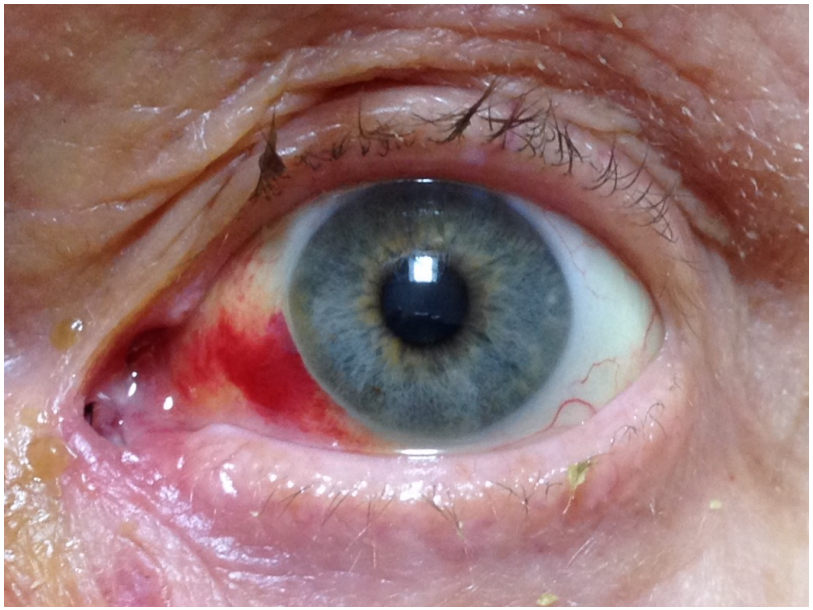
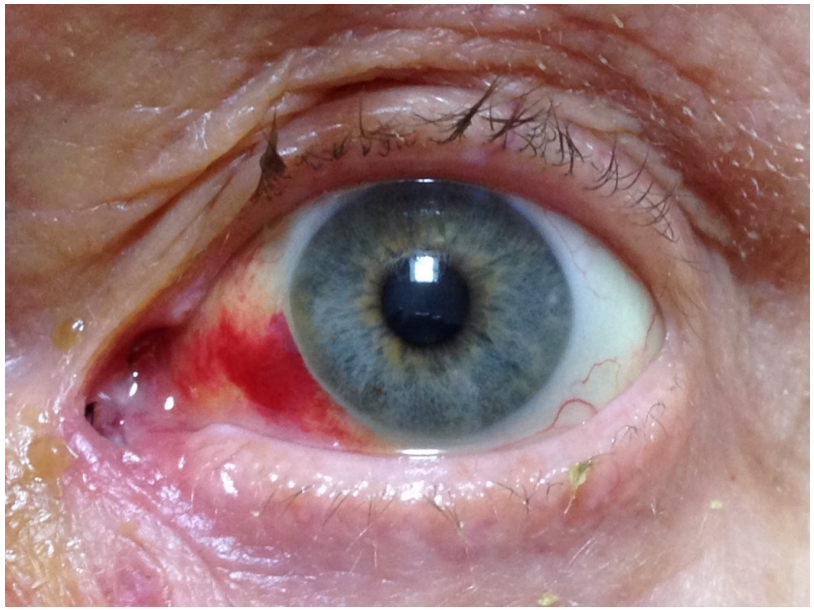
EYE complaints 2

