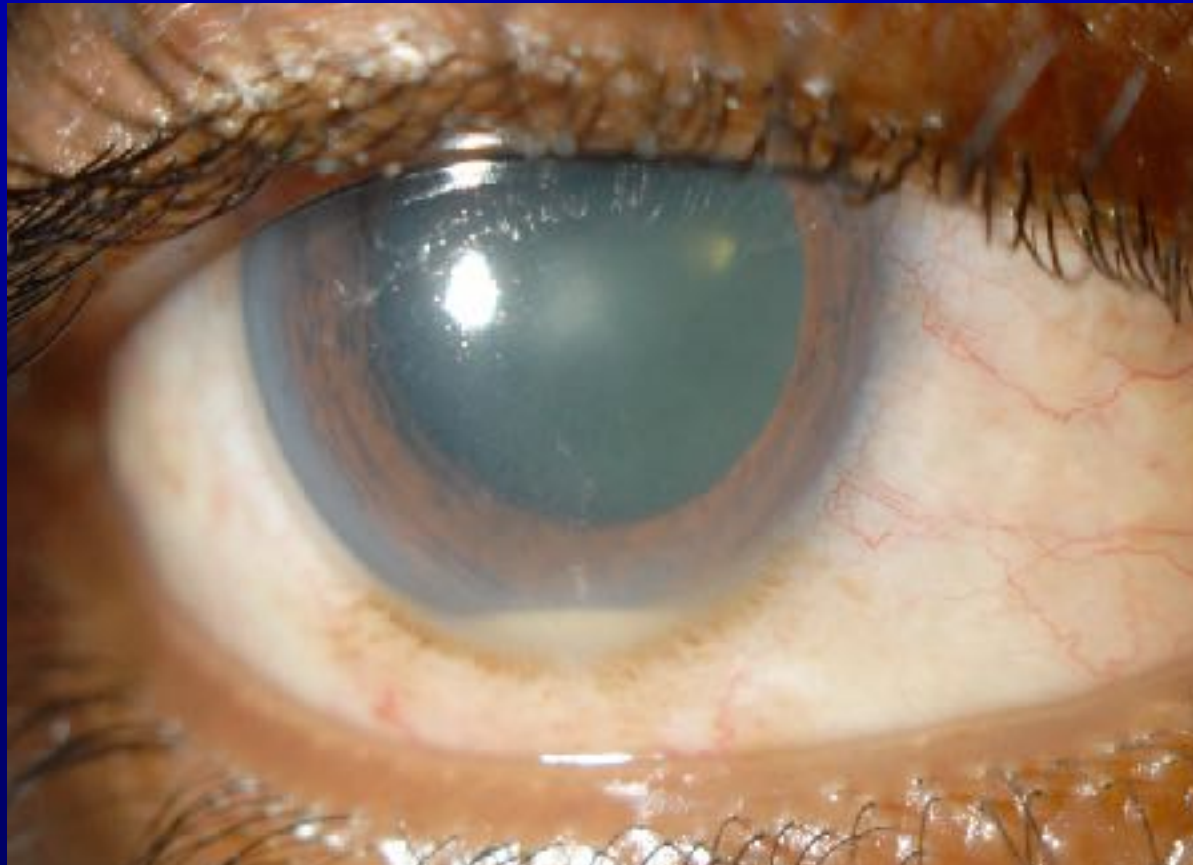
# Endogenous Endophthalmitis

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# Endogenous Endophthalmitis

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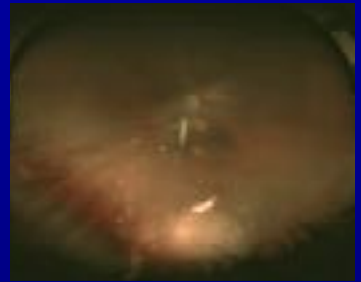
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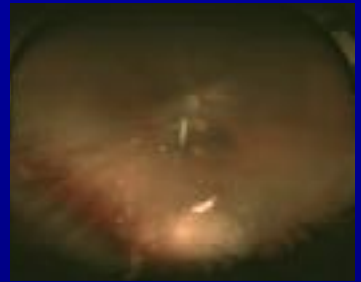
# Endogenous Endophthalmitis

- management?



# Endogenous Endophthalmitis

- tap/inject



# Endogenous Endophthalmitis

- tap/inject
  - vancomycin, ceftazidime, voriconazole



# Endogenous Endophthalmitis

- tap/inject
  - vancomycin, ceftazidime, voriconazole
- admitted to hospital



# Endogenous Endophthalmitis

- tap/inject
  - vancomycin, ceftazidime, voriconazole
- admitted to hospital
- iv antibiotics/antifungals



# Endogenous Endophthalmitis

- tap/inject
  - vancomycin, ceftazidime, voriconazole
- admitted to hospital
- iv antibiotics/antifungals
- underwent vitrectomy



# Endogenous Endophthalmitis

- tap/inject
  - vancomycin, ceftazidime, voriconazole
- admitted to hospital
- iv antibiotics/antifungals
- underwent vitrectomy
  - *Candida albicans*
  - Staph species



# Treatment

- Vitrectomy
  - 18% initial PPV, no secondary procedures
  - 78% initial tap/inject, 55%secondary PPV
    - 52% culture positive

## The Role of Vitrectomy in the Management of Fungal Endophthalmitis

Yewlin E. Chee & Dean Elliott

## Intravenous Drug Use—Associated Endophthalmitis

Robeck S. Modjtahedi, MD,<sup>1,\*</sup> Auri V. Finn, MD,<sup>1,\*</sup> Thanos D. Papakostas, MD,<sup>1</sup> Marlene Durand, MD,<sup>2,3</sup> Deeba Husain, MD,<sup>1</sup> Dean Elliott, MD<sup>1</sup>

# Endogenous Endophthalmitis

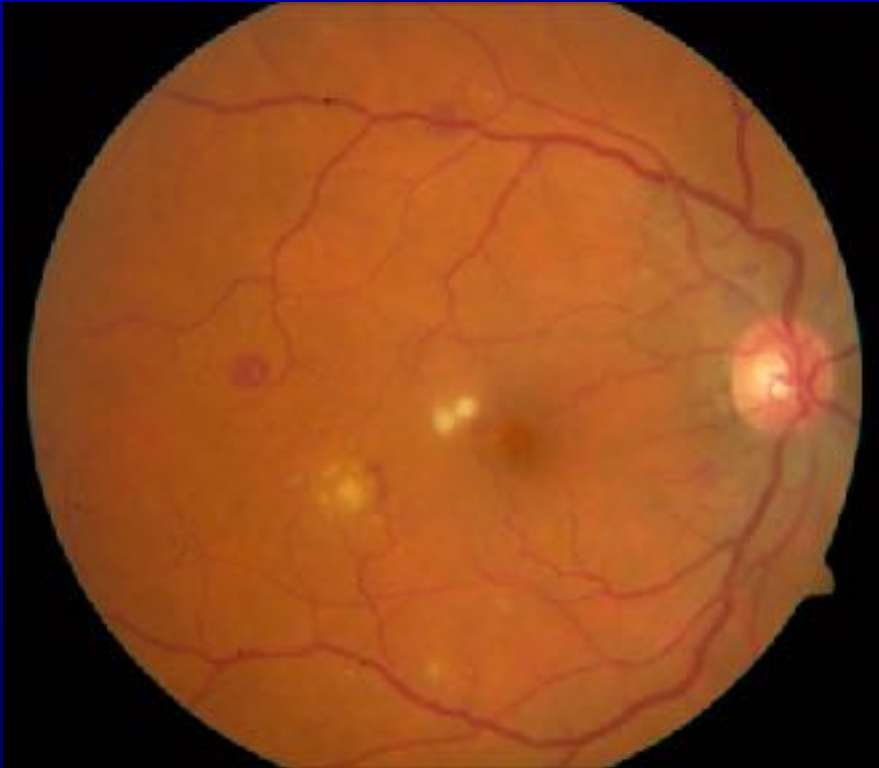
## Risk Factors

- intravenous drug use
- **positive blood cultures**
- extraocular site of infection
- chronic antibiotic use
- indwelling catheter
- immunosuppression
  - diabetes, iatrogenic



# Endogenous Endophthalmitis

- 52 year old woman
  - blood cultures - **Candida**



# Endogenous Endophthalmitis

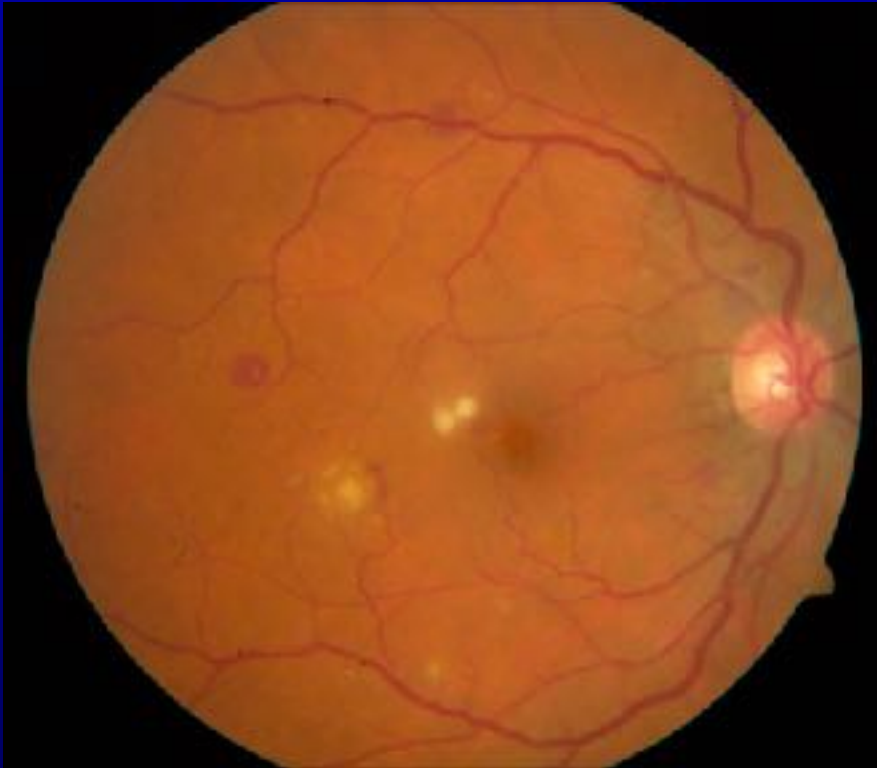
- 52 year old woman
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## White-Centered Retinal Hemorrhages

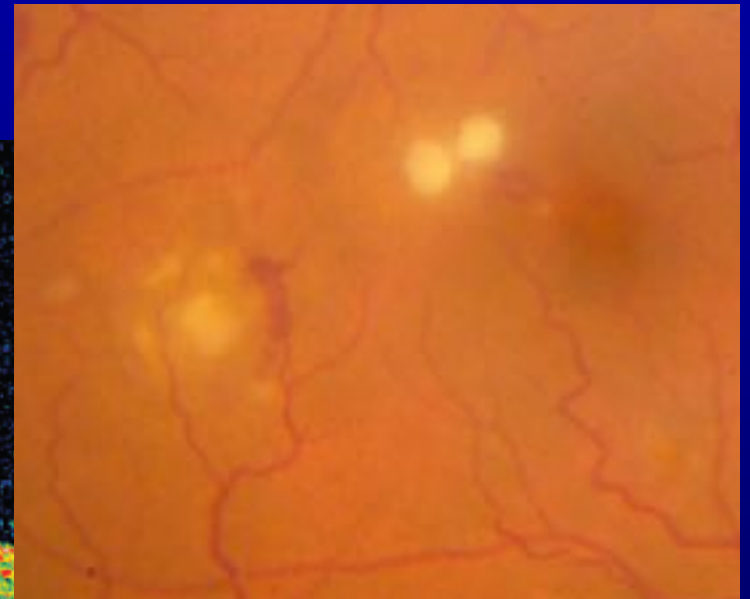
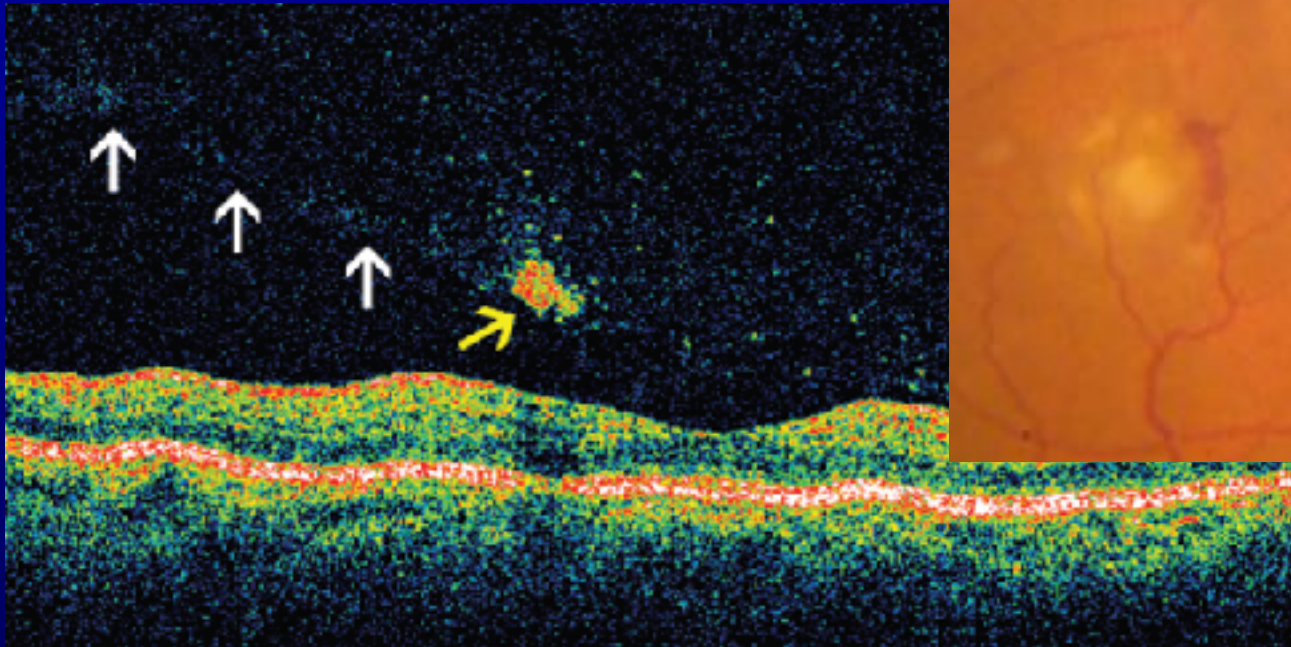
MICHAEL JAYAHERI, MD  
and BRUNO BERTONI, CRA, CCTC  
Dulany Retina Institute, Dulany Eye Institute  
and the Department of Ophthalmology,  
Keck School of Medicine, University of  
Southern California, Los Angeles, California

