

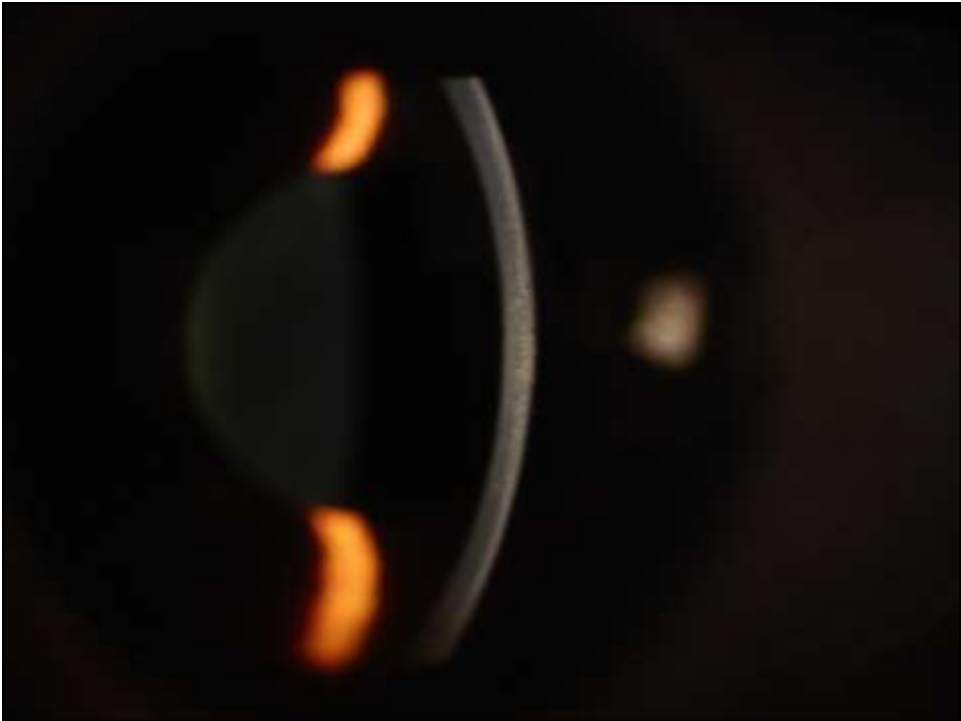
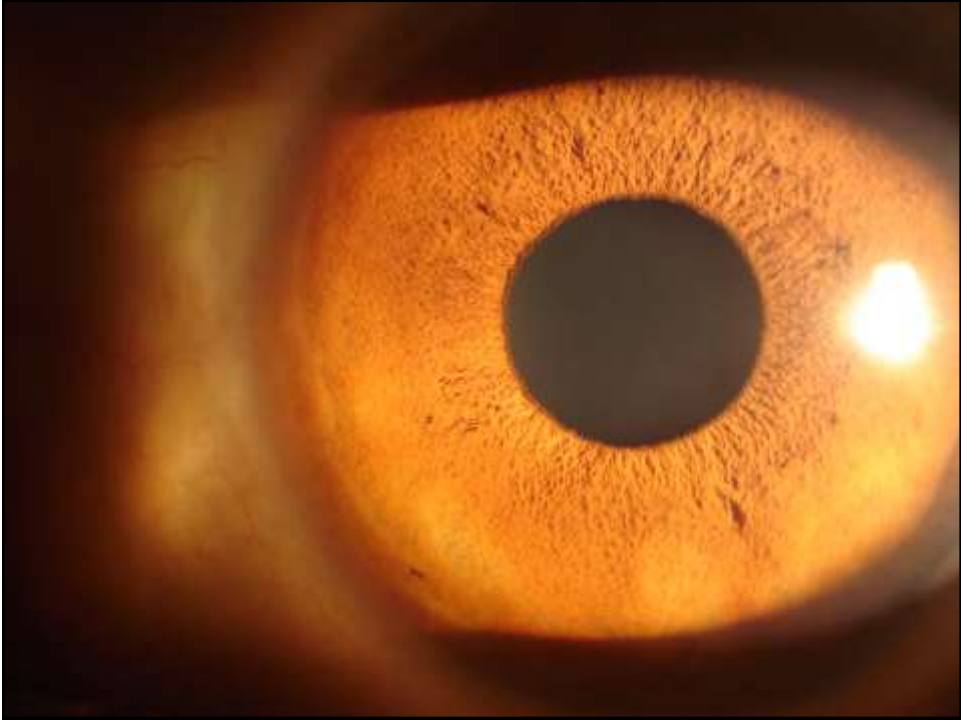
PROBLEM SOLVING OF MICROBIAL KERATITIS.