DR ADHAM KHALEK



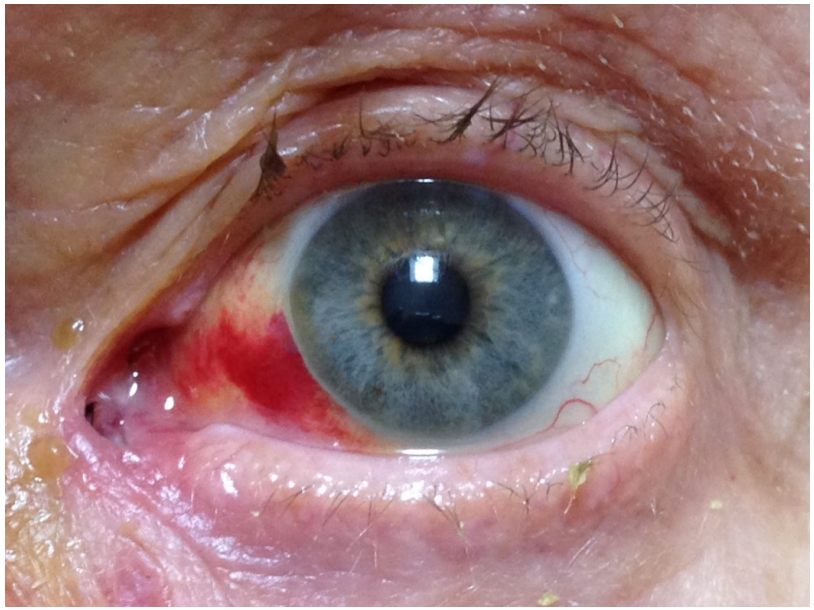
- 52 year old
- Htn
- Aspirin & ramipril
- No hx trauma
- Painless
- Va 6/6 with glasses

Subconjunctival haemorrhage

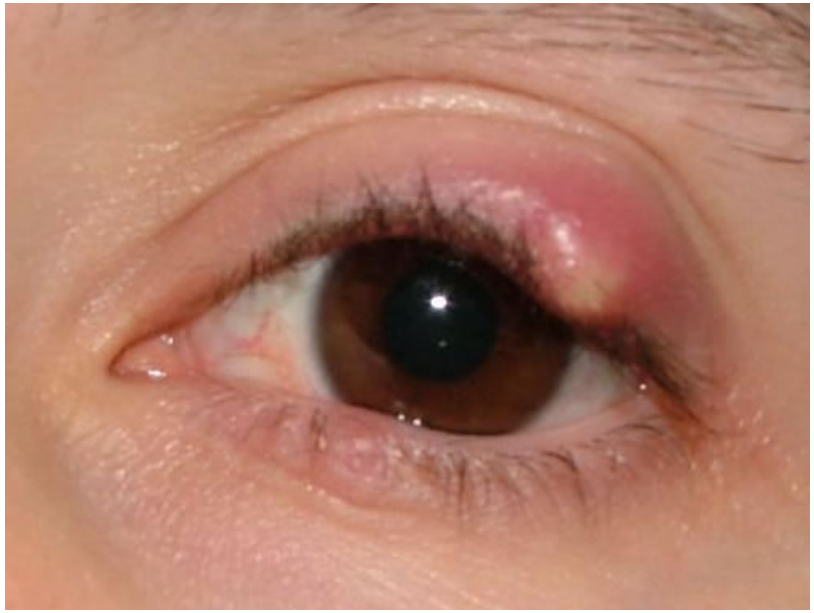


- Traumatic, spontaneous or related to systemic illness
- Asymptomatic
- Deep red
- Sudden onset
- Normal va

