

Abstract

BACKGROUND: Keratomycosis still represents a major problem in ophthalmology because of diagnostic and therapeutic difficulties. This is caused by difficult clinical differentiation and problems in microbiological analysis due to pretreatment and lack of sample material in early stages of the infection. **MATERIAL AND METHODS:** A 16-year-old female contact lens wearer suffered from a monocular central stromal opacification of the cornea. Analysis of the contact lens storage case liquid (CLCL) was based on investigation of the direct sample, Gram and Lactophenol staining and on specific cultures for aerobic bacteria, anaerobic bacteria and fungi. **RESULTS:** The patient suffered from a mycotic keratitis caused by *Acremonium kiliense*. First microbiological results were obtained from the CLCL subsequently confirmed from aqueous and from cornea tissue after keratoplasty. Continuation of the systemic Itraconazol therapy resulted in cure and improvement of the visual acuity. **CONCLUSION:** Success factors for diagnosis and therapy are early detection of the causative agent in the cornea and/or in the contact lens storage case as well as diagnosis related intensive drug therapy and eventually surgical intervention.