**Ashraf Amayem, FRCS
EL Ain Eye Center
Cairo, Egypt.**

Diagnosis Of Corneal Lesion

- **Morphological
Diagnosis.
(Opacity.)**
- **Pathological
Diagnosis.
(Ulcer, Abscess.)**
- **Etiological
Diagnosis.
(Herpetic ulcer.)**







CORNEAL OPACITIES :

- **SCARS.**
- **INFILTRATES.**
- **DYSTROPHIES & DEGENERATIONS.**



Check Corneal Thickness

- ↓ Thickness in a scar.
- ↑ Thickness in an infiltrate.



Types of Corneal Infiltrates

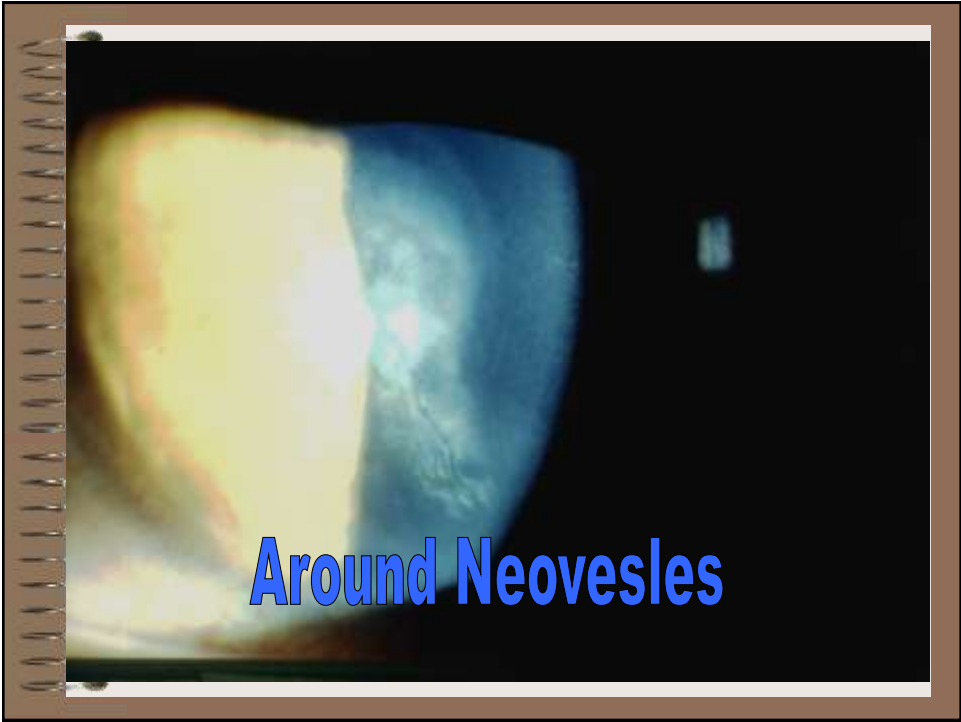
- **Infective.**
- **Immune reaction.**
- **Deposits.**

Check The Border :

<ul style="list-style-type: none"> • Infective infiltrate 	→	<i>Fuzzy irregular border</i>
<ul style="list-style-type: none"> • Immune reaction 	→	<i>Well demarcated border</i>
<ul style="list-style-type: none"> • Deposits 	→	<i>Around neovessels(Lipid)</i>

Iron





Infective Infiltrates :

- **Complete Cornea Work-up**
- **Scrapping for smears, cultures & sensitivity**
- **Smears :**
 - ⇒ *Gram, Giemsa and calclur white stains.*
- **Cultures:**
 - Blood, chocolate & sabaraud agar.*
 - Thyoglycolate broth.*