Subconjunctival haemorrhage

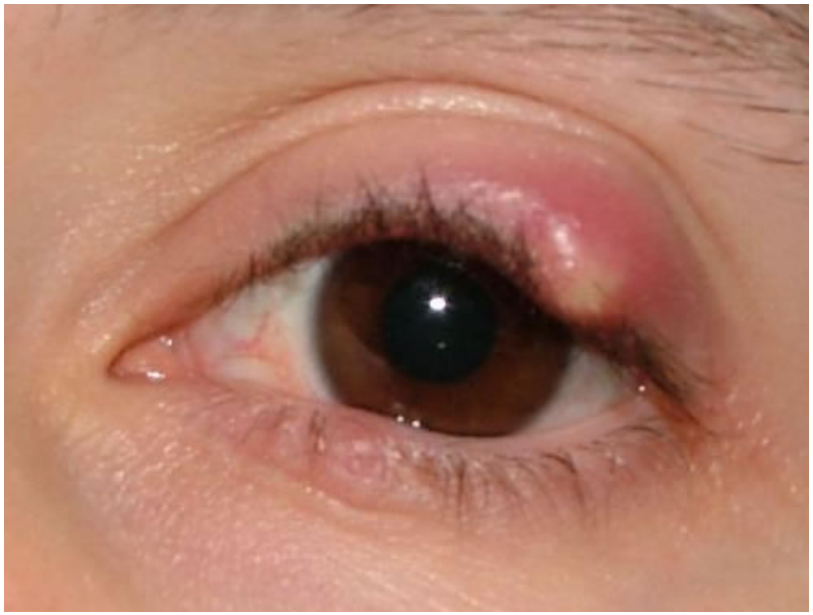


- If spontaneous check bp
- Reassure
- Resolve in 2 weeks



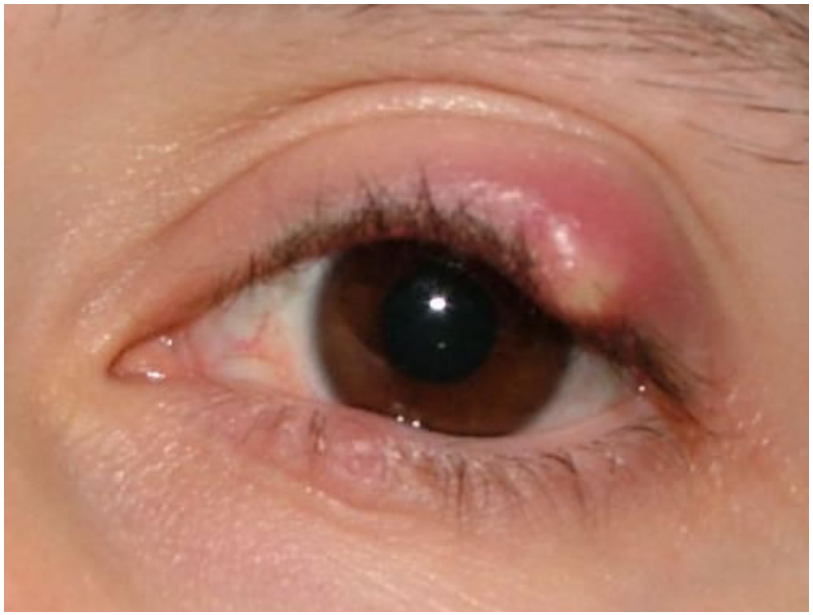
- 32 year old
- No pmh or drug hx
- Visiting from italy
- Lump appeared over 3 days
- Painful, tender lump
- Normal va

Stye / hordeola

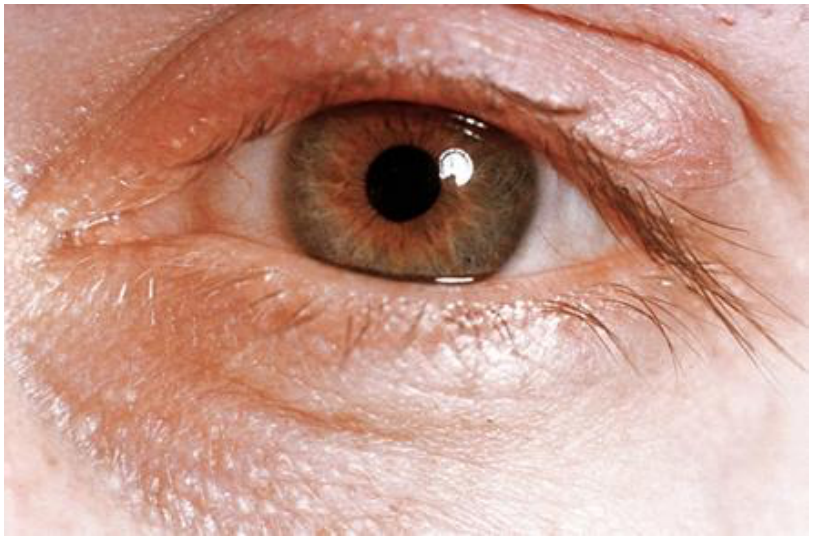


- Acute, localised abscess on eyelid
- Painful, localised tender swelling over a few days
- Usually single eye
- Maybe >1
- Va unaffected
- External – follicle
- Internal - meibomian

