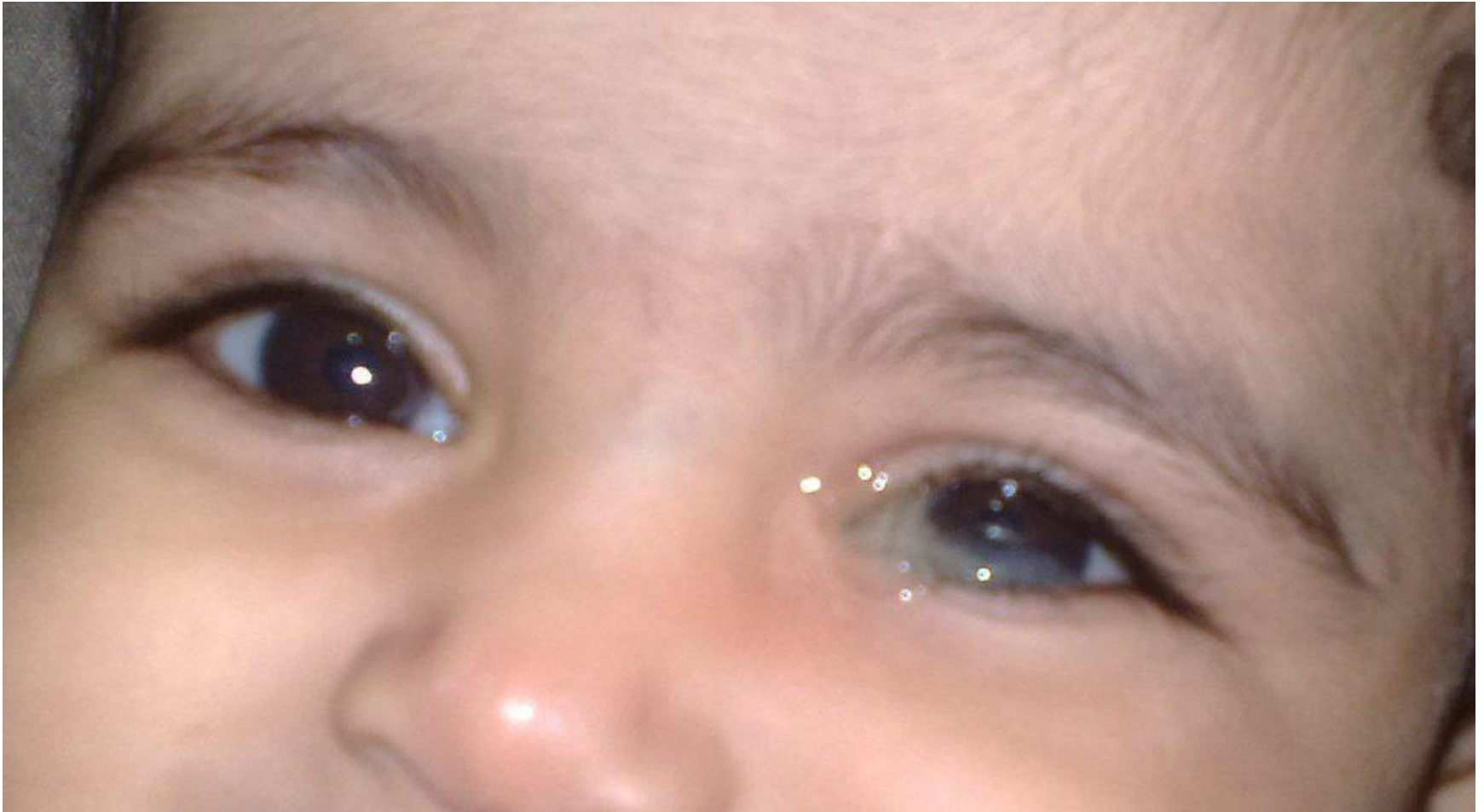


Paediatric Conjunctivitis

- Shivanand Sheth

Unilateral pussy discharge in a white eye



Unilateral pussy discharge in a white eye

- Dacryocystitis or Mucocoele
- Due to Congenital Nasolacrimal Duct Obstruction (CNLDO)
- Unlikely to be conjunctivitis
- No need of antibiotics or any eye drops
- Can sometimes be bilateral



