Post-Traumatic Endophthalmitis

Develops in about $\%$ of penetrating trauma cases
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- Increased risk if:
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(IOFB = intraocular foreign body)
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  - Geography setting
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- 25% are due to **Bacillus cereus**

*In terms of its basic microbiological properties, how is B. cereus described?*
Post-Traumatic Endophthalmitis

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In terms of its basic microbiological properties, how is B. cereus described?
It is a G+ rod
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*In terms of its basic microbiological properties, how is B cereus described?*
It is a G+ rod

*Along with Clostridium species (another medically important genera of G+ rods), what unique property does B cereus possess?*
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In terms of its basic microbiological properties, how is *B. cereus* described?
It is a G+ rod

Along with *Clostridium* species (another medically important genera of G+ rods), what unique property does *B. cereus* possess?
It forms spores. (Don’t roll your eyes; this could be an important clue on an exam!)
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  - Rural setting
- 25% are due to *Bacillus cereus*

In terms of its basic microbiological properties, how is *B cereus* described?
It is a G+ rod.

Along with *Clostridium* species (another medically important genera of G+ rods), what unique property does *B cereus* possess?
It forms spores. (Don’t roll your eyes; this could be an important clue on an exam!)

You encountered *B cereus* in med school as a cause of what unpleasant-but-transient condition?
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Food poisoning
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*You encountered B cereus in med school as a cause of what unpleasant-but-transient condition?*
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*What is the classic food-poisoning scenario involving B cereus (ie, what dish)?*
A

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Along with *Clostridium* species (another medically important genera of G+ rods), what unique property does *B. cereus* possess?
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You encountered *B. cereus* in med school as a cause of what unpleasant-but-transient condition?
Food poisoning

What is the classic food-poisoning scenario involving *B. cereus* (ie, what dish)?
Re-warmed fried rice. The spores survive the initial cooking, then germinate in the cooked rice.
Post-Traumatic Endophthalmitis

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- Increased risk if:
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- 25% are due to *Bacillus cereus*
  - Especially likely if wound is contaminated with
Post-Traumatic Endophthalmitis

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- **25%** are due to *Bacillus cereus*
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- Increased risk if:
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- 25% are due to *Bacillus cereus*
  - Especially likely if wound is contaminated with soil
- *B. cereus* is **often vs rarely** a pathogen outside of trauma setting
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- 25% are due to *Bacillus cereus*
  - Especially likely if wound is contaminated with soil
  - *B. cereus* is rarely a pathogen outside of trauma setting
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- Rapid vs indolent and mild vs severe course; loss of the eye a frequent outcome
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- Treat: Intravitreal antibiotic or
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  - Treat: Intravitreal vancomycin or clindamycin
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  - Treat: Intravitreal *vancomycin* or *clindamycin*
- Some will be different bacteria type--treat with intravitreal antibiotic
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  - Treat: Intravitreal *vancomycin* or *clindamycin*
  - Some will be G- rods--treat with intravitreal *ceftaz*
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- Some will be G- rods--treat with intravitreal ceftaz
- Must consider fungal pathogens as well
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  - Treat: Intravitreal vancomycin or clindamycin
- Some will be G- rods--treat with intravitreal ceftazidime
- Must consider fungal pathogens as well