- **Herpes simplex virus (H.S.V.) antigen detection**

Affinity membrane test

Immunofluorescent test

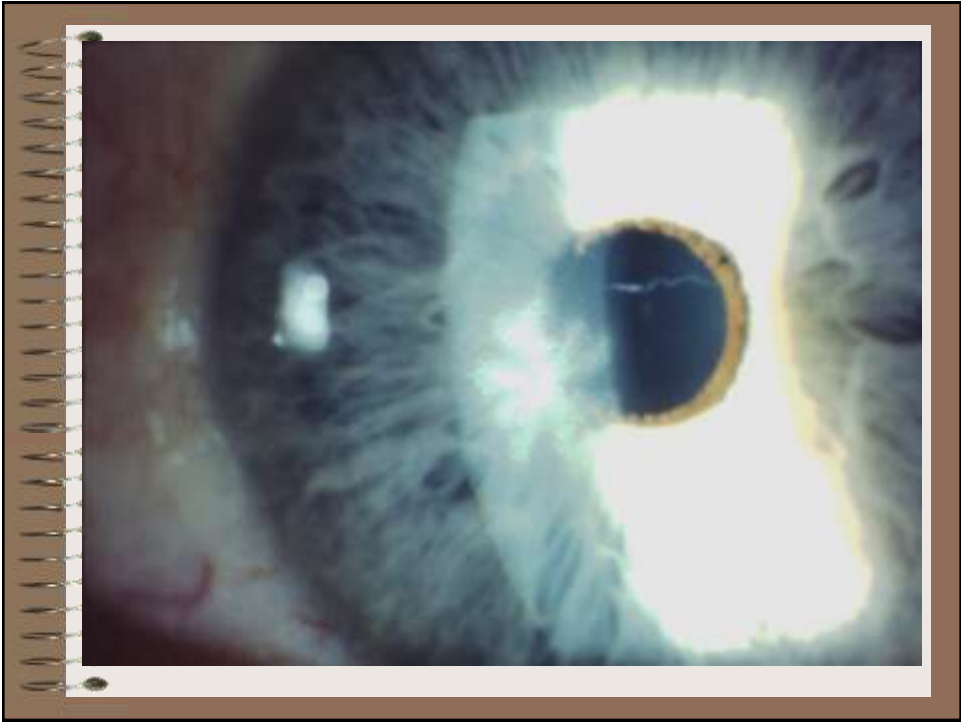
Level of Corneal Infiltrates

- *Epithelial.*
- *Subepithelial.*
- *Stromal.*

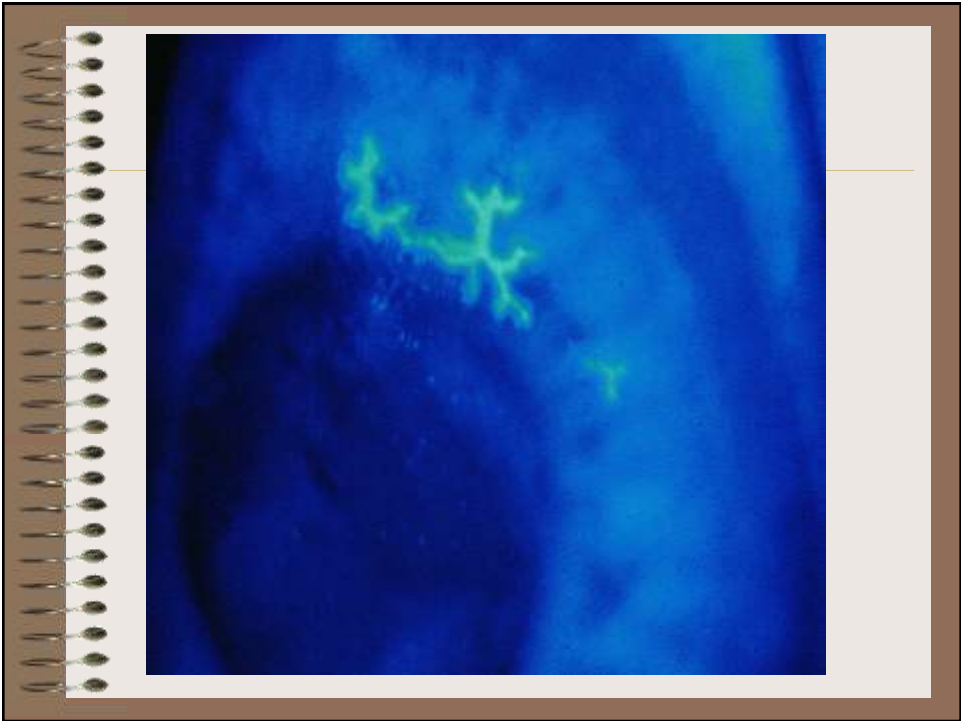
- **Epithelial defects with or without subepithelial infiltrate** always think of *Herpes Simplex Virus*. →

