

MY TOP 5 TAKES

The Incidence of Ocular Complications in Candidemic Patients and Implications for the Practice of Routine Eye Exams

There is an ongoing debate on whether fundal examination should be done in candidemic patients without eye signs and sx.

But could a similar recommendation be made in patients receiving echinocandins as they have **poor** ocular penetration?

SINGLE-CENTER STUDY IN USA

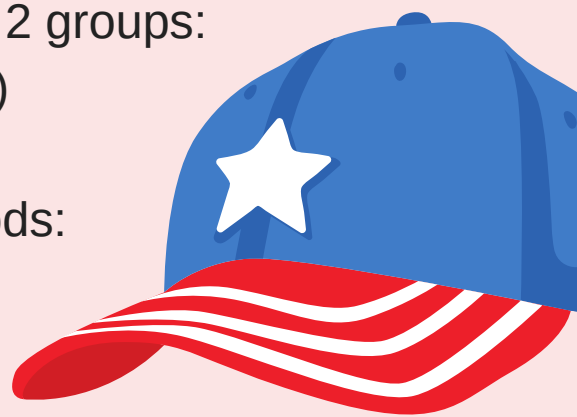
Patients with candidemia between 1/2014 and 6/2020 who underwent eye exams were recruited.

The antifungal therapies were divided into 2 groups:

- Eye-penetrating (azoles, amphotericin)
- Non-eye penetrating (echinocandins)

The patients were also divided into 2 periods:

- < 2016
- ≥ 2016



(NB: In 2016, IDSA recommended echinocandins as first-line therapy for candidemia).

N = 129 of 226 candidemia cases completed eye exams.

Increased incidence of ocular findings throughout the study period.

30 showed abnormal eye findings

- 11 cases received ocular penetrating agents vs.
- 19 cases did not receive ocular penetrating agents initially.

Of note, there were no major differences in demographics between the 2 periods above.



BEWARE!

Echinocandin use was significantly associated with ocular findings: **2.82** (OR); 1.07-7.42 (95%CI), $P = 0.036$

TAKE HOME MESSAGES

- Eye findings are common in patients with candidemia, and the incidence of eye findings is increasing
- The use of echinocandins may increase patient's risk for fungal eye disease.