Stye / hordeola

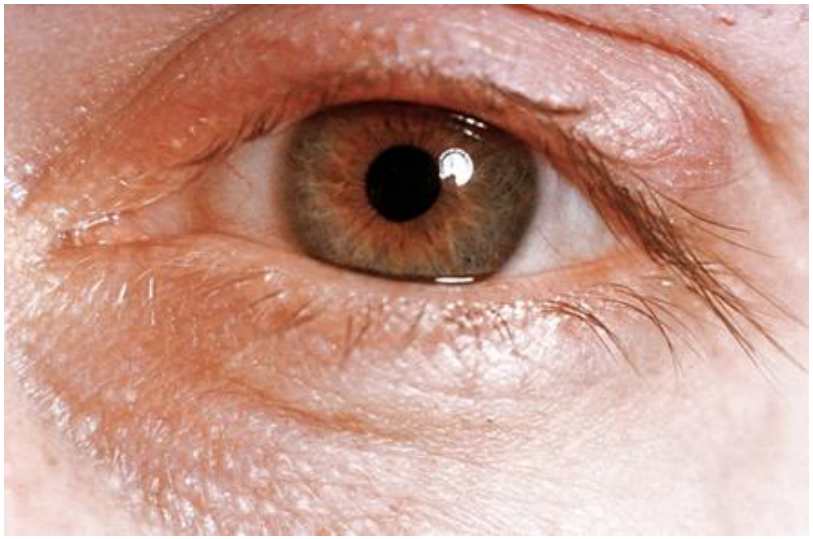


- Initial mx same
- Epilate eyelash
- No topical abx (unless also have conjunctivitis)
- Warm compresses 5-10mins qds
- Simple analgesia
- Lid hygeine



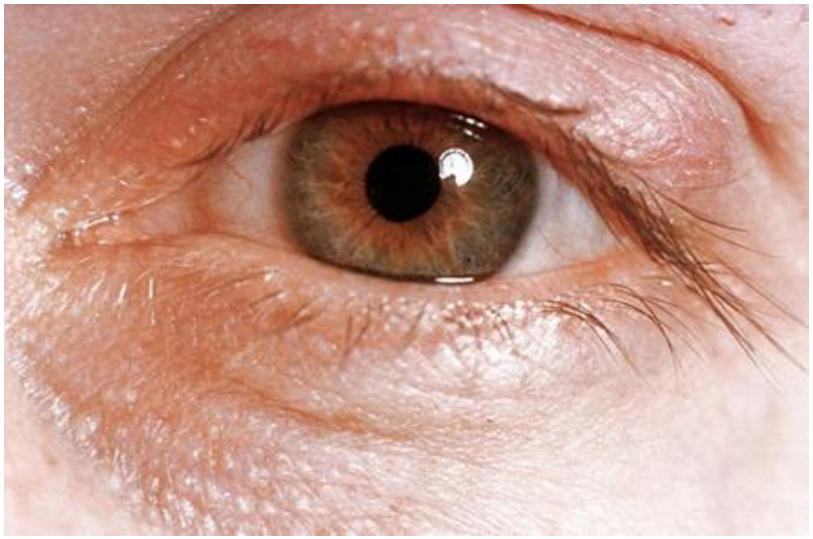
- 62 year old
- Lump in eyelid for weeks
- Painless
- No change in vision

Chalazion / meiobian cyst



- Sterile chronic granuloma
- Spont or from stye
- Hard, painless, palpable
- 2-8mm in diameter
- Develop over weeks
- More common in upper eyelid
- Normal va
- lump on eyelid eversion

Chalazion / meiobian cyst



- 25-50% resolve spontaneously
- Last 6-12 weeks
- Warm compresses 15-30mins bd & massage eyelid