DEAN ELLIOT, MD  
Retina Service of Massachusetts Eye and Ear  
Infirmary, Harvard Medical School, Boston



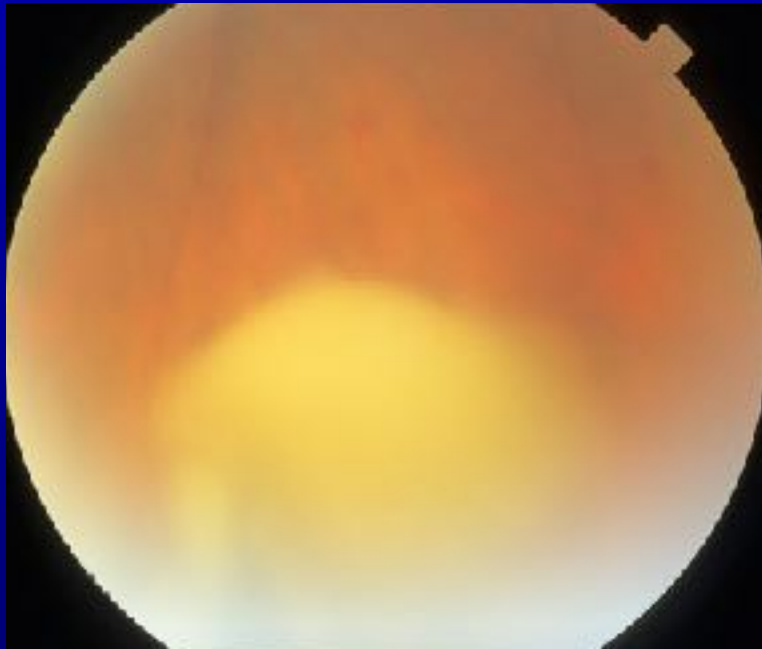
# Endogenous Endophthalmitis

- 52 year old woman
  - given systemic antifungals (no intravitreal injection)
    - infection resolved



# Endogenous Endophthalmitis

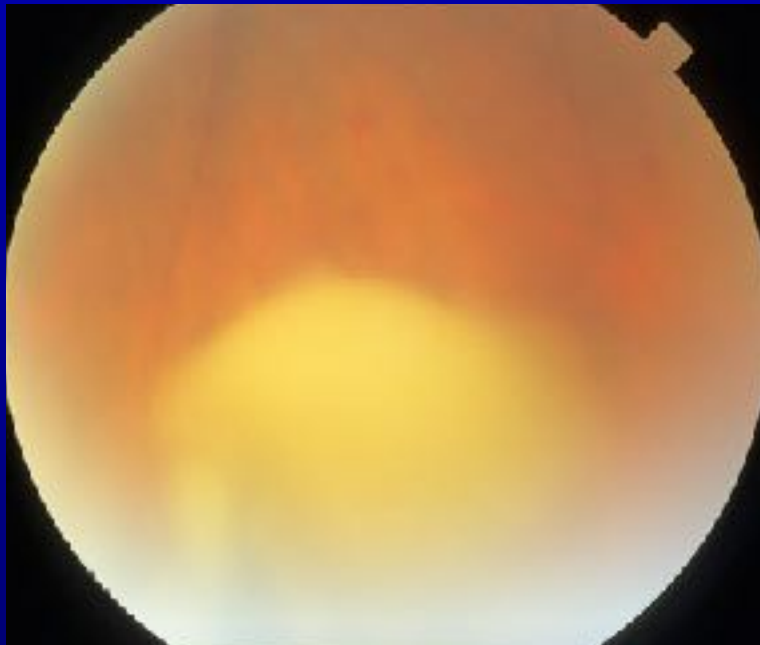
- 65 year old man
  - renal dialysis
    - presumed fistula infection
  - blood cultures
    - **Staph aureus**
  - pain & floaters OS
    - 20/20



**vitreous abscess**

# Endogenous Endophthalmitis

on presentation

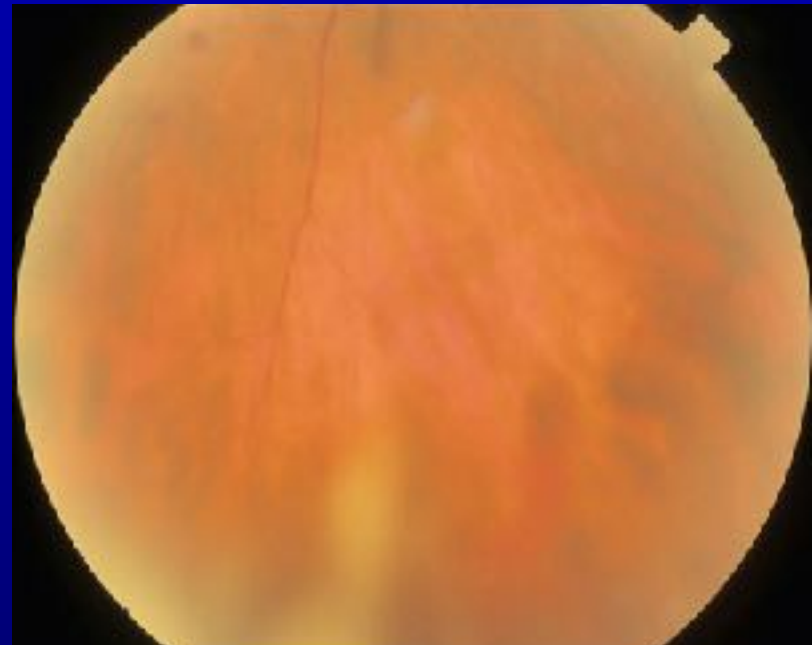


**vitreous abscess**



tap / inject

after treatment



**presumed Staph aureus**

# Endogenous Endophthalmitis

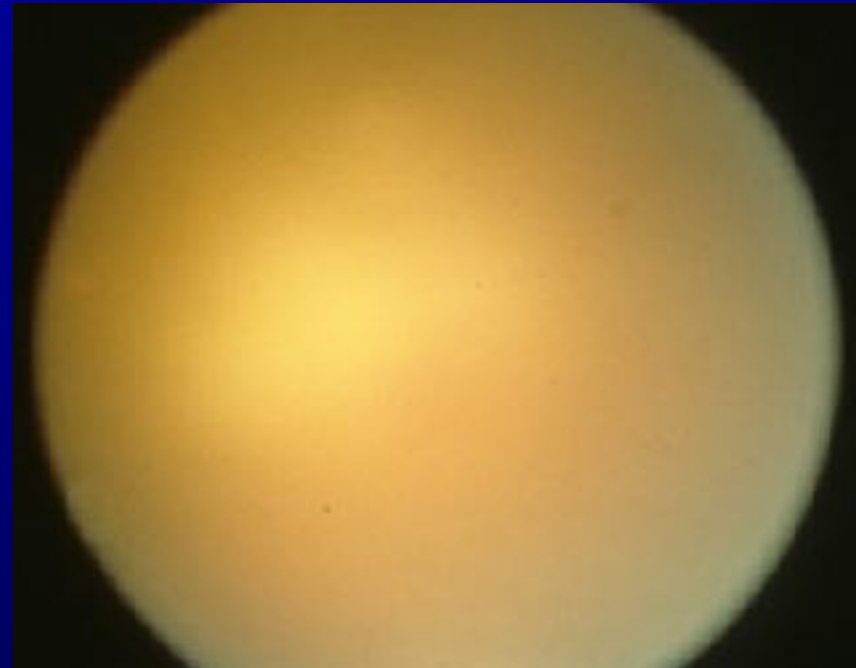
## Risk Factors

- intravenous drug use
- positive blood cultures
- **extraocular site of infection**
- chronic antibiotic use
- indwelling catheter
- immunosuppression
  - diabetes, iatrogenic



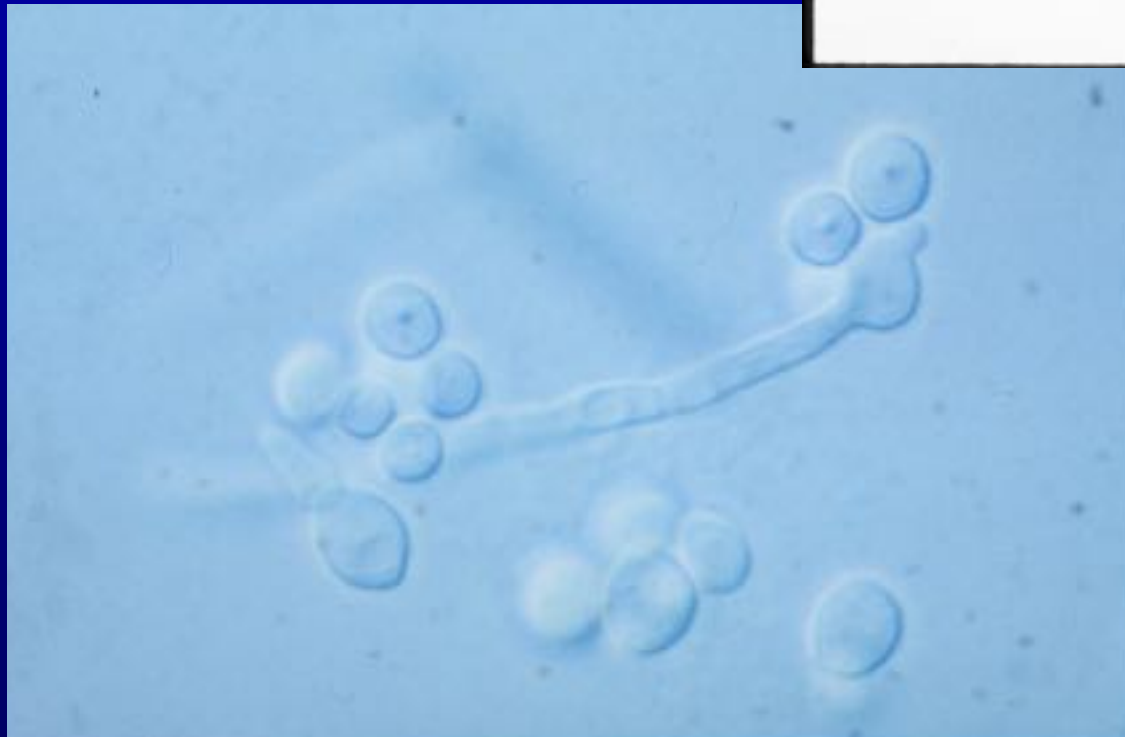
# Endogenous Endophthalmitis

- 60 year old woman
  - chronic indwelling line - groin abscess
  - blood cultures - **Candida**