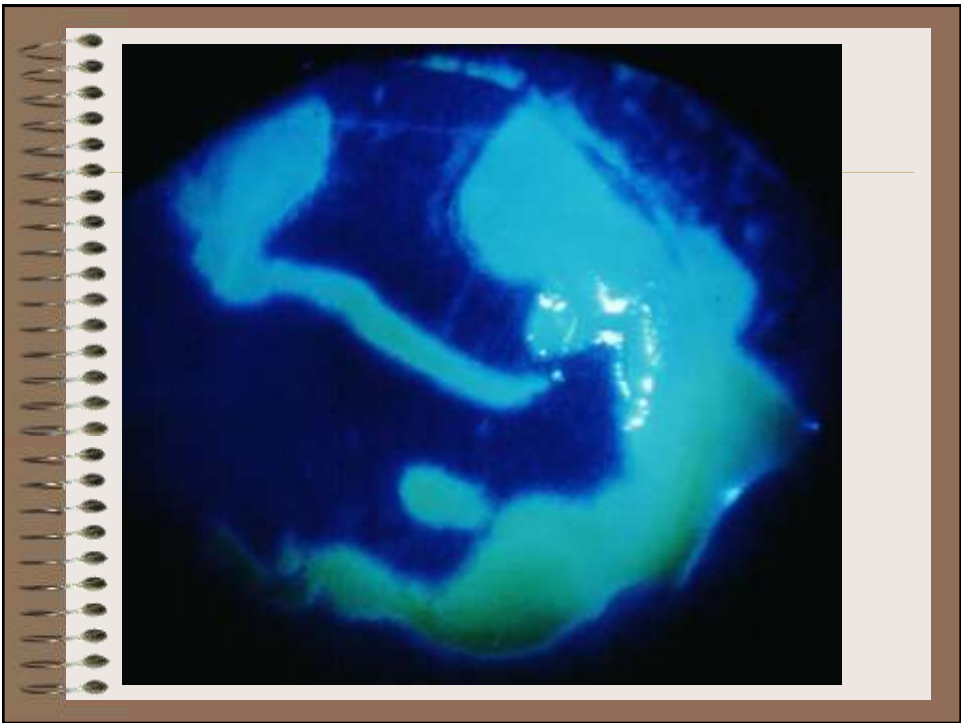
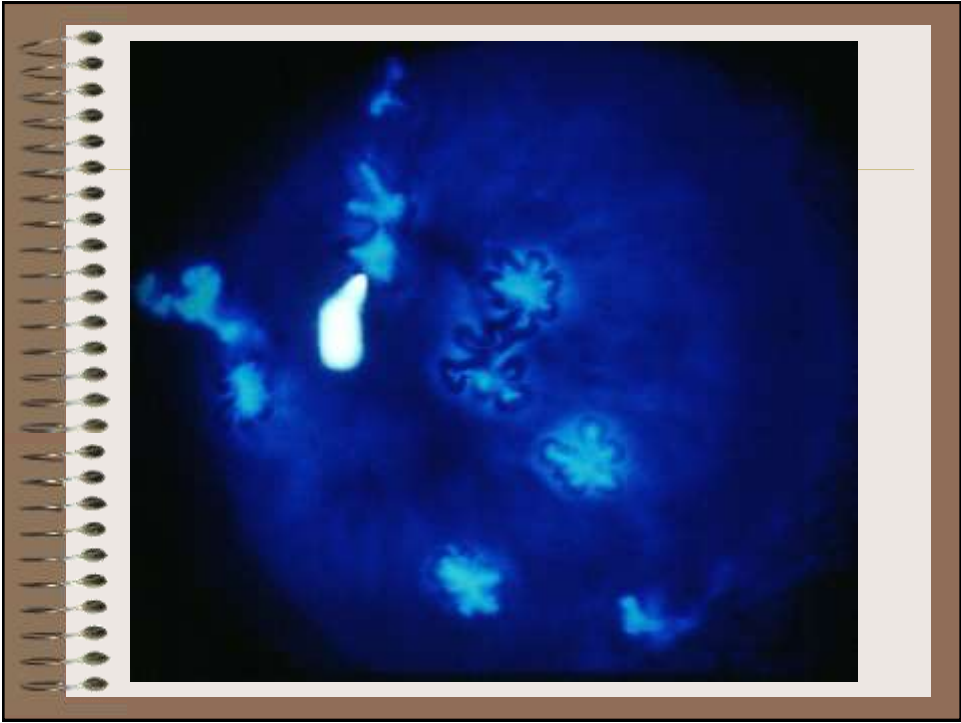


