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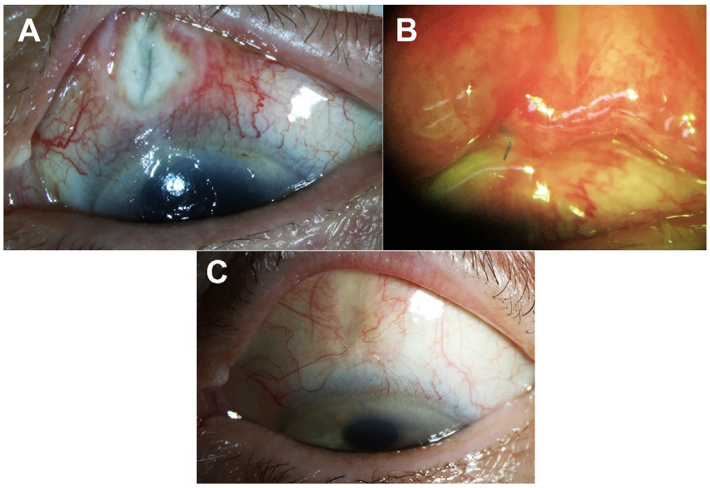
Pictures & Perspectives



Necrotizing Scleritis Secondary to Exposed Polypropylene Suture

An 87-year-old woman was referred for presumed left eye scleritis that had been unresponsive to 1 week of high-dose oral prednisone. Evaluations for systemic autoimmune causes were negative. Superior scleral necrosis with surrounding erythema was noted (**A**). Upper eyelid eversion disclosed a polypropylene suture protruding from the palpebral conjunctiva (**B**). On further questioning, the patient stated that she had undergone ptosis repair 1 year prior. The suture was removed and was positive for *Staphylococcus lugdunensis* on culture. She was treated with moxifloxacin 0.5% eyedrops for 2 weeks. Six weeks after presentation, the scleral necrosis had resolved (**C**) (Magnified version of Figure **A**-**C** is available online at www.aaojournal.org).

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