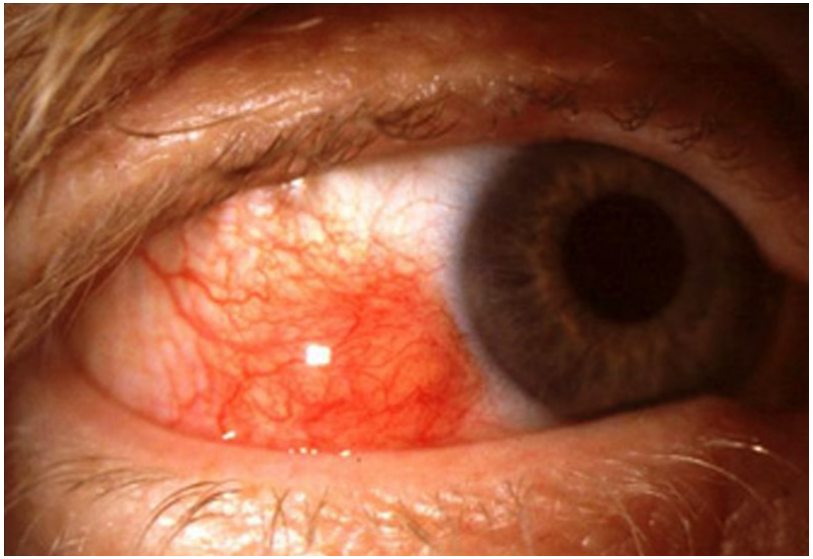
- 31 year old
- Itchy eyes
- Always stuck together in the morning
- Normal va

blepharitis

- Inflammation of eyelid margins
- Eyelids red, burn, itch, stick
- Normal va
- Both eyes may be affected
- Symptoms intermittent with exacerbations & remissions
- Anterior – bases of eyelashes inflammed
- Posterior – meibomium glands inflammed

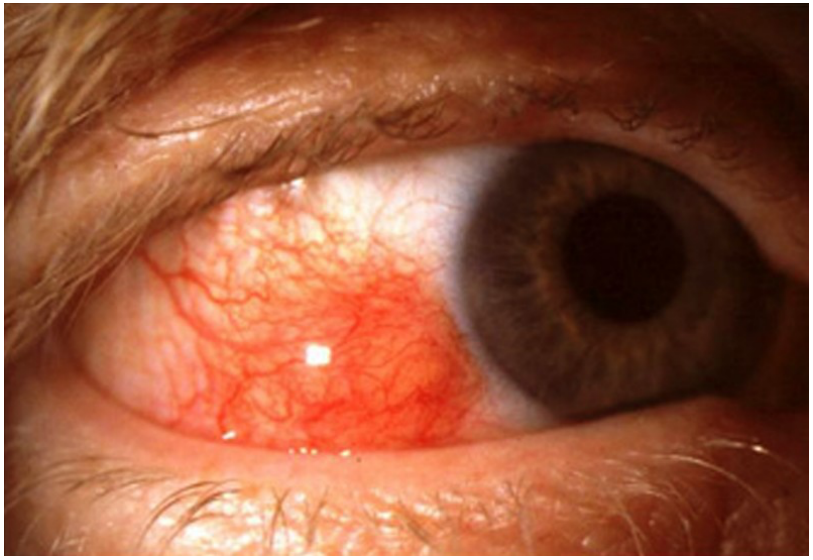
blepharitis

- Warm compresses
- Eyelid hygeine
- Avoid makeup
- Second line topical abx 6/52
- If staph infection use abx first line