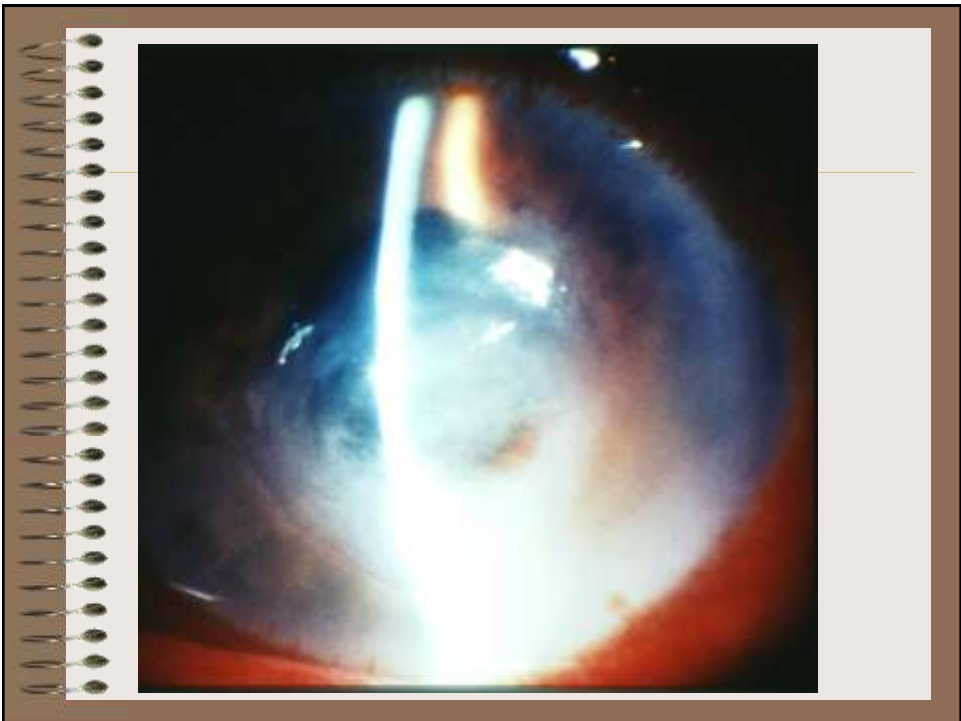
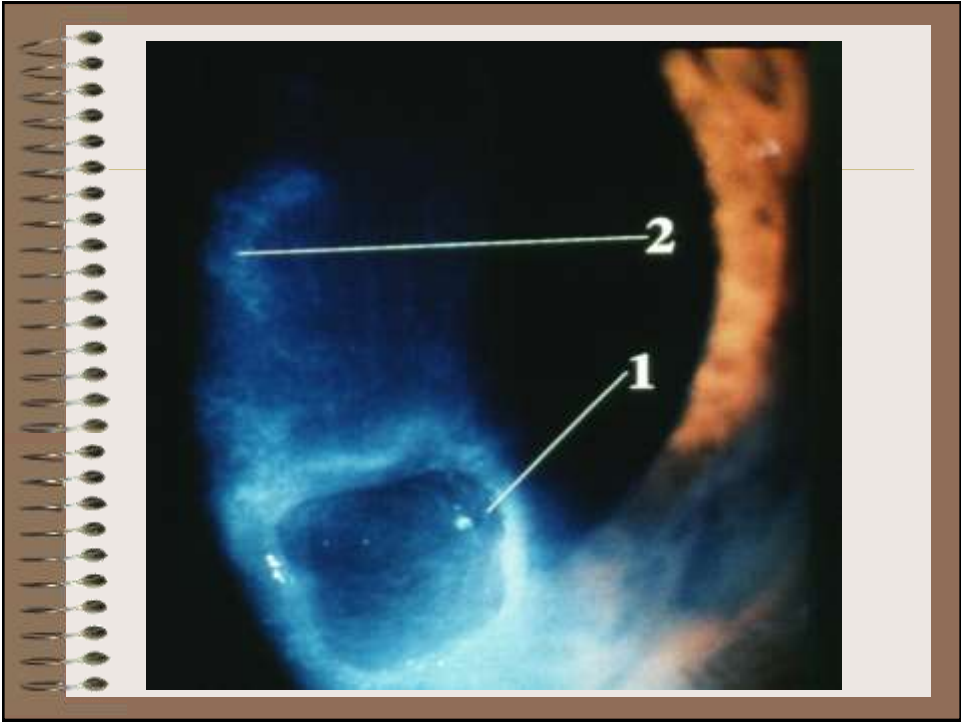