# Endogenous Endophthalmitis

- 60 year old woman
  - vitrectomy - **Candida**



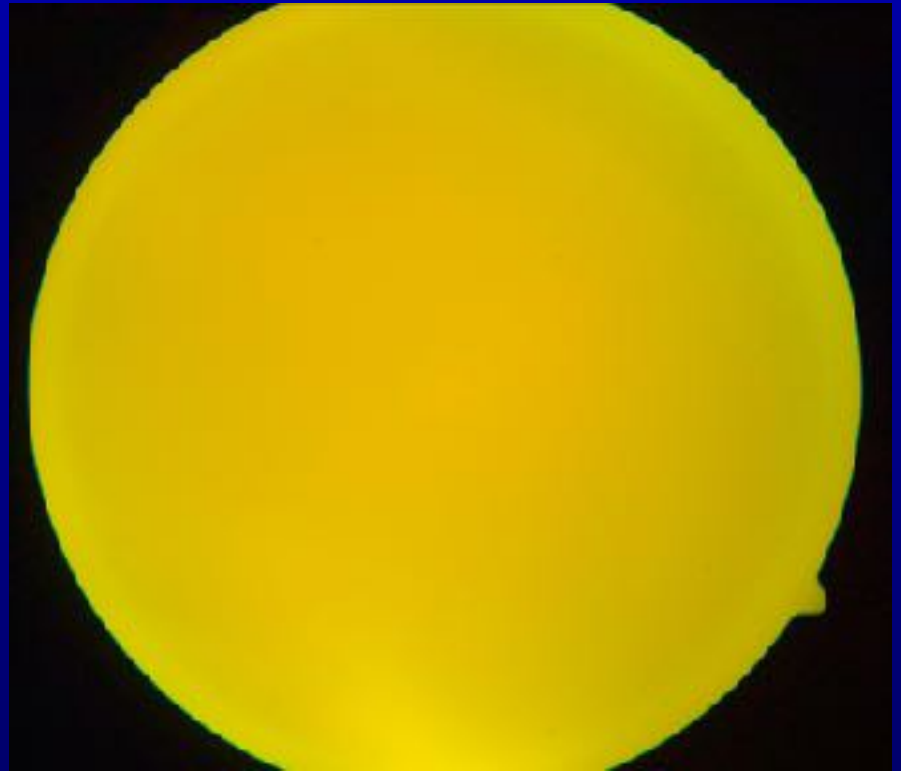
# Endogenous Endophthalmitis

- 51 year old Vietnamese man
  - liver abscess, jaundice
  - blood cultures - **Klebsiella**



# Endogenous Endophthalmitis

- 51 year old Vietnamese man
  - decreased vision OD
  - no hypopyon
  - dense vitritis
  - no fundus details



# Endogenous Endophthalmitis

- 51 year old Vietnamese man
  - tap / inject: **Klebsiella**
  - vitrectomy: large area of retinal necrosis



# Endogenous Endophthalmitis

- 10 year old boy
  - found unresponsive
  - lumbar puncture: **Neisseria meningitidis**
  - red eye OS



# Endogenous Endophthalmitis

- 10 year old boy
  - tap / inject: **Neisseria meningitidis**
  - final vision 20/20
  - iris atrophy – reversible!



# Endogenous Endophthalmitis

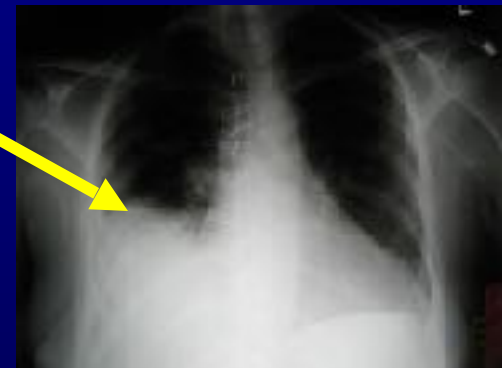
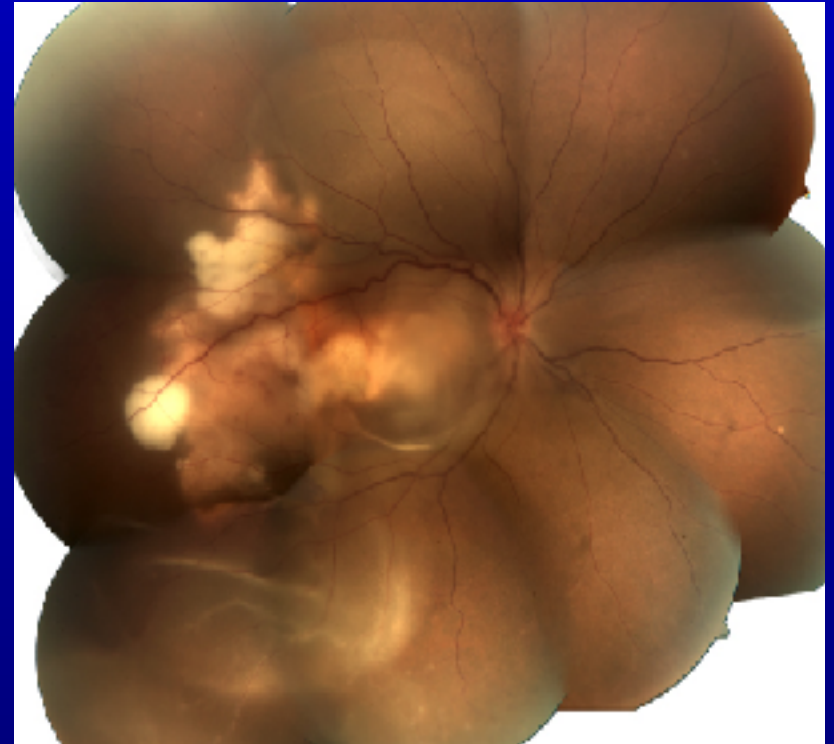
## Risk Factors

- intravenous drug use
- positive blood cultures
- **extraocular site of infection**
- **chronic antibiotic use**
- **indwelling catheter**
- **immunosuppression**
  - diabetes, iatrogenic



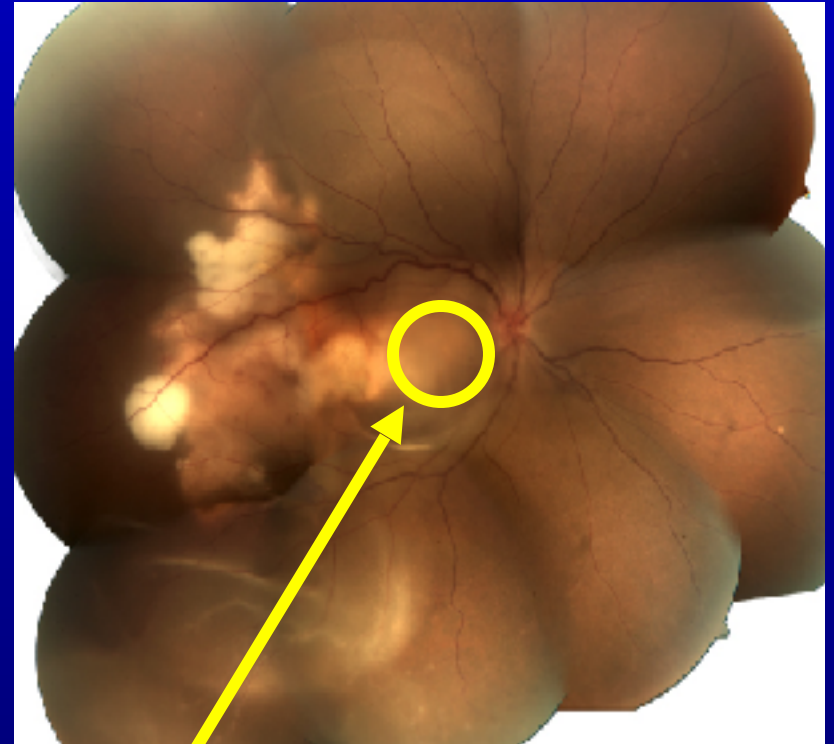
# Endogenous Endophthalmitis

- 38 year-old woman
  - decreased vision OD few days
    - h/o cardiac transplantation
    - h/o cryptococcal meningitis
    - h/o cryptosporidial enteritis
    - h/o steroid induced diabetes
    - h/o pulmonary nodule
      - s/p multiple biopsies



# Endogenous Endophthalmitis

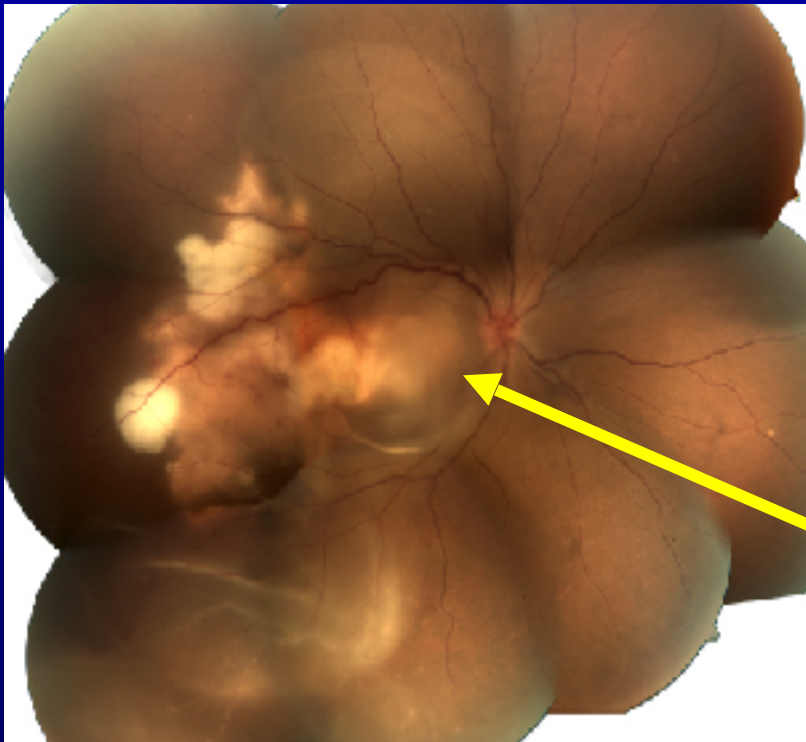
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    - h/o pulmonary nodule
      - s/p multiple biopsies



**focal vitreous inflammation**

# Endogenous Endophthalmitis

- diagnostic vitrectomy
  - undiluted vitreous & vitreous cassette - negative
  - focal vitreous aspirate - **Scedosporium prolificans**



## CONTROL OF DISSEMINATED *SCEDOSPORIUM PROLIFICANS* INFECTION AND ENDOPHTHALMITIS

Thomas M. O'Hearn, MD,\* P. Jan Geisler, MD,†  
Rizwan Bhatti, MD,\* Dean Elliott, MD\*

**focal  
vitreous  
aspirate**

# Endogenous Endophthalmitis

## Risk Factors

- intravenous drug use
- positive blood cultures
- extraocular site of infection
- chronic antibiotic use
- indwelling catheter
- **immunosuppression**
  - diabetes, iatrogenic



# Endogenous Endophthalmitis

- 70 year old woman
  - severe immunosuppression (hematologic malignancy)
  - c/o bilateral decreased vision
  - skin lesions
  - vitreous aspirate – **Fusarium**



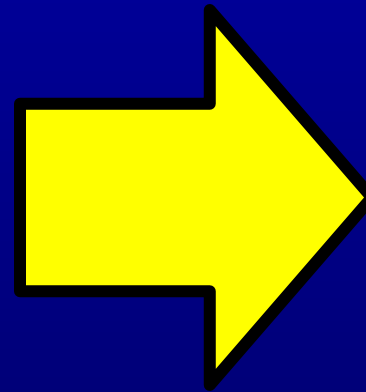
**Disseminated *Fusarium* Infection Presenting as Bilateral Endogenous Endophthalmitis in a Patient With Acute Myeloid Leukemia**

Kourouk A. Regai, MD  
Dean Elliott, MD  
Oren Ploos, MD  
Jose A. Velazquez, MD  
Gary W. Abrams, MD