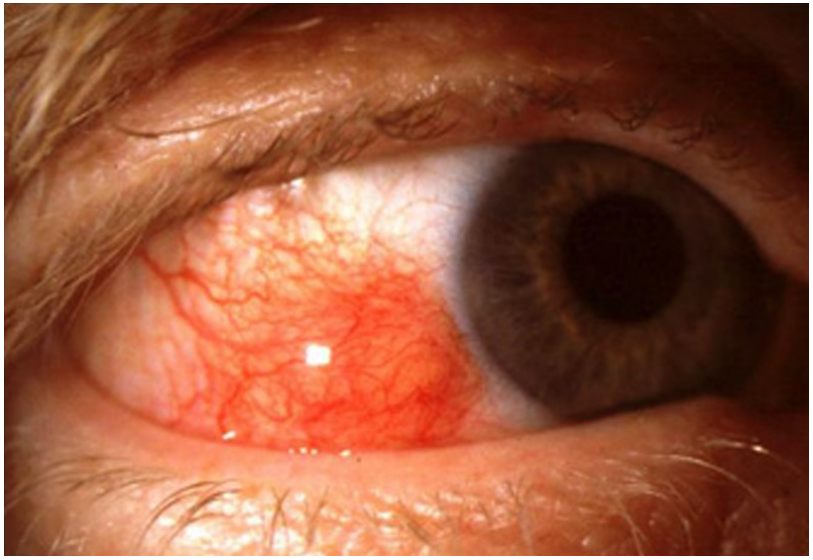
- 43 year old
- Hx of sle
- Moderate discomfort to eye
- Mild light sensitivity
- Occaisional waters
- Normal va

Episcleritis

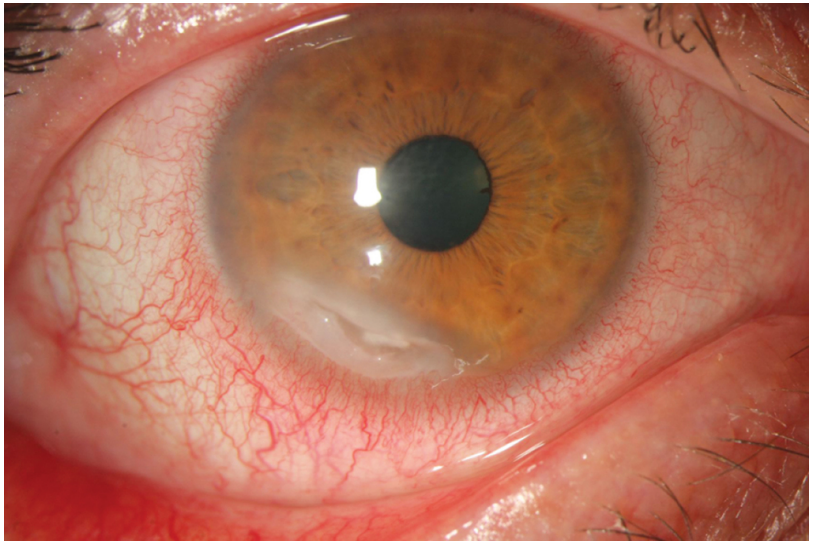


- Inflammatory condition affecting episcleral tissue
- Most idiopathic but 1/3 may have underlying condition
- 70% diffuse, 30% nodular
- Last 7-10 days, most resolve by 2-3 weeks
- Mild to moderate discomfort, may be painless
- Watery discharge
- photophobia

Episcleritis

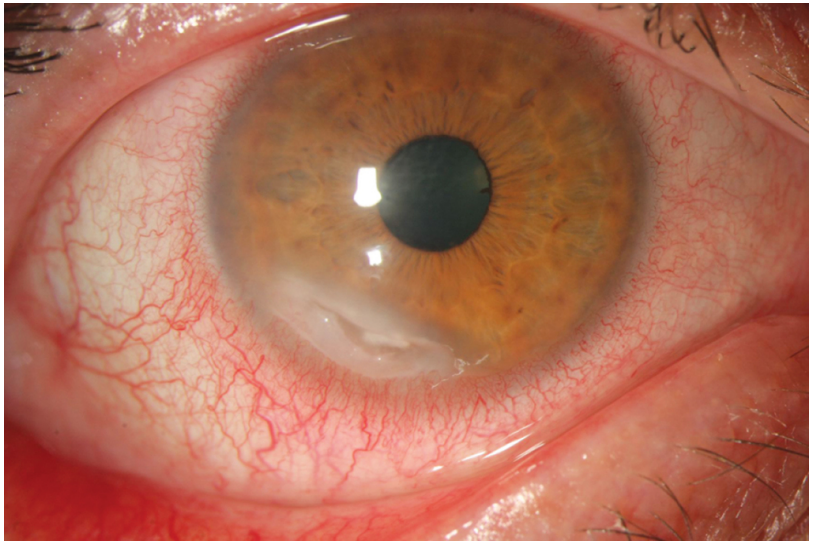


- Self-limiting condition
- Artificial tears
- Severe/prolonged may need steroids
- Sunglasses if light sensitive



