

What are the factors contributing to the occurrence of contact lens induced peripheral ulceration (CLPU): A study of its pathogenesis in a rabbit model

(Introduction)

CLPU is one of the major complications of contact lens wear with unknown aetiology, and occurs mostly in extended hydrogel contact lens wearers⁽¹⁾. It has been described as an acute, sudden onset corneal lesion characterized by circular full-thickness epithelial defect in the periphery or mid-periphery of the cornea, accompanied by moderate bulbar and limbal redness. Photophobia, tearing and minor pain are the main symptoms of CLPU. It mostly resolves upon removal of contact lens without the use of antibiotics, leaving behind a scar. Both S. aureus and S. epidermidis are frequently isolated from the eye of CLPU patients (although not necessarily from the ulcer itself), and hypersensitivity to staphylococcal antigens has been suggested to be responsible for the formation of CLPU.

Bacteriological studies have demonstrated that carriage of Gram positive bacteria, particularly *Staphylococci*, is associated with an increased risk of having CLPU. A case of CLPU, reported by Jalbert et al, with regular microbiological monitoring of 6 years demonstrated a direct relation of S. aureus with CLPU, as S. aureus, found in large amount in this patient, had never been isolated prior to the CLPU event.⁽²⁾. A previous study of the bacterial strains isolated from contact lens wearing subjects showed that S. aureus more frequently produced an array of potentially pathogenic toxins and enzymes than S. epidermidis.⁽³⁾ These indicate S. aureus is more likely to cause CLPU. The aim of this experiment is to investigate whether antigens from dead cells of *S. aureus*, or its secretory products were responsible for CLPU, or whether live bacteria and corneal surface trauma were necessary to cause CLPU.

Materials & Methods

Can immunized rabbit model (S. aureus 031) induce CLPU?

Bacterial antigens: phenol-inactivated S. aureus suspension (1 x 10¹⁶ cells/ml) and *S. aureus* supernatant

Immunization of rabbits: with the phenol-inactivated S. aureus suspension

Contact lens wear: 2 - 4 weeks

Challenged agents: Bacterial antigens and live bacterial cells (see table 1)

Examination: slit-lamp

Does extended wear of contact lens induce CLPU?

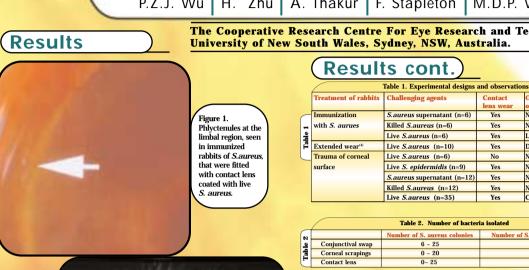
Duration of contact lens wear: 7 weeks Bacterium: S. aureus (031) **Examination:** slit-lamp

Is corneal epithelial trauma necessary for **CLPU?**

Agents (see table 1): live S. aureus (031), live S. epidermidis (019) and bacterial antigens (as above) Contact lens coating: with bacterial cell suspension OD₆₆₀

20 Epithelial trauma: 1-2mm scratch at corneal periphery

Examination: slit-lamp examination, histology



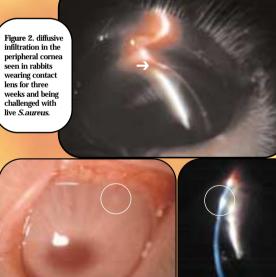
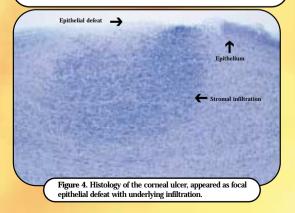


Figure 3. A rabbit CLPU, seen in rabbits fitted with live S. aureus coated An artificial epithelium defeat was made prior to fitting of the lens.



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	Treatment of rabbits	Challenging agents	Contact lens wear	Ob on	
-	Immunization	S.aureus supernatant (n=6)	Yes	No	
-	with S. aurues	Killed S.aureus (n=6)	Yes	No	
Table		Live S.aureus (n=6)	Yes	Lin	
E E	Extended wear ⁽⁴⁾	Live S.aureus (n=10)	Yes	Dif	
L	Trauma of corneal	Live S.aureus (n=6)	No	No	
	surface	Live S. epidermidis (n=9)	Yes	No	
		S.aureus supernatant (n=12)	Yes	No	
		Killed S.aureus (n=12)	Yes	No	
		Live S.aureus (n=35)	Yes	CL	
	Table 2. Number of bacteria isolated				
6	(N 1 60 1 1			

Table 1 Experimental designs and obse

Results cont.

		Number of S. aureus colonies	Number of S. e
	Conjunctival swap	6 ~ 25	0
	Corneal scrapings	0 ~ 20	N
	Contact lens	0~ 25	2

In an immunized rabbit model of *S. aureus* (031) Phlyctenules were observed in the immunized rabb with live S. aureus cells (4/6), (see figure 1). No obvious reactions occurred in the rabbits challen S. aureus antigens. No CLPU-like lesion formed.

In an extended contact lens wear model:⁽⁴⁾ Extended wear caused diffusive non-ulcerative kerati figure 2). No CLPU-like lesion formed.

A rabbit CLPU model with corneal epithelial trau 18/35 rabbits challenged with live *S* aureus show (CLPU-like lesions) in the peripheral cornea in 24 h (s 2/35 rabbits challenged with live S aureus showed for in the peripheral cornea in 24 hours. No corneal lesions were observed in rabbits challenged with live

S. epidermidis or S. aureus antigen preparations. These corneal lesions were accompanied with mild to moderate inflammatory reactions, and healed quickly upon removal of contact lens without the need of antibiotics.

(Discussion)

Immunization with *S. aureus* probably stimulated an autoimmune reaction as made evident by phlyctenules. Pre-sensitization with S. aureus, however, was not required for the formation of CLPU. Contact lens induced peripheral ulceration may be induced by the colonization of S. aureus on the ocular surface as well as on contact lens, but only in the presence of traumatic change in corneal surface. However, only small number of bacteria were recovered from the ulcers (table2). The contact lens induced ulceration in this rabbit model presented with mild to moderate inflammatory reaction and healed upon discontinuation of CLW with scar formation, mimicking the CLPU in human.

Conclusions

A corneal epithelial defect and S. aureus are crucial factors in the formation of contact lens induced peripheral ulceration (CLPU).

References

1. Grant T, et al, CLAO J 1998, 1;24(3):145-151 Jalbert I, et al. Cornea. 2000, 19:116-120
Wu PZJ, et al. Aust. NZ J. Ophthalmol 1999, 27:234-236 4. Wu PZJ, et al, Aust. NZ J. Ophthalmol, in press

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tis (6/10), (see na: ved ulceration ee figure 3).	