# Endogenous Endophthalmitis

## Risk Factors

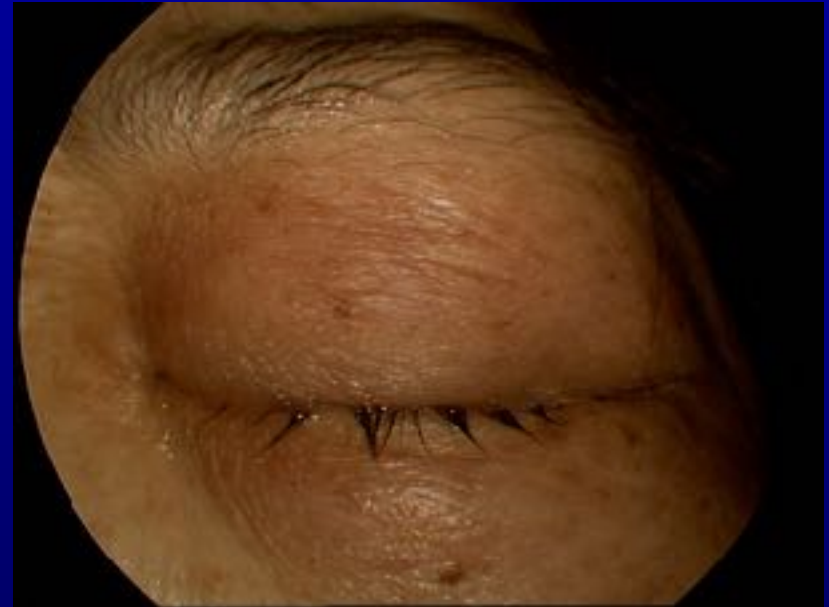
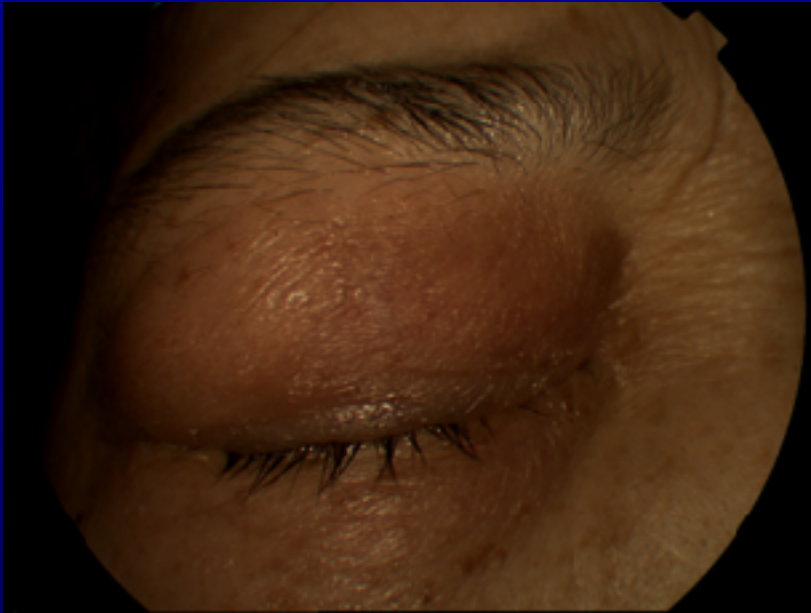
- intravenous drug use
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- extraocular site of infection
- chronic antibiotic use
- indwelling catheter
- immunosuppression
  - diabetes, iatrogenic



**None**

# Endogenous Endophthalmitis

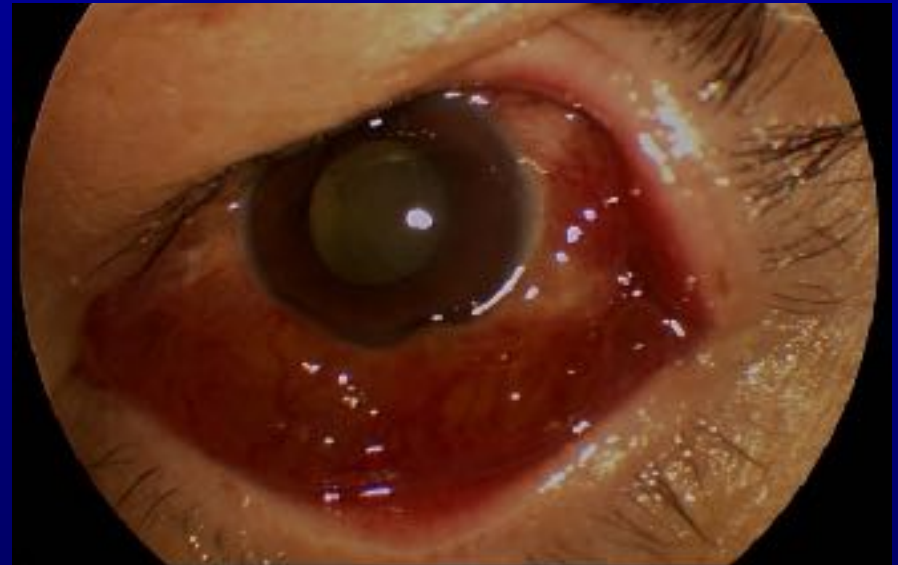
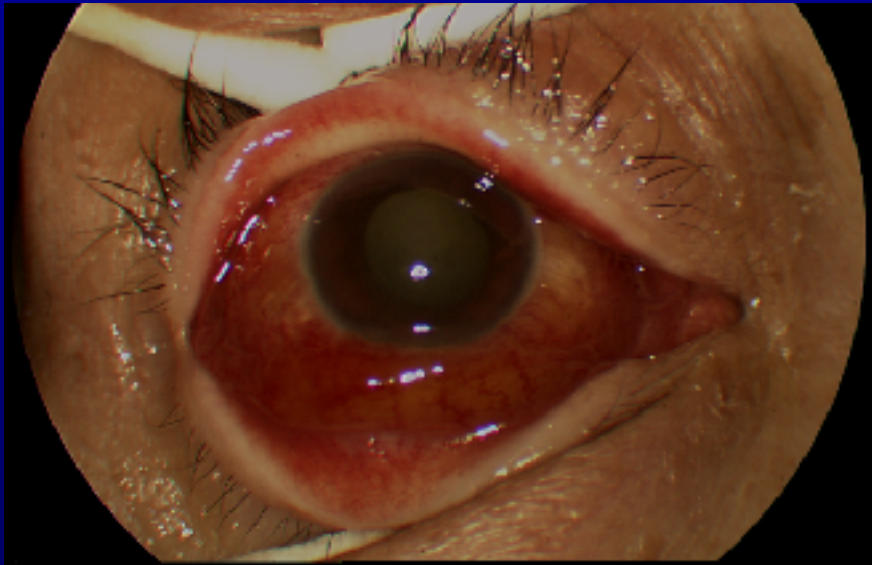
- 54 year old Chinese woman
  - bilateral lid swelling
  - light perception vision OU



**patient did not appear sick**

# Endogenous Endophthalmitis

- 54 year old Chinese woman
  - no hypopyon
  - vitritis
  - no fundus details

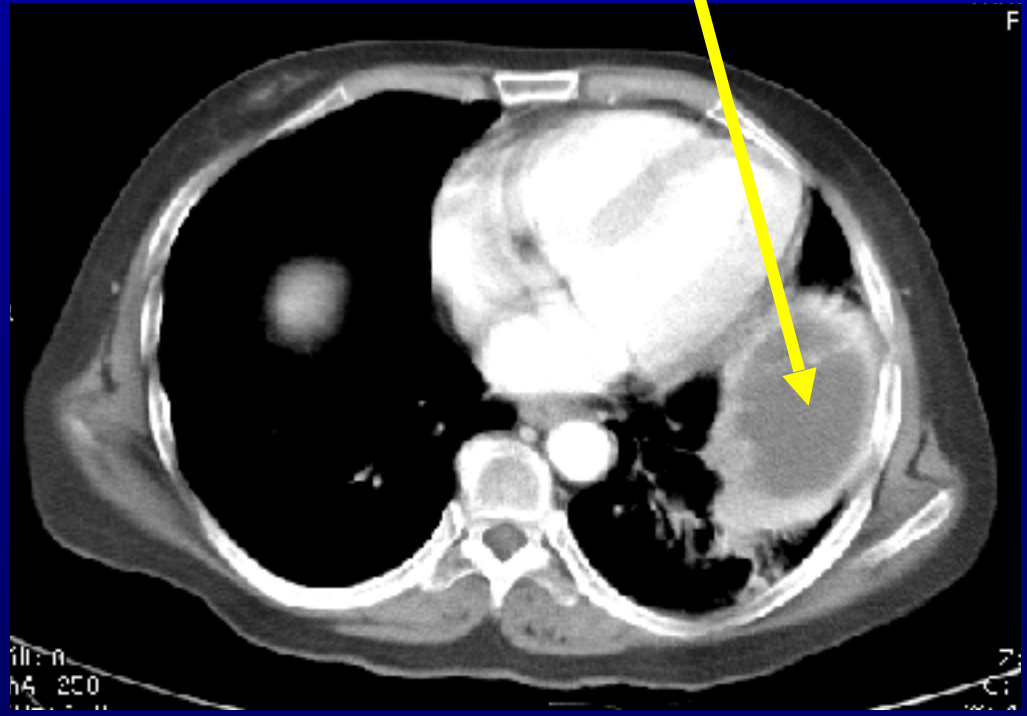
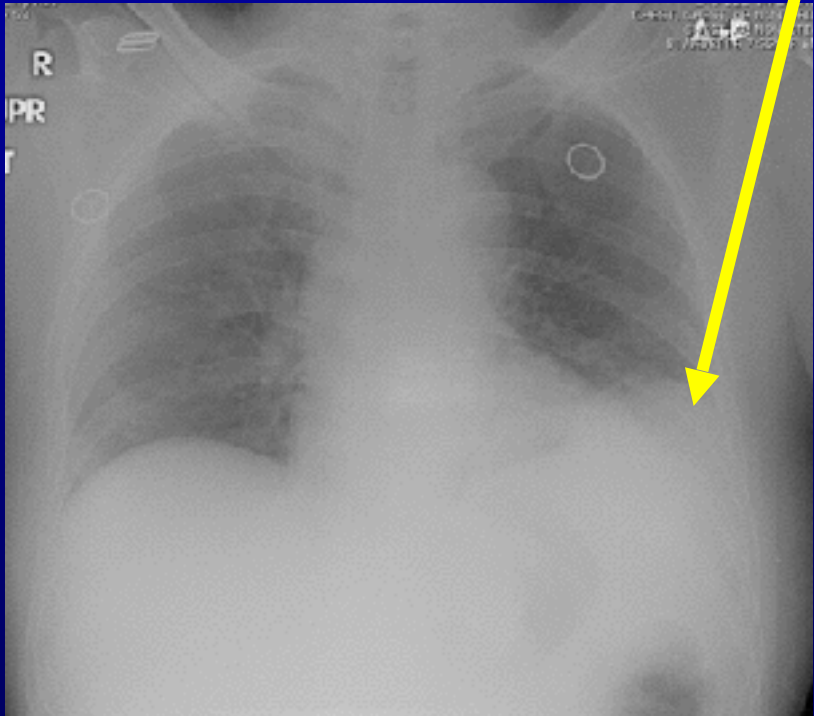


