**Objectives**:Ocular candidiasis (OC) is a notorious complication of candidemia. Guidelines differ on their recommendation regarding screening fundoscopy for OC in patients with candidemia in order to detect OC before it becomes symptomatic. This study aimed to determine the frequency of OC when fundoscopy was performed regardless of visual symptoms, and to assess its impact on antifungal treatment selection and duration.

**Materials & Methods:**We conducted a retrospective cohort study at two tertiary care hospitals in the Netherlands, including adult patients with ≥1 positive blood culture for any *Candida* species between January 2018 and December 2023. Primary outcomes were the incidence of OC, persistent vision loss, and changes in antifungal therapy. OC was defined as proven or probable chorioretinitis (lesions confined to the choroid or retina) or endophthalmitis (lesions involving the vitreous humor). Secondary outcomes included the rate of ophthalmology consultations and 90-day mortality.

**Results**:
296 evaluable patients were included of whom 217 (73.3%) underwent fundoscopy. In most cases where fundoscopy was not performed, early death or receipt of palliative care were the primary reasons (63/79, 79.7%). Probable OC was identified in 12 of 217 patients (5.5%), including two cases of probable endophthalmitis (0.9%). Six of the twelve patients with probable OC had visual symptoms (50.0%); five patients were asymptomatic and one patient was not able to disclose symptoms. Overall, probable OC was diagnosed in 7 of 22 patients with visual symptoms at the time of fundoscopy (31.8%), in 5 of 133 patients without visual symptoms (3.8%) and in none of 63 patients who were either unable to report symptoms or for whom the presence or absence of visual symptoms was not documented in the electronic patient file. The diagnosis prompted a change in antifungal therapy selection and/or duration in all 12 patients with probable OC. The change consisted of intravitreous injections with voriconazole in one patient with endophthalmitis and in one patient with chorioretinitis, the addition or switch to an azole in 7 patients and a longer treatment duration in 11 patients. Three of the 12 patients with probable OC developed permanent visual impairment of any degree, the visual outcome of one patient was unknown. The overall 90-day mortality was 43.2%.

**Conclusions**:
While fundoscopy was performed in the majority of candidemia patients, OC was relatively uncommon, and vitreous humor involvement was observed in only 2 (0.9%) with both of these patients reporting visual symptoms at time of ophthalmologic evaluation.