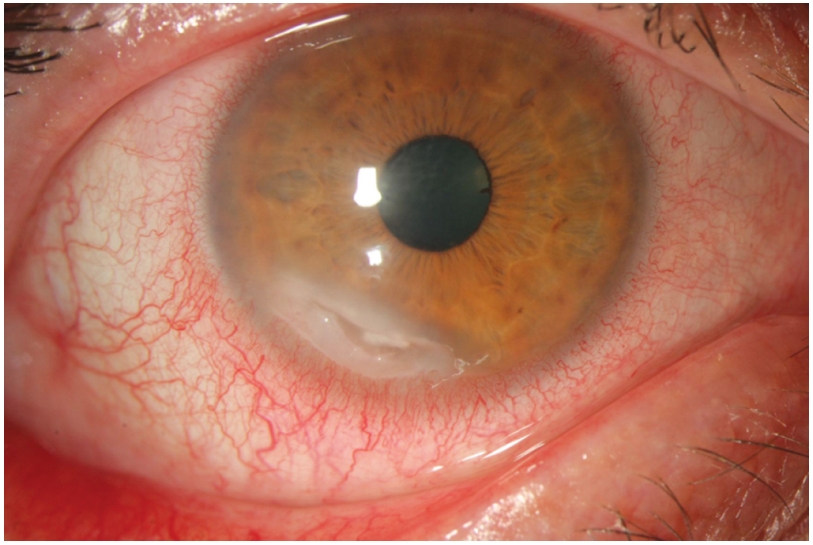
- Painful eye
- Feels may have fb
- Photophobic
- Everything blurry
- Va 6/18 in affected eye (6/6 in other eye)

Ulcerative keratitis



- Blurred vision, decreased va
- Light sensitive
- Fb sensation
- Erythema of eyelid & conjunctiva
- Discharge
- Pupillary constriction secondary to ciliary spasm
- Ulceration
- hypopyon

Ulcerative keratitis



- Broad spectrum abx
- Cycloplegic drops
- Emergency referral

- 19 year old student
- Contact lens wearer
- Red, itchy eye with some discharge
- Normal va with PinHole correction

conjunctivitis

- Sticky eyes
- Normal va
- Normal cornea
- Irritant vs allergic vs infective

conjunctivitis

- Avoid contact lenses
- Otc eye lubricant
- Eye hygeine
- Wash hands
- Rarely requires treatment
- Will clear within 1-2 weeks
- If >2 weeks then topical abx until clear of symptoms for 48 hrs