**patient did not appear sick**

# Disseminated Infection

- CXR & chest CT
  - pneumonia

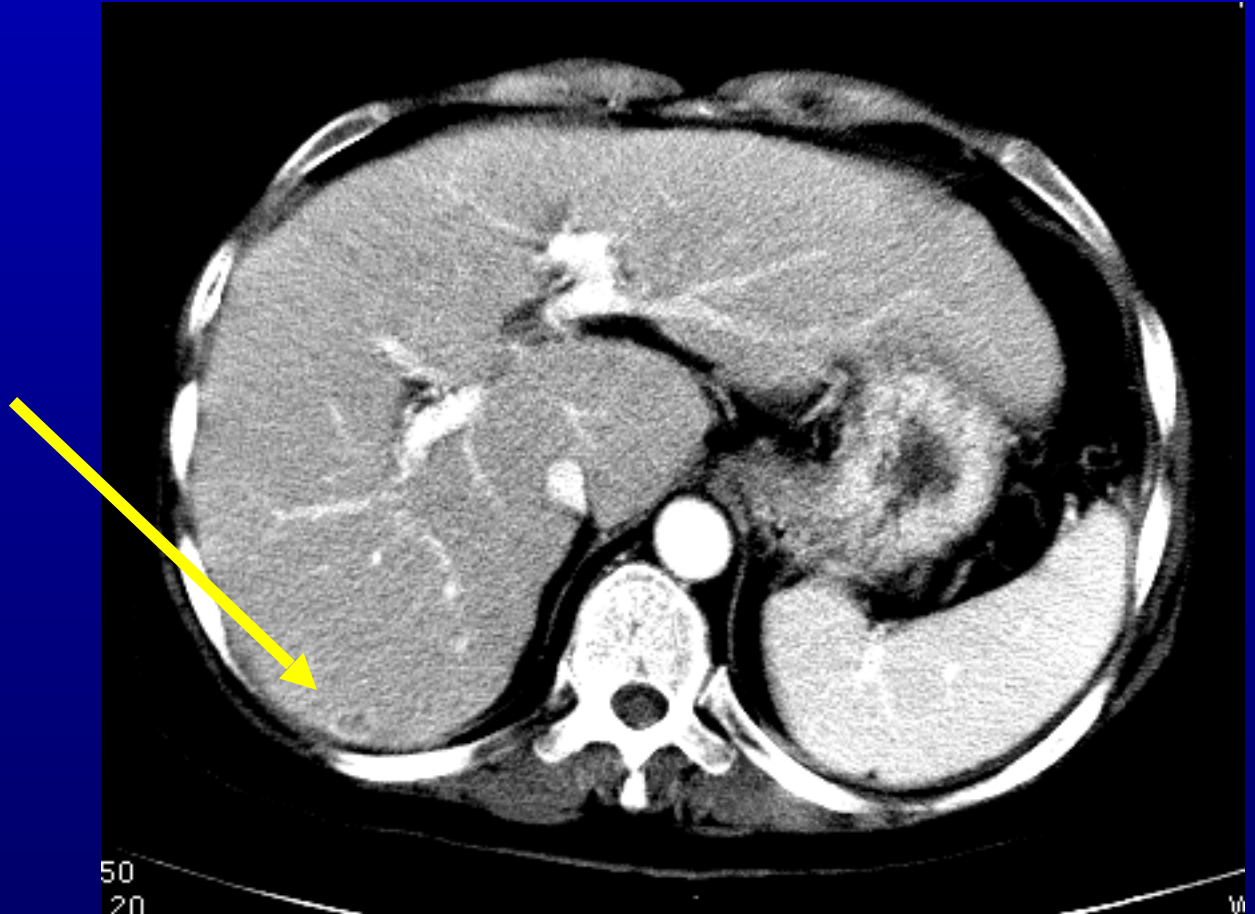
**left lower lobe infiltrate**



# Disseminated Infection

- abdominal CT

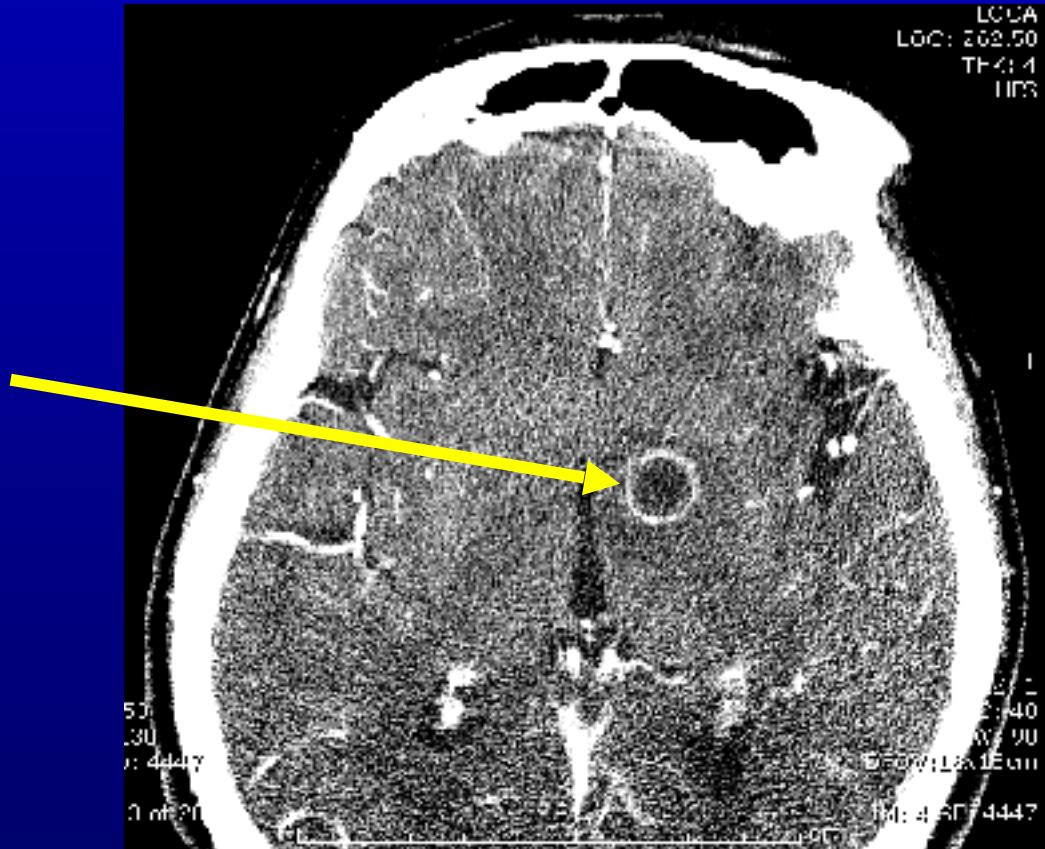
**liver abscess**



# Disseminated Infection

- head CT

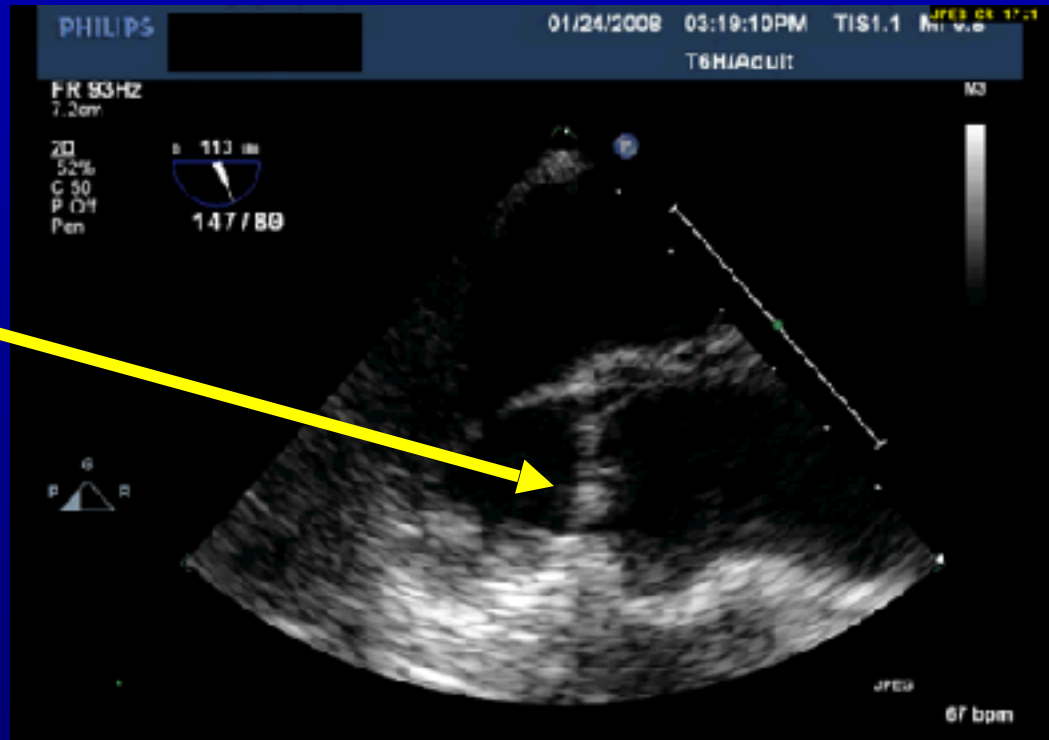
**brain abscess**



# Disseminated Infection

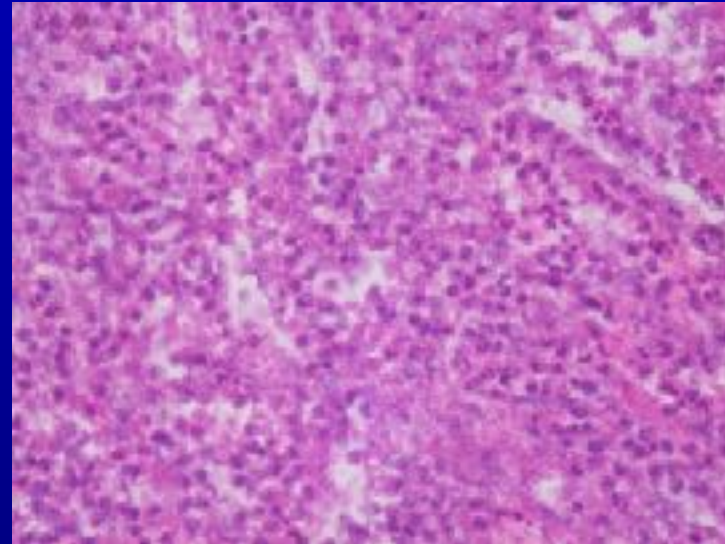
- cardiac echo

endocarditis



# Disseminated Infection

- vitreous culture
  - **Klebsiella**
- blood culture
  - **Klebsiella**
- urine culture
  - **Klebsiella**

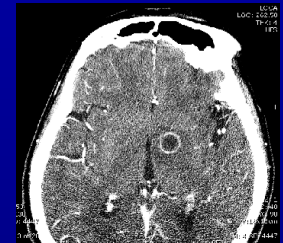
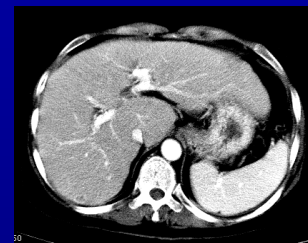
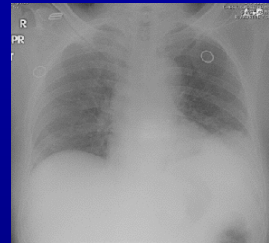
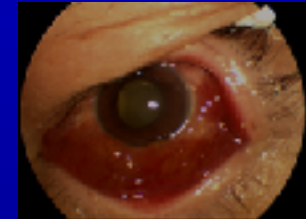


**Klebsiella is an emerging pathogen in endogenous endophthalmitis in the US**

# Endogenous Endophthalmitis

Bilateral *Klebsiella pneumoniae* (K1 Serotype)  
Endogenous Endophthalmitis  
as the Presenting Sign of  
Disseminated Infection

Amir H. Kashani, MD, PhD  
Dean Elliott, MD

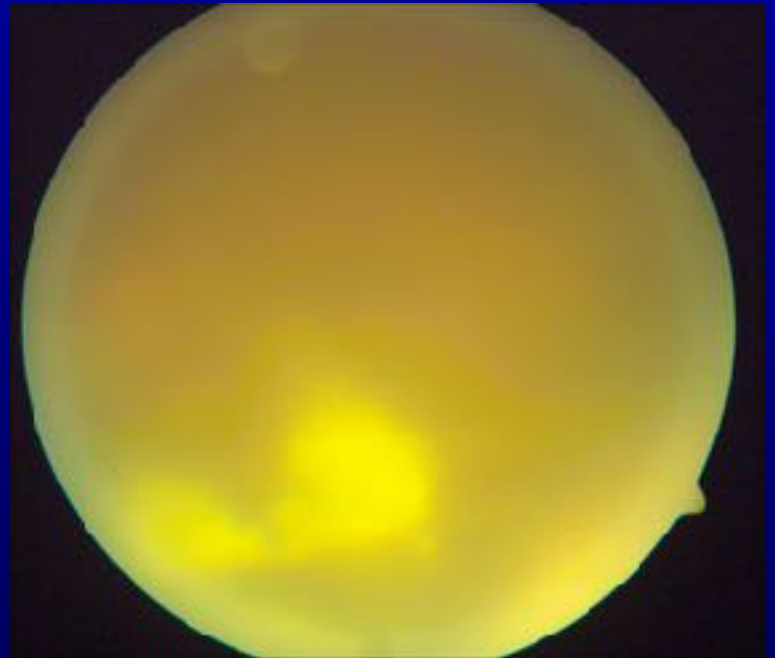
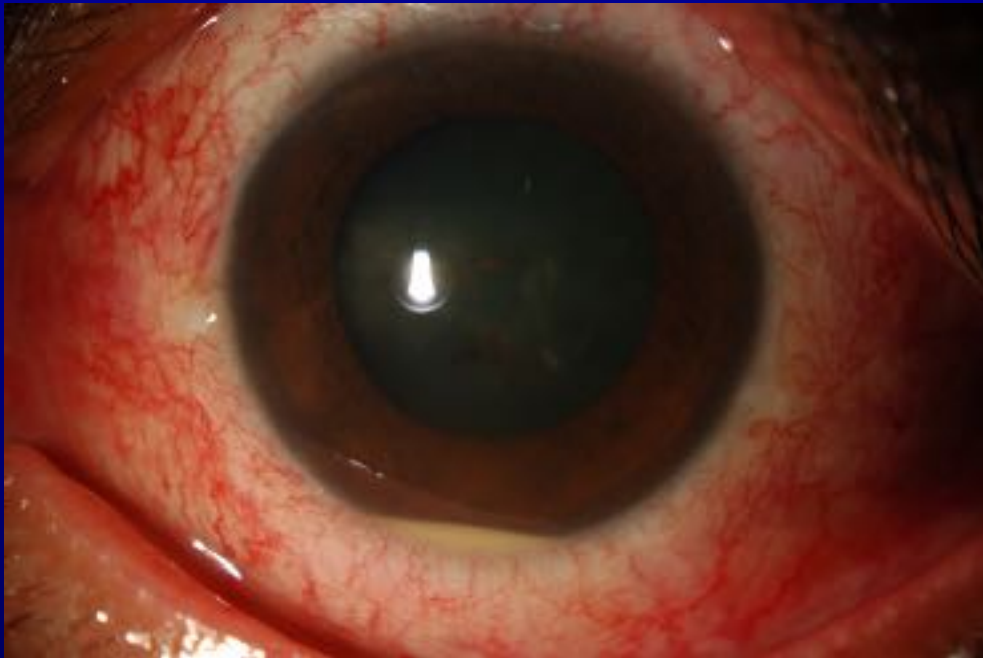


The emergence of *Klebsiella pneumoniae*  
endogenous endophthalmitis in the USA: basic  
and clinical advances