Plan: Swab and refer to ophthalmologist

Needs nasolacrimal duct probing if does not spontaneously resolve

Bilateral pussy discharge with pink/red eyes



Bilateral pussy discharge with pink/red eyes

- Typically simultaneous onset or one eye follows other eye shortly, but can be unilateral
- Acute conjunctivitis
- **Plan: Start Chlorsig eye drops qid** (antibiotic)
- Expect to get better in 2-3 days
- If no improvement or gets worse – **Refer!**

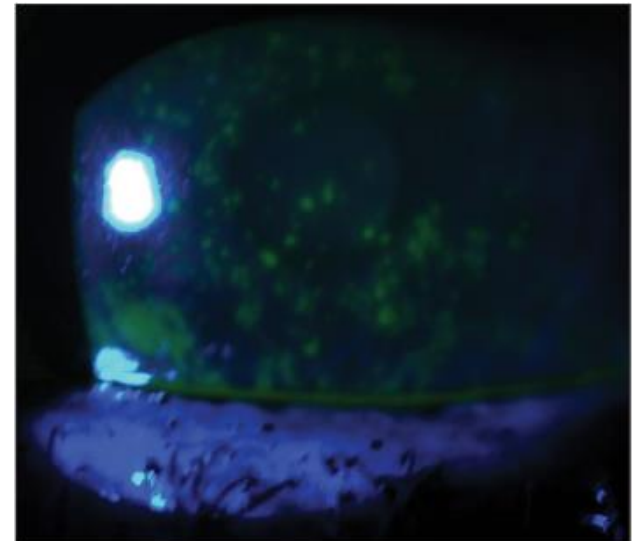


Epidemic Keratoconjunctivitis (EKC)



Epidemic Keratoconjunctivitis (EKC)

- Mostly viral in origin (adenovirus most common)
- Very red
- Very swollen
- Can be unilateral or bilateral
- Mucous discharge
- Highly contagious
- Cornea is near perfect – (but some may develop punctate erosions later on)
- If cornea affected → **Refer to consultant**



Epidemic Keratoconjunctivitis (EKC)

- Can linger for weeks (1 to 6 weeks)
- Treatment symptomatic mainly:
 - No treatment or lubricants
 - Cold compresses for relief
 - NSAIDS orally if discomfort/pain (Panadol)
 - Mild steroid eye drops (Flarex or FML tds) if cornea shows punctate erosions
 - **Refer if not better in 3 days**

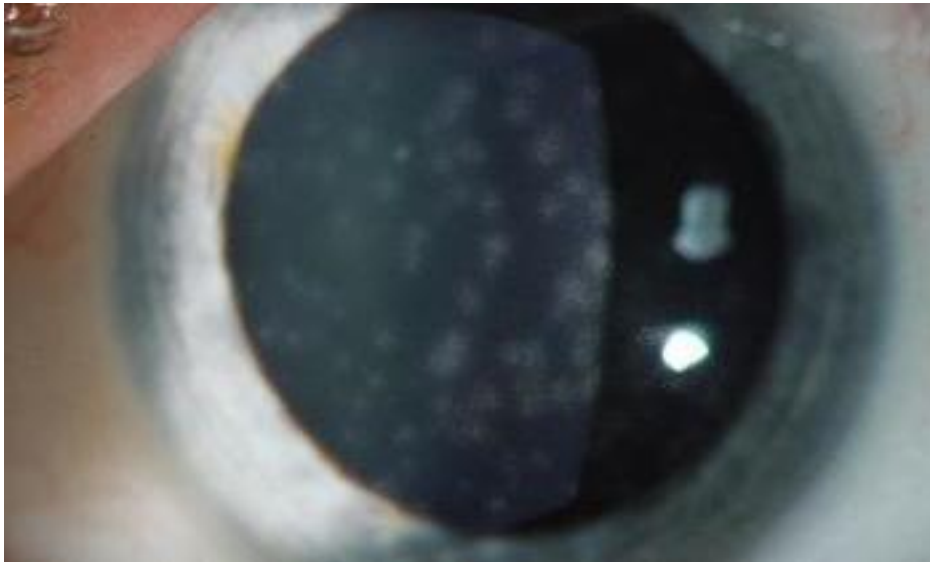
Epidemic Keratoconjunctivitis (EKC)