conjunctivitis

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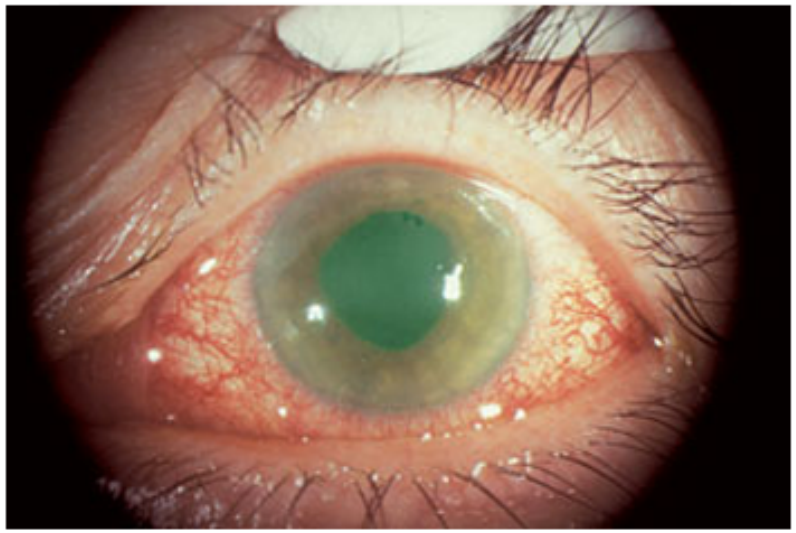
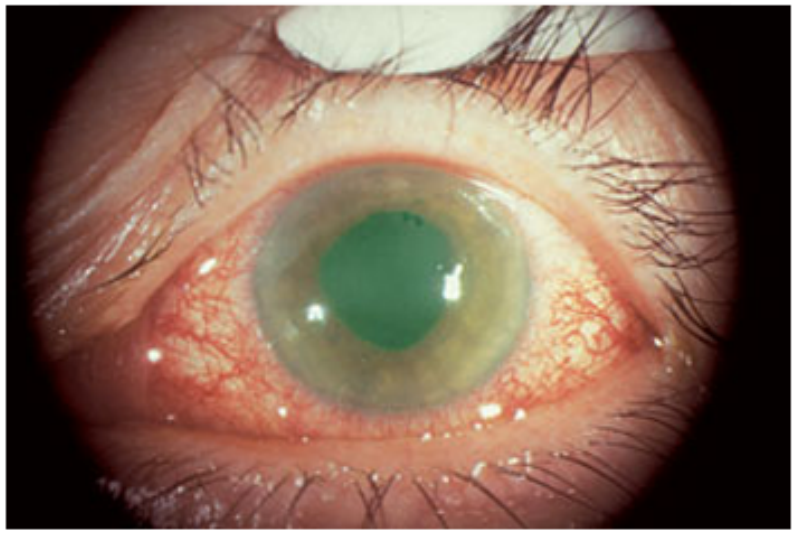


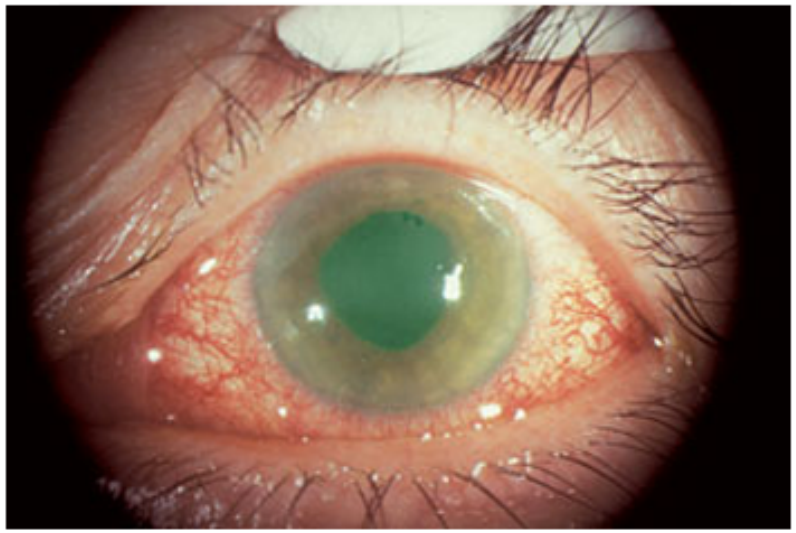
- 22 year old
- Unwell – taken otc flu medication
- Worst ever headache
- Vomiting and abdominal Pain
- Decreased va

Acute closed angle glaucoma



- Intense pain
- Red eye
- Headache
- Halos around lights
- Misty vision, decreased va
- Vomiting
- Fixed mid dilated pupil
- Increased iop (>21mmhg)

Acute closed angle glaucoma



- Iv acetazolamide 5oomg iv then 500mg po
- Analgesia & anti-emetics
- Pilocarpine 1-2% drops qds
- Urgent ophthalmology ref.