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## Microsporidial Keratoconjunctivitis Caused by *Vittaforma corneae*, Sea of Galilee, Israel, 2022–2024

## Appendix

Appendix Table. Demographic and clinical characteristics of patients in the cohort

		•	Time from exposure to	Visual acuity on	Visual acuity at		Primary	Adjunct	Follow-
Patient	Sex	Age, vears	symptoms, davs	(decimal)	last visit (decimal)	Immune status	l opical Agent	Therapy	up (weeks)
1	Male	51	14	0.2	0.5	Immunocompetent	Chlorhexidine	NA	48*
2	Male	18.3	10.5	0.3	0.66	Immunocompetent	Chlorhexidine	NA	1
3	Female	12.2	18	0.3	1	Immunocompetent	Chlorhexidine	Steroids	2
4	Male	18	13	1	1	Immunocompetent	Chlorhexidine	Steroids	6
5	Female	12.6	14	0.8	1	Immunocompetent	Chlorhexidine	NA	16
6	Male	9.1	16	0.8	NA†	Immunocompetent	Chlorhexidine	NA	NA†
7	Male	71	12.5	0.4	0.5	Untreated, stable sarcoidosis	Chlorhexidine	Moxifloxacin	3
8	Female	15.1	10	1	1	Immunocompetent	Chlorhexidine	NA	12
9	Male	15.5	16	1	1	Immunocompetent	Chlorhexidine	Voriconazole + Steroids	12
10	Female	10	14	1	1	Immunocompetent	Chlorhexidine	NA	4
11	Male	6	12	1	1	Immunocompetent	Chlorhexidine	NA	4
12	Female	36	15	0.3	1	Immunocompetent	Chlorhexidine	Moxifloxacin	4
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All patients presented with varying degrees of typical symptoms, including redness, tearing, irritation, and foreign body sensation. \*The prolonged follow-up of Patient 1 in the ophthalmology clinic was due to unrelated retinal issues. +Lost to follow-up.