Amir H Kashani<sup>1</sup> and Dean Elliott<sup>2\*</sup>

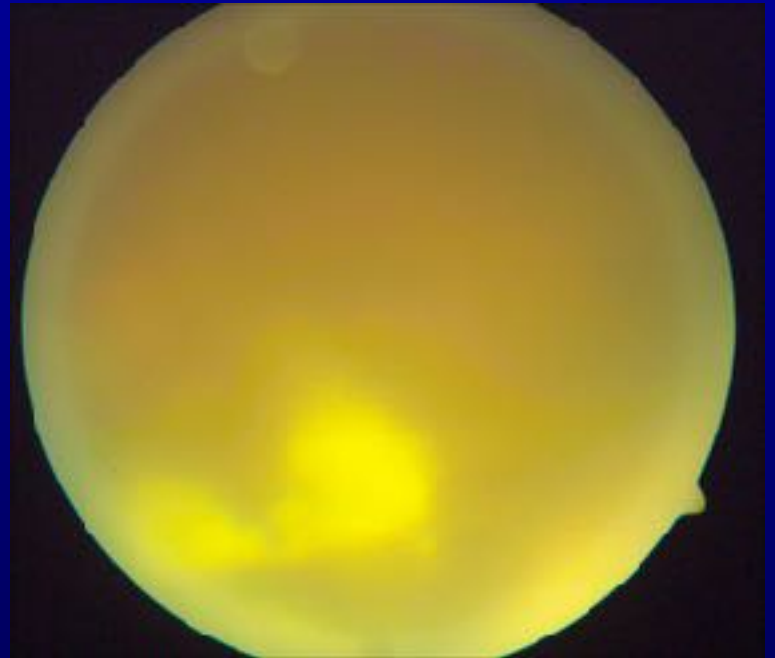
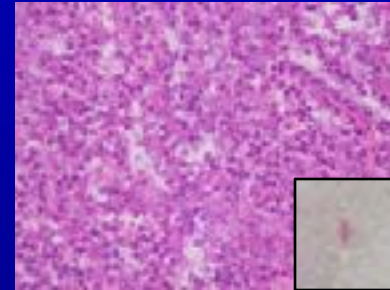
# Endogenous Endophthalmitis

- 47 year old Hispanic man
  - decreased vision OS 3 weeks
  - given systemic steroids by ophthalmologist



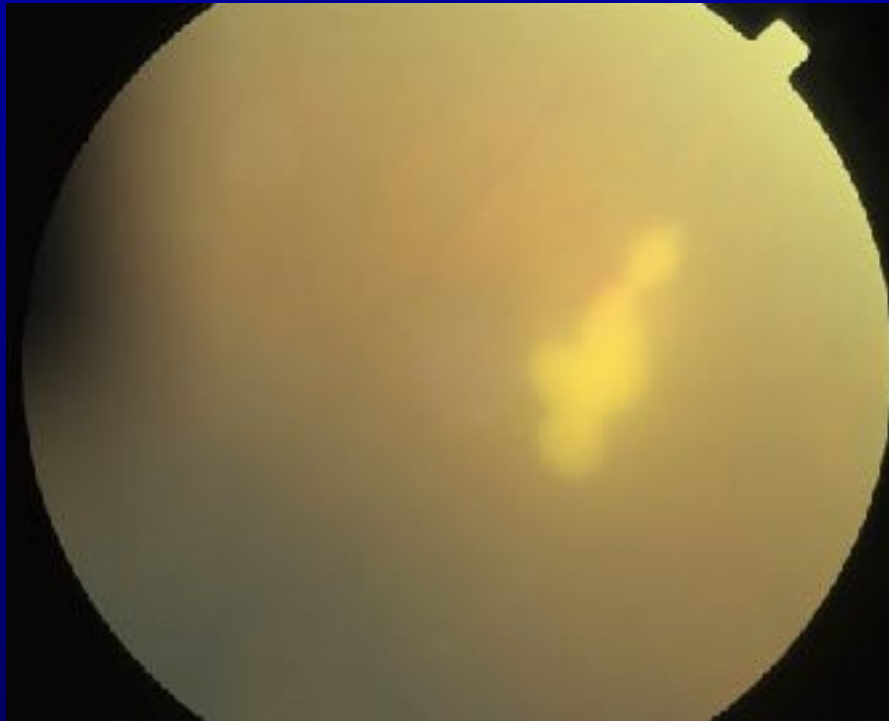
# Endogenous Endophthalmitis

- 47 year old Hispanic man
  - vitreous culture - **Klebsiella**
  - urine culture - **Klebsiella**



# Endogenous Endophthalmitis

- 62 year-old man
  - immunocompetent, no obvious source of infection
  - unresponsive to systemic anti-fungals

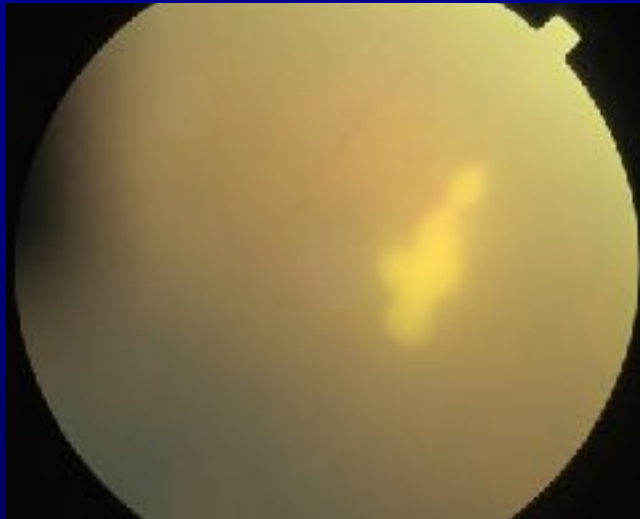


# Endogenous Endophthalmitis

- 62 year-old man
  - diagnostic vitrectomy
    - undiluted vitreous & cassette - negative
    - focal vitreous biopsy - **Candida**



preop

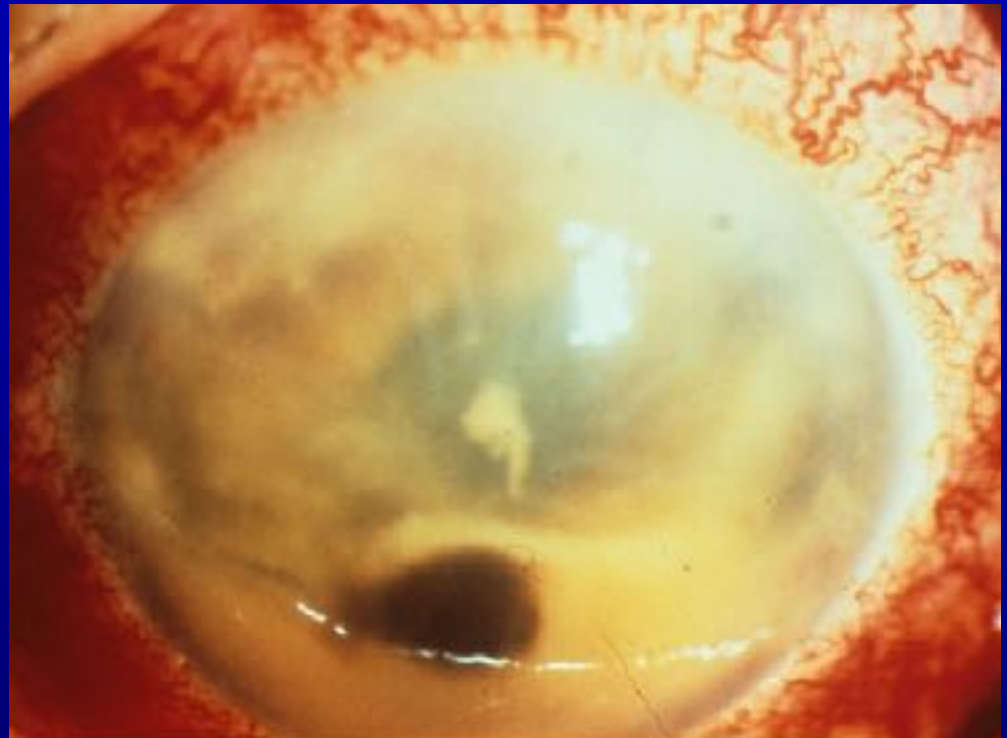


postop

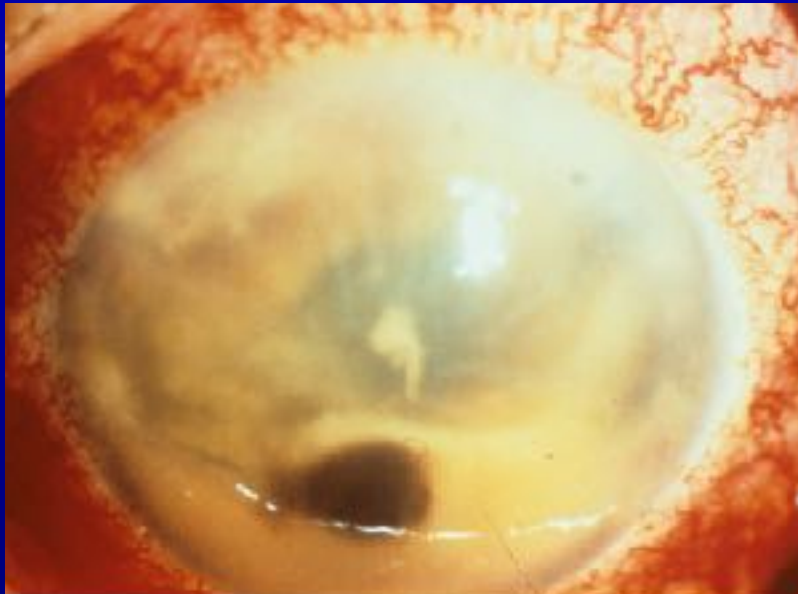


# Endogenous Endophthalmitis

- 67 year old woman
  - gastroenteritis
  - visual acuity
    - hand motion
  - intraocular pressure
    - 42 mm Hg

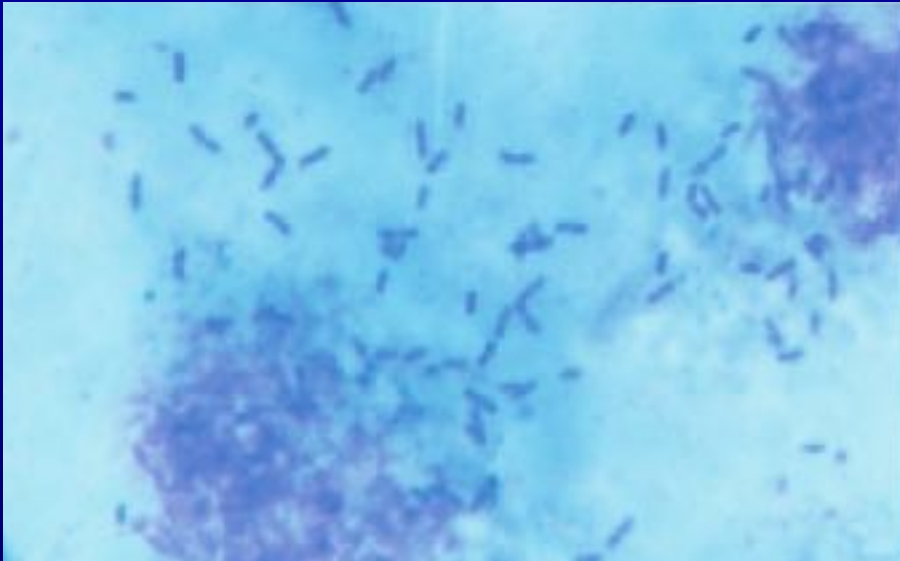


# Endogenous Endophthalmitis



# Endogenous Endophthalmitis

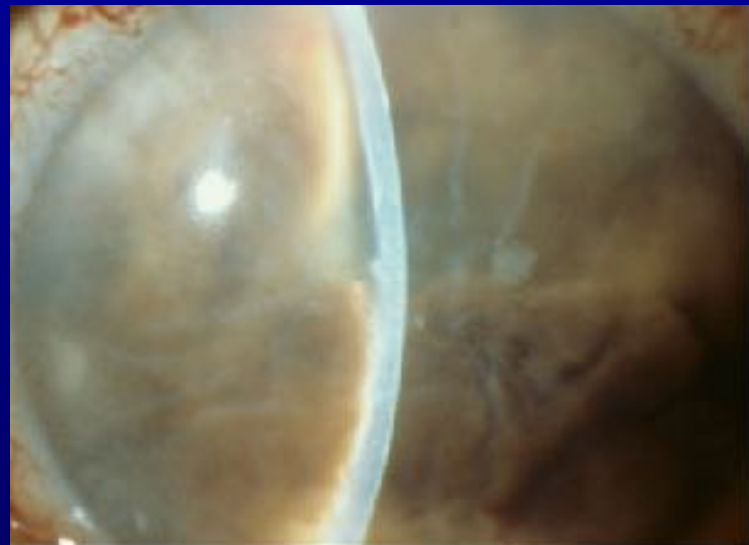
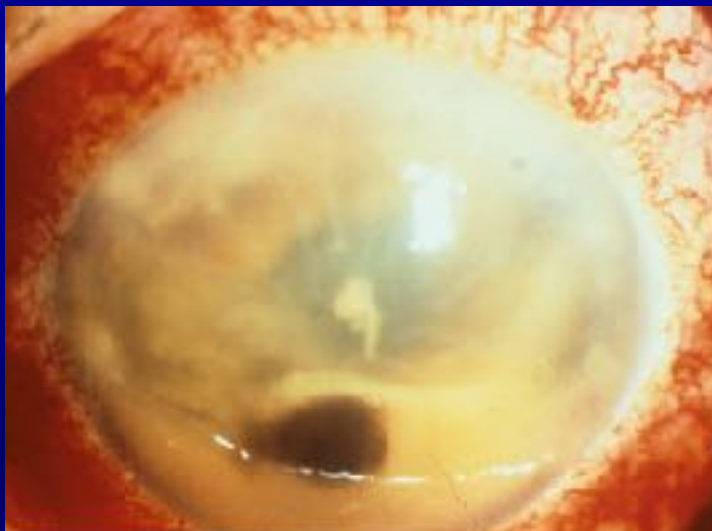
- **Listeria monocytogenes**
  - gram (+) bacillus



