PURPOSE: To evaluate management of a case with endophthalmitis caused by Acinetobacter baumannii following uneventful cataract surgery.

METHOD: Case report. A 76-year-old man was seen two days after the onset of blurred vision, eye redness and pain. Symptoms had started three days after uncomplicated phacoemulsification surgery in the right eye. Our examination revealed a visual acuity of counting fingers at 20 cm in the right eye. Slit-lamp biomicroscopy of the eye showed 1-mm hypopyon, pupillary membrane, 4+ cells in anterior chamber. No fundus details were observed. On ocular ultrasonography, the retina appeared attached while moderate vitreous opacities were noted.

RESULTS: Acute postoperative endophthalmitis was diagnosed and the patient was treated with a prompt vitreous tap for culture and injection of vancomycin and ceftazidime intravitreally. Vitreous culture revealed the organism Acinetobacter baumannii. On the basis of the drug sensitivity of the organism, intravenous meropenem was added to the existing treatment. He underwent a 23 G pars plana vitrectomy because of persisting vitreous opacity at ten days after admission. He recovered a corrected visual acuity of 20/20 8 weeks postoperatively and had no recurrence of infection during a 1-year follow-up.

CONCLUSION: Acinetobacter are aerobic, gram-negative organisms and mainly responsible for nosocomial infections. There are few reports of postoperative endophthalmitis caused by Acinetobacter species. We are not aware of any reports of A. baumannii as a cause of acute postoperative endophthalmitis following phacoemulsification. In this case, timely performed vitrectomy with appropriate medication resulted in complete recovery.