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Iatrogenic Endophthalmitis mimicking Masquerade Syndrome Carvalho Junior ES, Lucci, L.M., Oliveira. AHP, Farias CC, Martins MC, Finamor LP, Dimantas MA, Matos KTF, Muccioli C The Masquerade Syndromes comprise a group of noninflammatory entities that can mimic uveitis. Neoplastic and nonneoplastic entities can be in the differential diagnosis of intraocular inflammation. Purpose: To present a case of iatrogenic endophthalmitis mimicking a masquerade syndrome. Methods: Case presentation. A 47 years old, white male, experienced subtle ocular pain and decrease of visual acuity in the right eye 2 months previous to his first ocular examination at the ophthalmology Emergency Room, where he was evaluated for ocular and systemic diseases. He related having undergone a testicular cyst extraction (sic) 20 days prior to the beginning of the ocular symptoms, and denied any kind of ocular trauma. During the first ocular examination visual acuity in the right eye was no light perception. The patient presented with proptosis and the slit lamp evaluation disclosed conjunctival hyperemia 4+, non-granulomatous keratic precipitates, shallow anterior chamber, 2+ cells, posterior synechiae 360° and total cataract with swollen lens. Due to the media opacities the fundoscopic examination was impossible. Clinical evaluation showed no rheumatologic disease, syphilis, tuberculosis and toxoplasmosis. Ultrasonography and computerized tomography showed a thickened ocular wall. It was decided to enucleate the eye for pathologic study which showed non-granulomatous suppurative panophthalmitis. Conclusion: Patients with uveitis of uncertain etiology must be closely examined for the possibility of masquerade syndrome.