# Endogenous Endophthalmitis

**Elevated Intraocular Pressure, Pigment Dispersion and Dark Hypopyon in Endogenous Endophthalmitis from *Listeria monocytogenes***

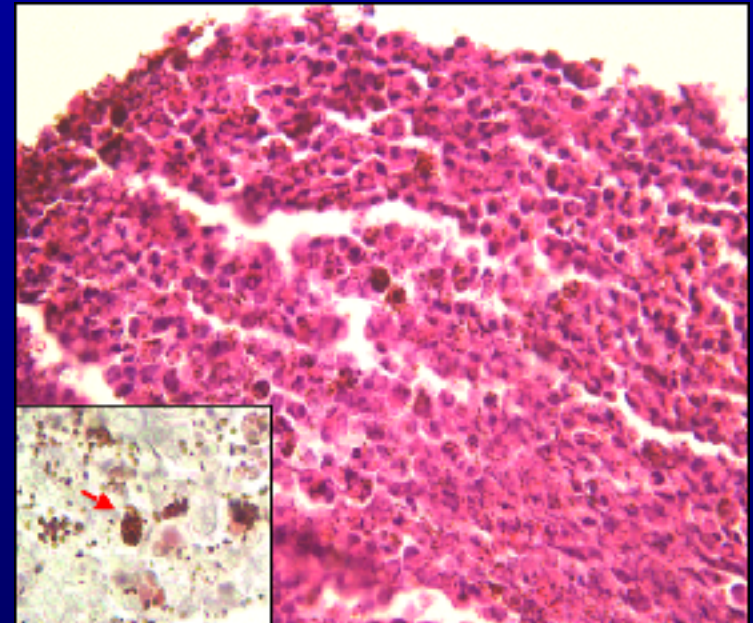
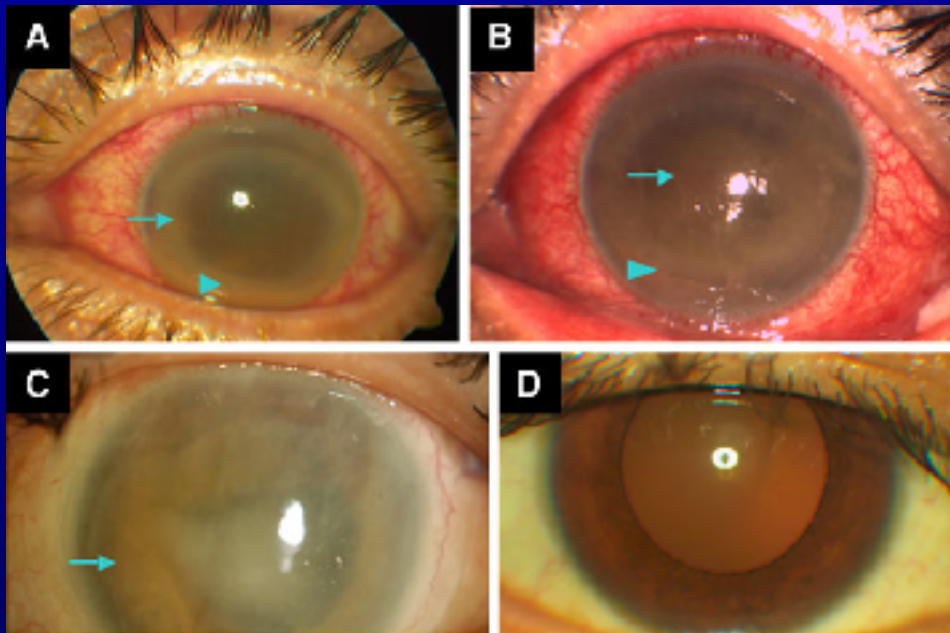
DEAN ELIOTT, M.D., TERRENCE P. O'BRIEN, M.D., W. RICHARD GREEN, M.D.,  
HENRY D. JAMPEL, M.D., AND MORTON F. GOLDBERG, M.D.



# Endogenous Endophthalmitis

## Dark hypopyon in *Streptococcus bovis* endogenous endophthalmitis: clinicopathologic correlations

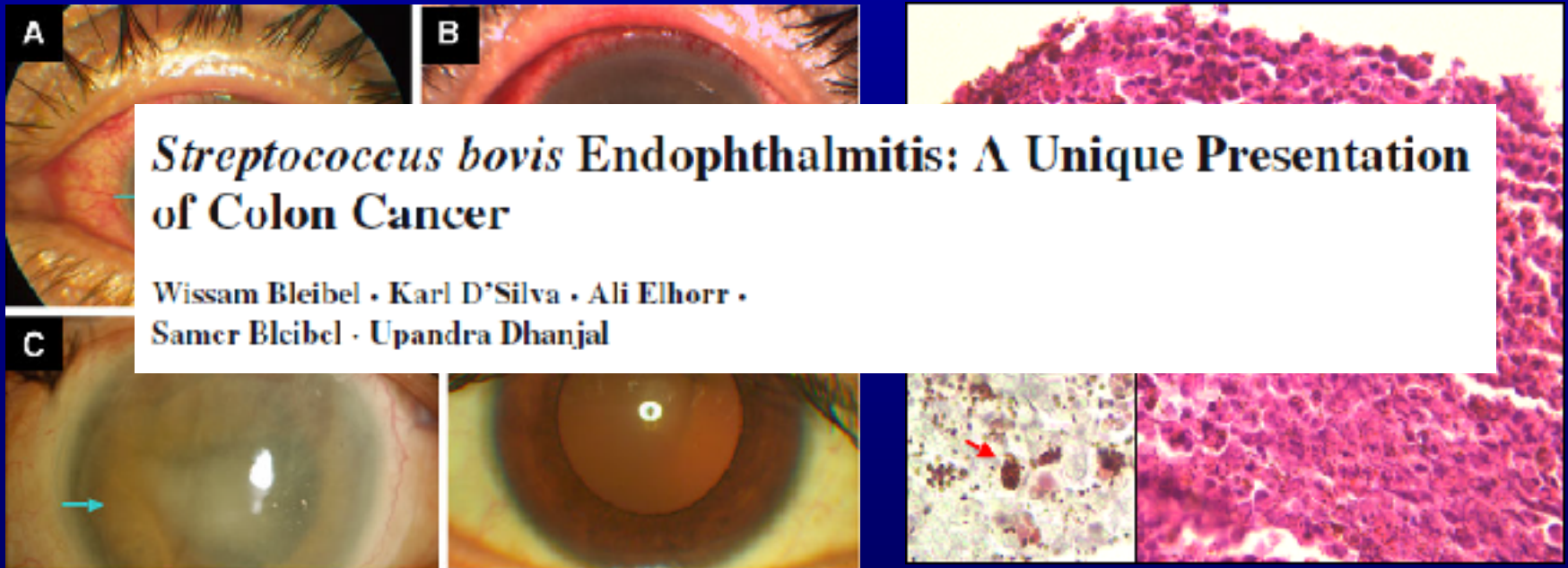
Adam Hauch • Dean Elliott • Narsing A. Rao •  
Daniel V. Vasconcelos-Santos • Thomas O'Hearn •  
Amani A. Fawzi



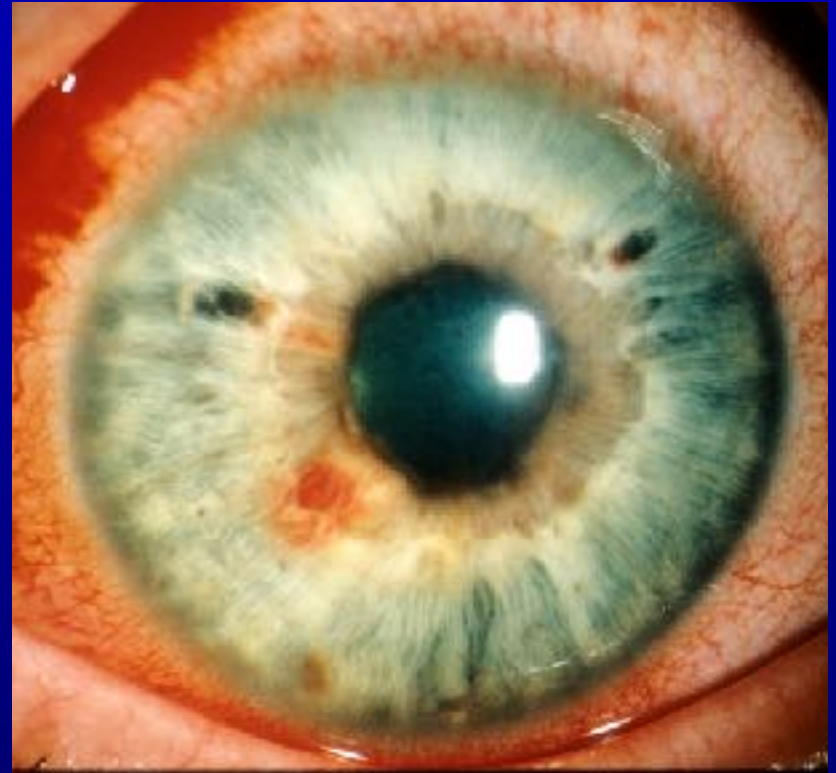
# Endogenous Endophthalmitis

**Dark hypopyon in *Streptococcus bovis* endogenous endophthalmitis: clinicopathologic correlations**

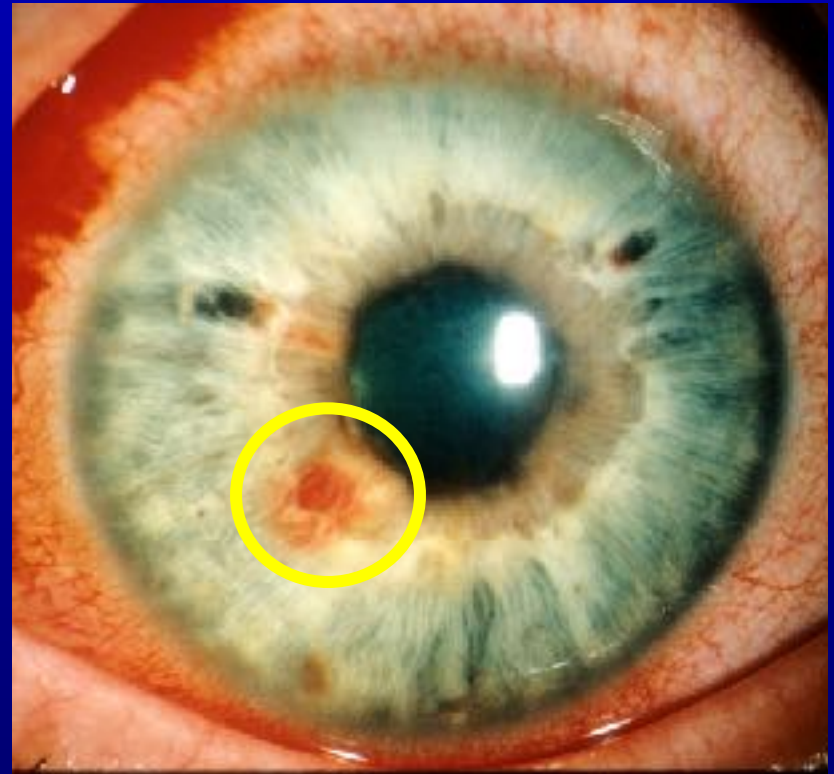
Adam Hauch • Dean Elliott • Narsing A. Rao •  
Daniel V. Vasconcelos-Santos • Thomas O'Hearn •  
Amani A. Fawzi



# Endogenous Endophthalmitis



# Endogenous Endophthalmitis



# Syphilis

THE NEW ENGLAND JOURNAL OF MEDICINE

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CASE RECORDS of the MASSACHUSETTS GENERAL HOSPITAL

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Dean Elliott, M.D., George N. Papaliadis, M.D., Marlene E. Durand, M.D.,  
and Sarah E. Turbett, M.D.