Most important:

- Isolate patient. Highly contagious.
- In-office infection control after seeing patient.
- Clean slit-lamp and other ophthal equipment in contact with patient
- Can easily transmit to other patients if not careful
- Also commonest conjunctivitis amongst eye care personnel

Epidemic Keratoconjunctivitis (EKC)

- When conjunctivitis starts getting better cornea may show subepithelial infiltrates.
- These can cause blurry vision.
- **Plan: Refer**

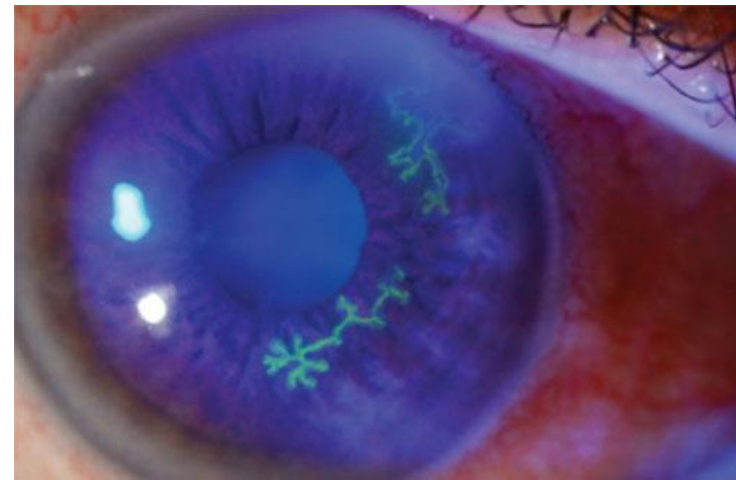


Herpes simplex conjunctivitis (HSV)



Herpes simplex conjunctivitis (HSV)

- Can be associated with vesicles and cold sores around eyes and lips (but not always)
- In Kids and atopes can be bilateral
- May require treatment with Zovirax oral tablets and/or Zovirax eye ointment 5 times a day
- Cornea may show dendrites
- If corneal involvement – **Refer!**
- Herpes infections are susceptible to have bacterial super-infections and can worsen quickly
- Decreased corneal sensations



Allergic conjunctivitis/Vernal conjunctivitis



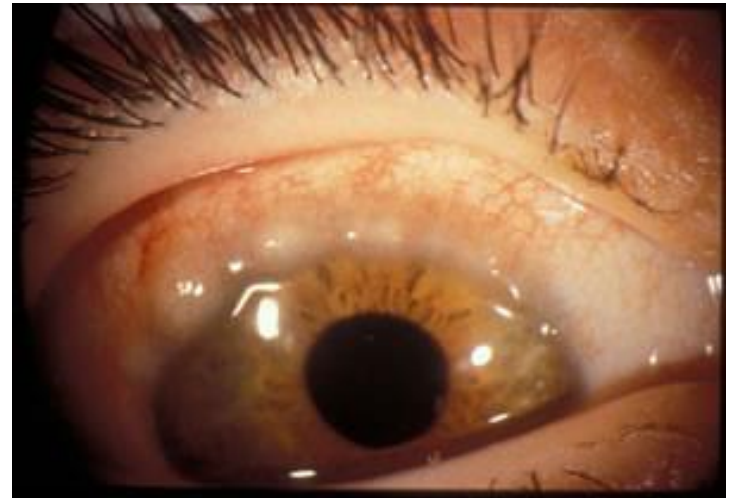
Allergic Conjunctivitis/Vernal conjunctivitis