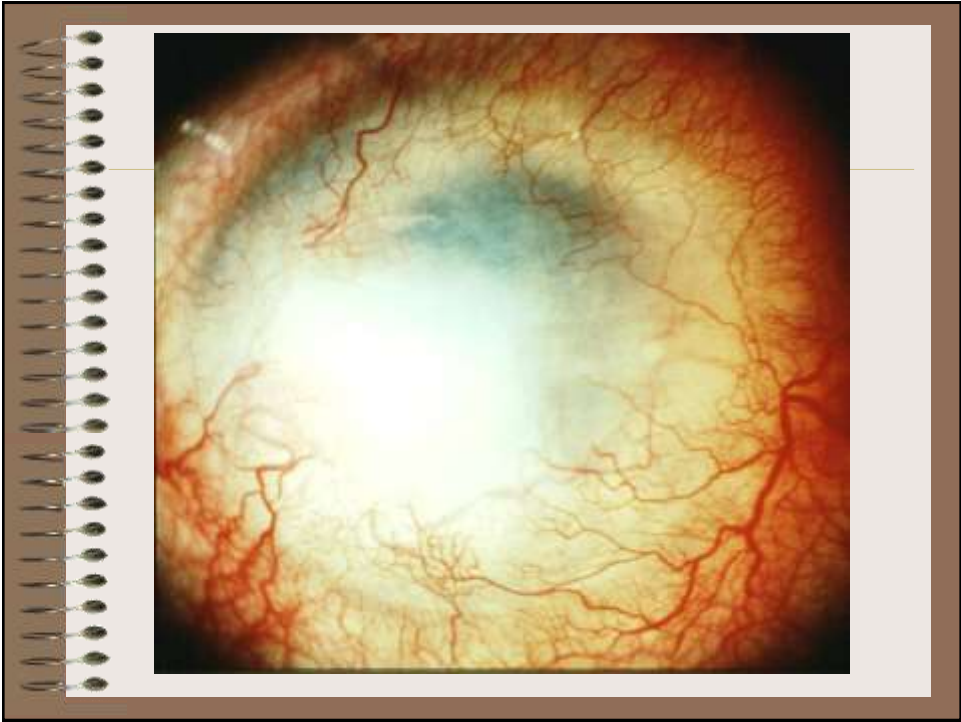
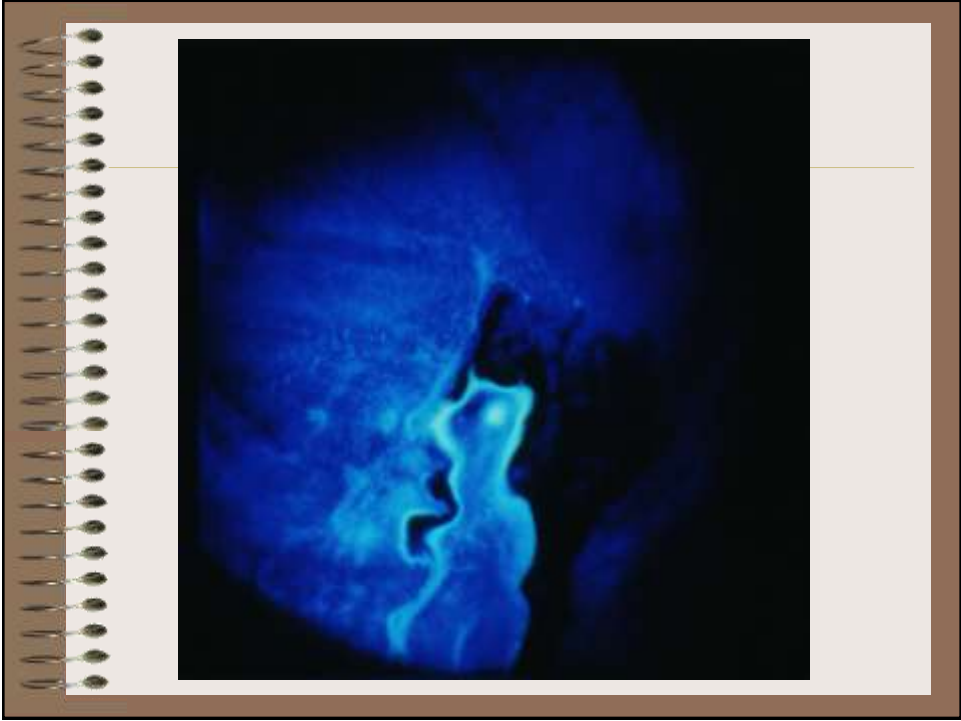