# Syphilis



123

## How to Recognize Ocular Syphilis

KNOWN AS THE GREAT IMITATOR BECAUSE responsible for less than 5 percent of its potential manifestations, syphilis results from infection by the spirochete *Treponema pallidum*. Although the incidence of infection has decreased dramatically since advent of penicillin in the mid-20th century, venereal disease remains a major cause of blindness and other spread of the

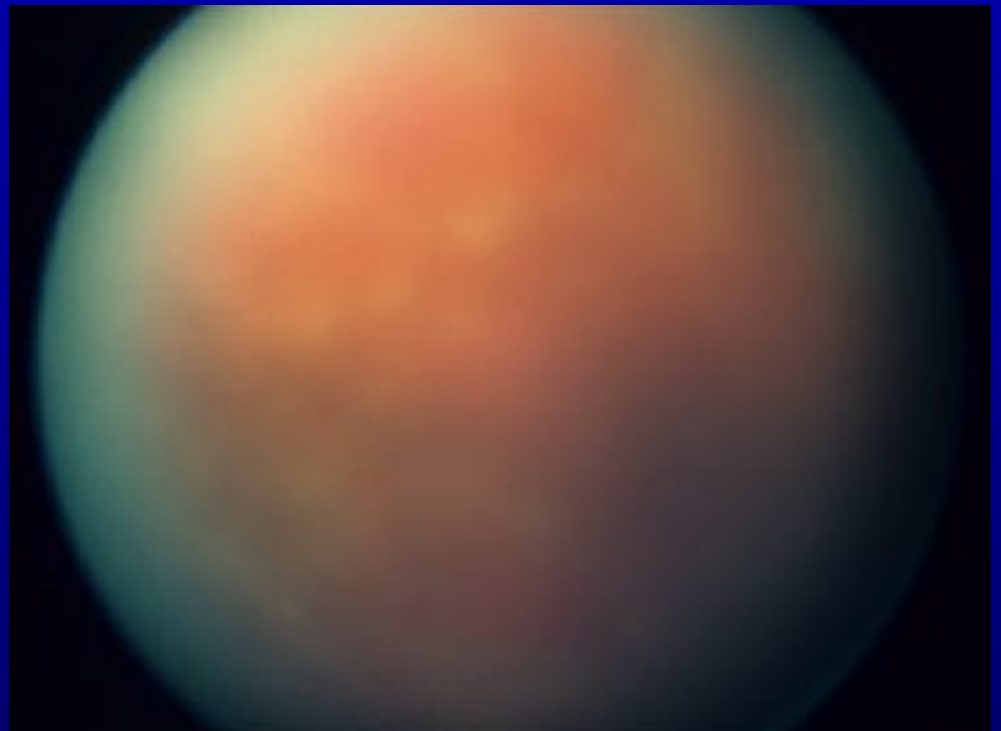
**Jon D. Wonder, MD**  
**Dean Elliot, MD**  
**J. Michael Jampar, MD**  
**Ermott T. Cunningham Jr., MD, PhD, MPH**  
*Los Angeles/San Francisco*



1

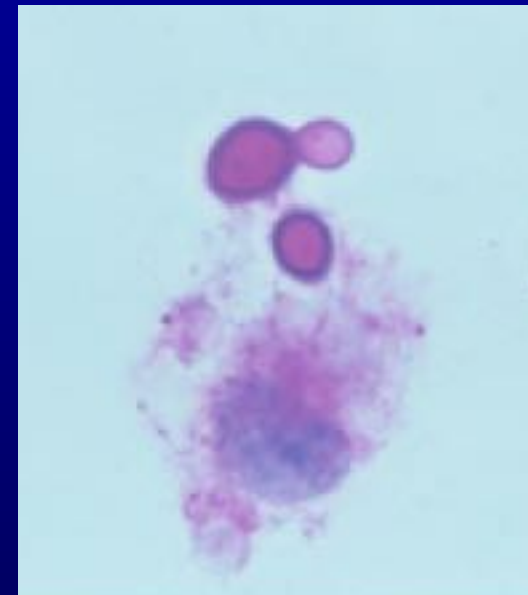
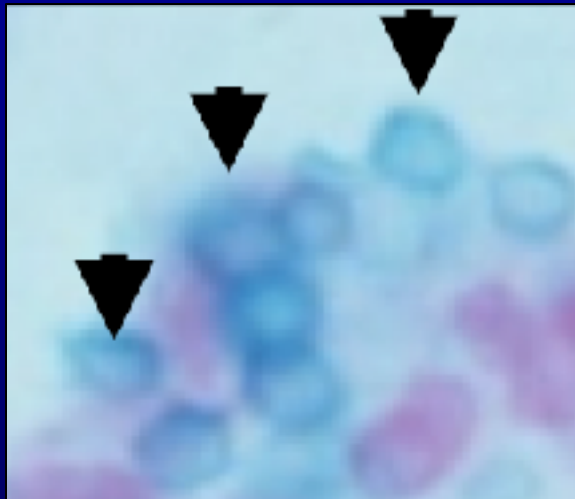
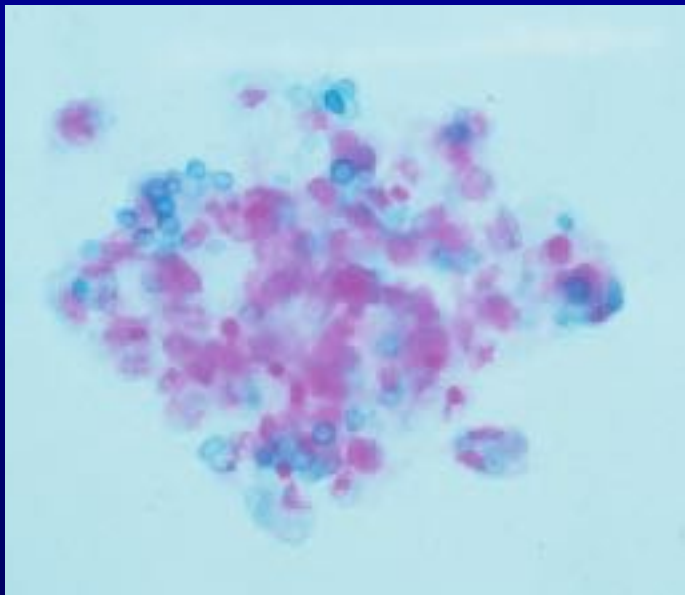
# Endogenous Endophthalmitis

- 69 year old man
  - immunocompetent
  - decreased vision
  - gait ataxia, mental status changes, urinary incontinence



# Endogenous Endophthalmitis

- 69 year old man
  - lumbar puncture - **Cryptococcus**
  - vitrectomy - **Cryptococcus**



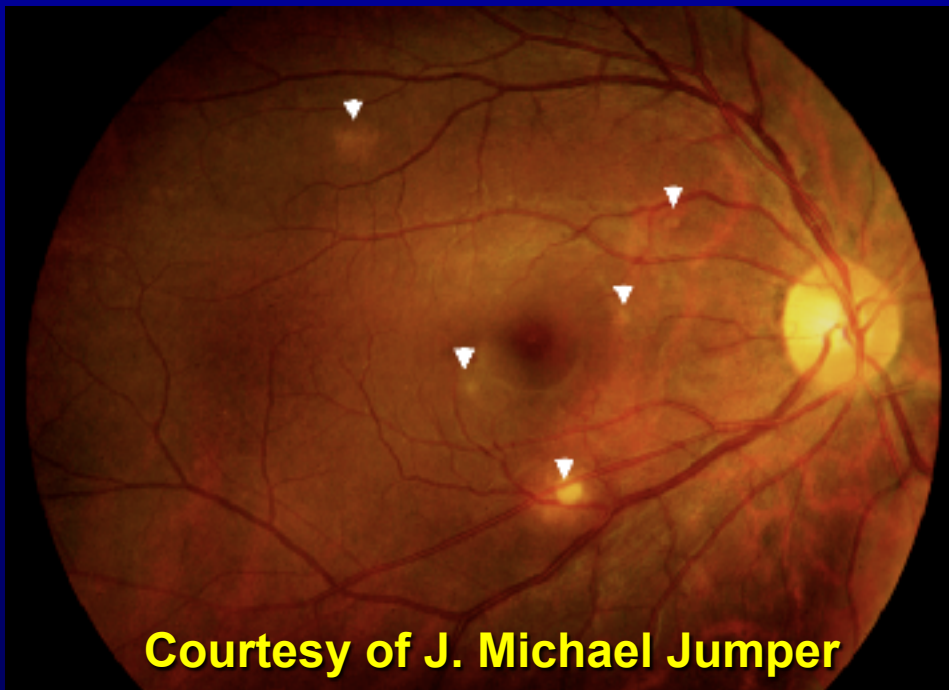
# Endogenous Endophthalmitis

- 69 year old man - **Cryptococcus**
  - multiple Amphotericin B injections

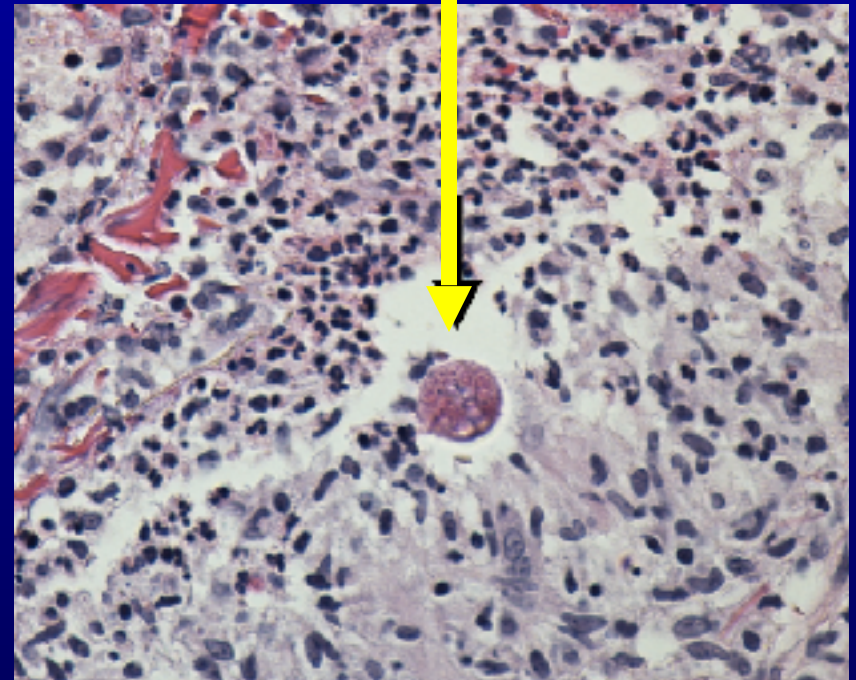


# Endogenous Endophthalmitis

- 36 year old man
  - **Coccidioides** choroiditis and pneumonitis



bronchoalveolar lavage



# Treatment

- Intravitreal antifungals
  - Amphotericin B 5-10 mcg/0.1 ml
  - Voriconazole 100 mcg/0.1 ml
    - less toxicity concerns
- Oral antifungals
  - Fluconazole 200 mg bid

# Treatment

- Intravitreal antibiotics
  - Vancomycin 1 mg/0.1 ml
  - Ceftazidime 2 mg/0.1 ml
    - avoid aminoglycosides
- Intravenous antibiotics

# Treatment

- Vitrectomy
  - 18% initial PPV, no secondary procedures
  - 78% initial tap/inject, 55%secondary PPV
    - 52% culture positive

# Treatment

- +/- Intravitreal steroids
  - Dexamethasone 400 mcg/0.1 ml
  - Not usually used in fungal endophthalmitis cases

# Trends in Endogenous Endophthalmitis

- Okada, 1994
  - IVDU 7%
  - Staph 25%
    - MRSA 0%

**Endogenous bacterial endophthalmitis. Report of a ten-year retrospective study.**

Okada AA<sup>1</sup>, Johnson RP, Lies WC, D'Amico DJ, Baker AS.

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# Trends in Endogenous Endophthalmitis

- Okada, 1994
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    - MRSA 0%

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    - MRSA 0% versus 31% now

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# Trends in Endogenous Endophthalmitis

- Okada, 1994
  - IVDU 7% versus ~20% now
  - Staph 25% versus 59% now
    - MRSA 0% versus 31% now
  - Visual outcomes improved

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# Endogenous Endophthalmitis

## Risk Factors

- intravenous drug use
- positive blood cultures
- extraocular site of infection
- chronic antibiotic use
- indwelling catheter
- immunosuppression
  - diabetes, iatrogenic

# Endogenous Endophthalmitis

- 20% of all endophthalmitis cases
  - incidence increasing
  - skin infections and MRSA increasing
- 50% of endogenous cases due to IVDU
  - IVDU increasing
- fungal > bacterial
  - bacterial increasing

# Endogenous Endophthalmitis

- history and exam offer clues to the systemic infection
- early vitrectomy associated with improved results

# Endophthalmitis