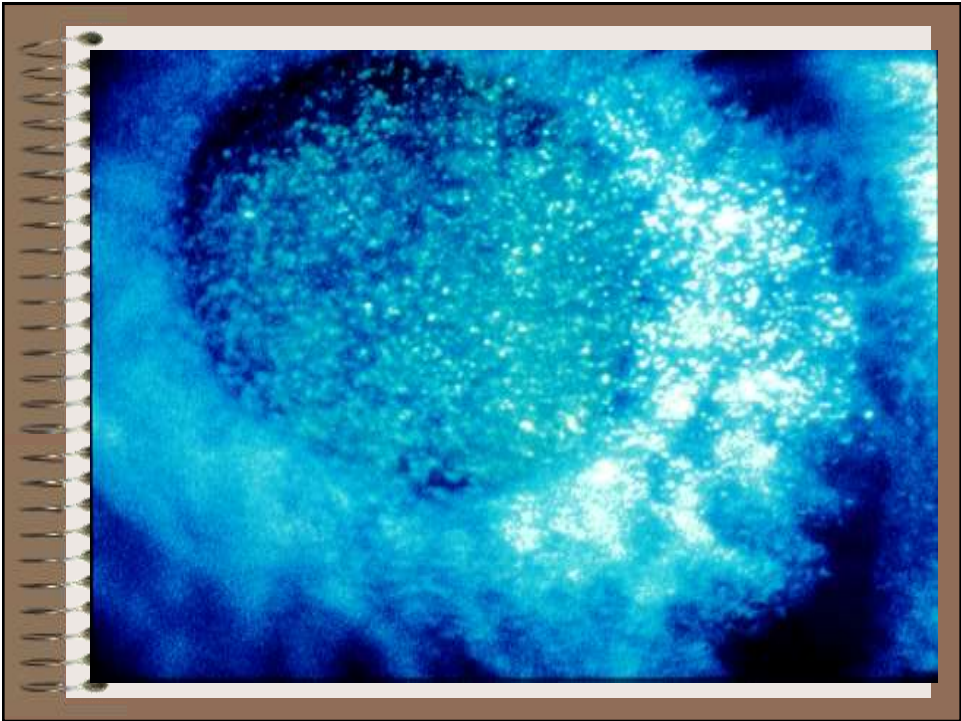
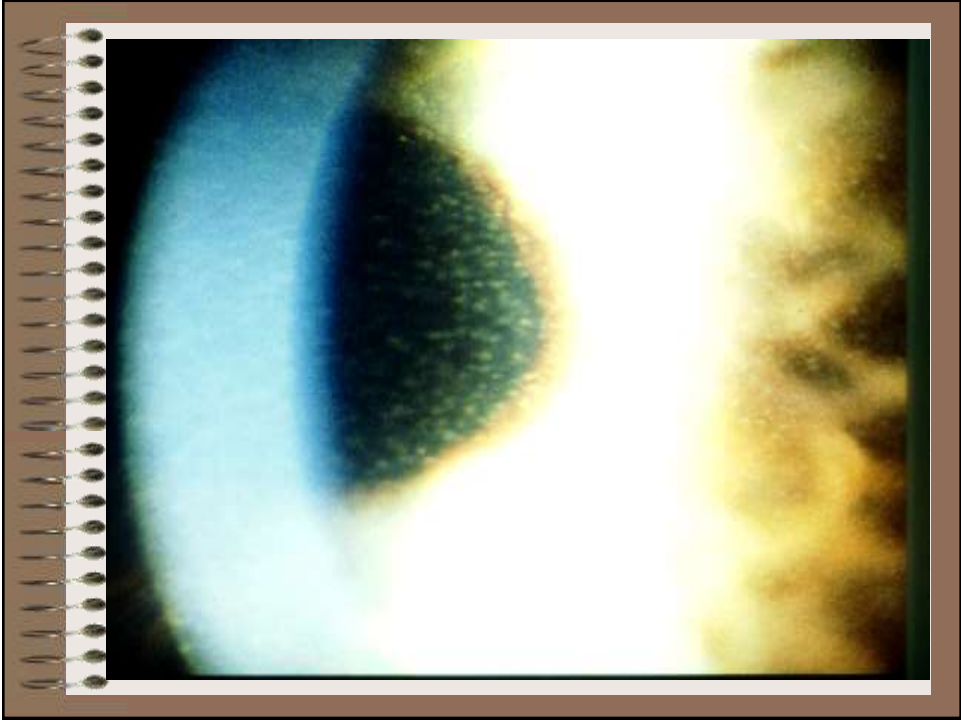


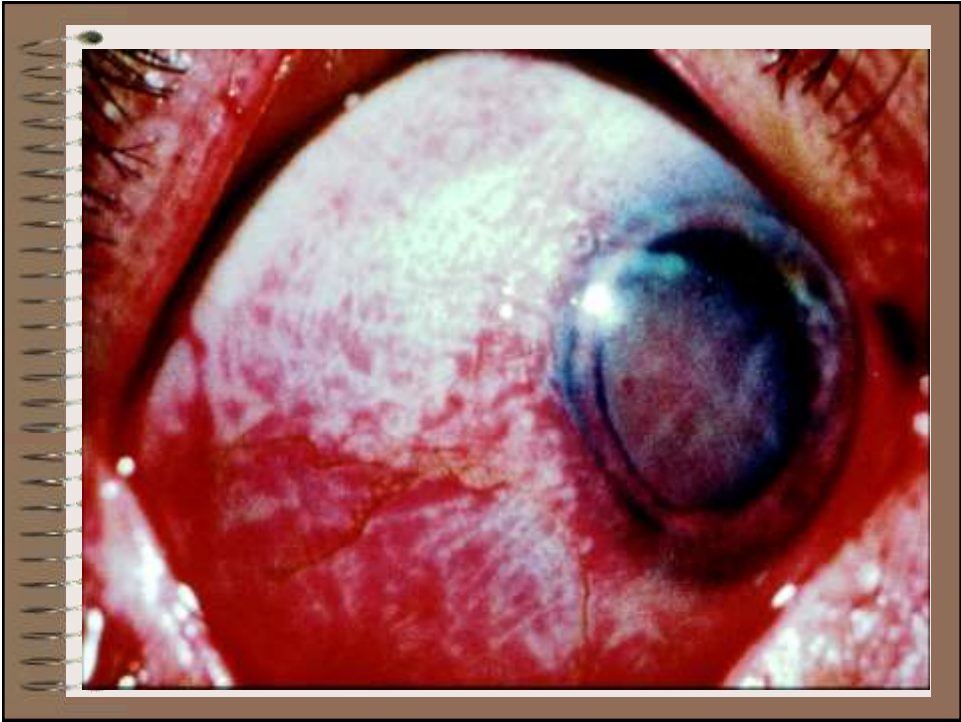


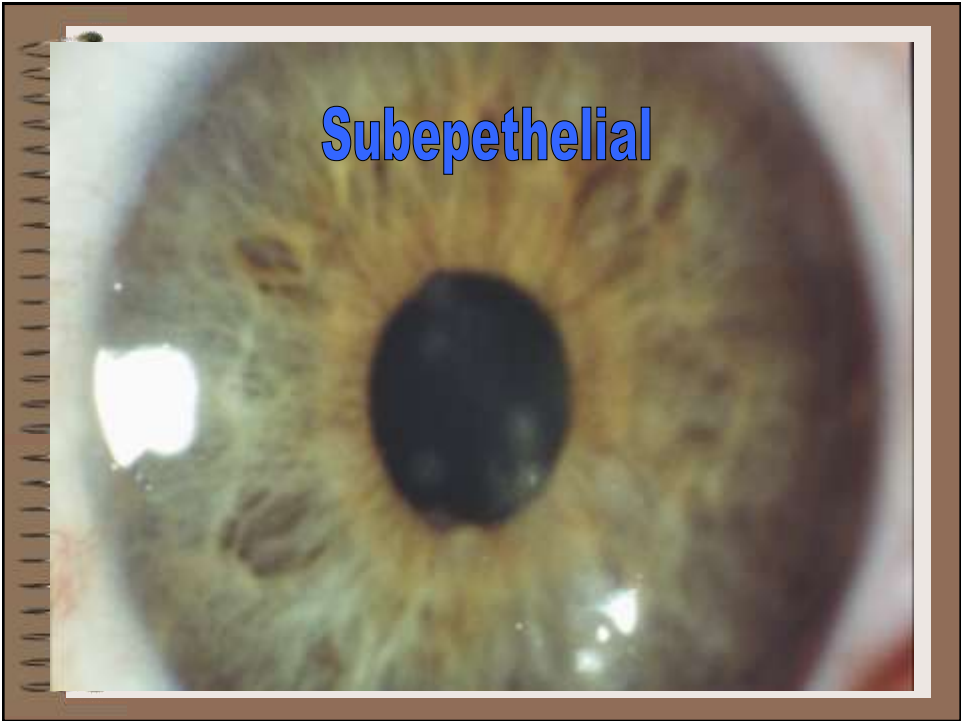
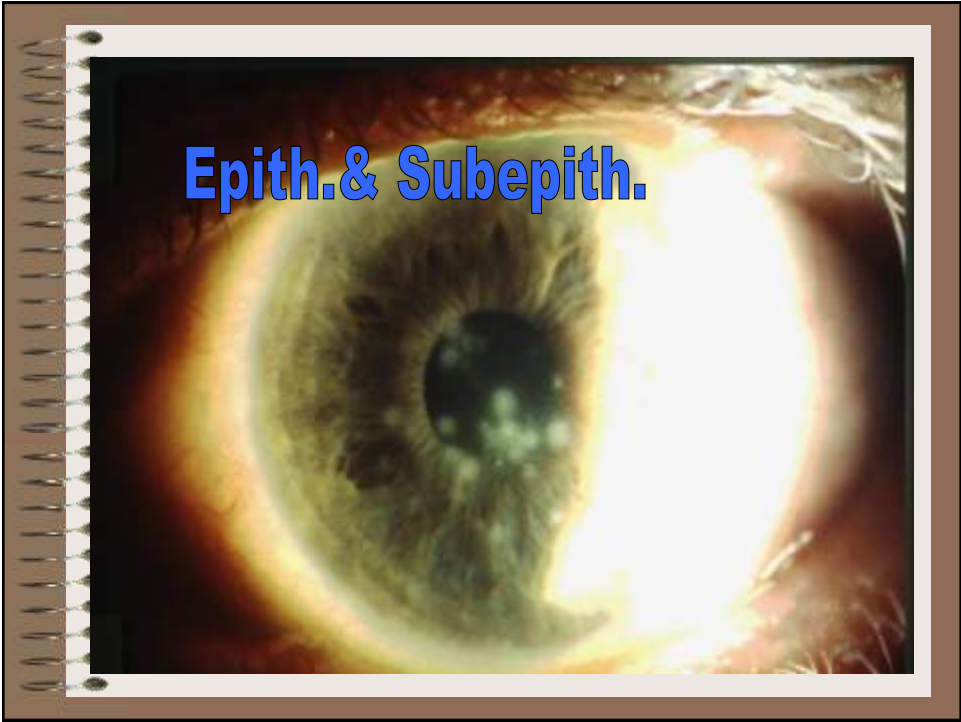














- **Treatment effect is judged by the border of infiltrates** *More Well*
→ *Defined.*