- Always associated with itching
- Can have eyelid puffiness/allergic shiners
- Photophobia, watering
- Conjunctiva may appear puffy/boggy
- Not much discharge
- Papillae seen on upper tarsal conjunctiva



Allergic Conjunctivitis/Vernal conjunctivitis

- Treatment:
 - Cold Compresses
 - Oral antihistamines (Claratyne)
- For mild allergic conjunctivitis:
 - Anti-histaminic eye drops:
 - Zaditen (Ketotifen) bd
OR
 - Patanol (Olopatadine) bd
OR
 - Livostin (Levocabastine) bd
- For moderate allergic conjunctivitis:
 - Mild steroid eye drops (Flarex or FML tds)
- For severe allergic conjunctivitis with limbal follicles, corneal involvement or non responding to treatment – Refer!



Neonatal Conjunctivitis

- Can be bacterial, chlamydial, viral, chemical



Neonatal Conjunctivitis

- Occurs within first 28 days of life
- Can rapidly progress – can cause scarring, corneal ulcers and blindness
- Needs urgent treatment by specialist – Urgent referral to a consultant ophthalmologist

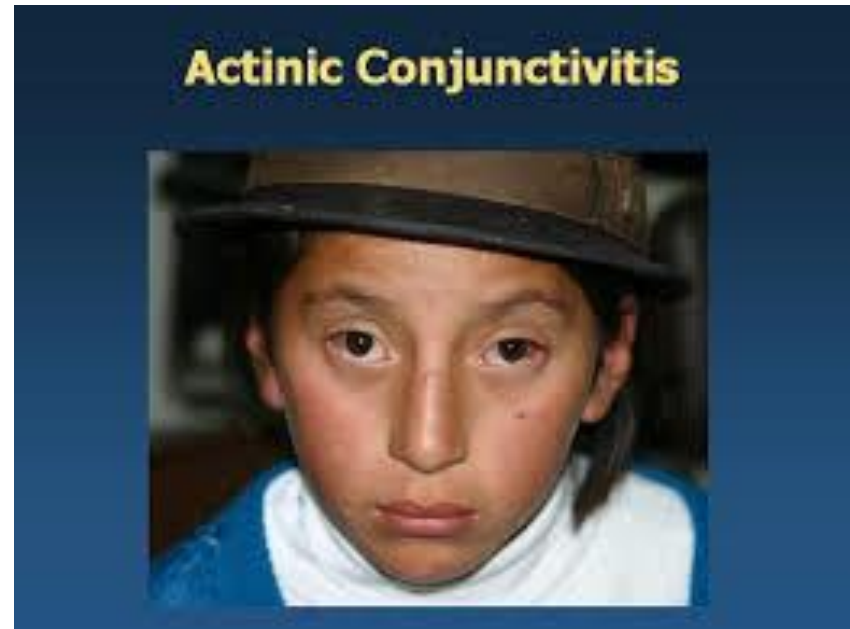
Miscellaneous conjunctivitis

- Christmas Eye disease
 - Unknown cause – some thoughts that it may be due to toxin released by insects in the eye during sleep
 - Occurs during November- January
 - Painful, acute condition
 - Self resolving
 - Needs symptomatic treatment with Lubricants, Chlorsig and NSAIDS for comfort



Miscellaneous conjunctivitis

- Actinic Conjunctivitis:
 - Ocular Photosensitivity reaction to UV rays
 - Symptomatic treatment with lubricants and avoiding sun exposure
 - May require surgery if Conjunctiva develops keratinization and lumps



Miscellaneous conjunctivitis

- Ligneous Conjunctivitis:
 - **Refer!!**
- Due to congenital plasmin deficiency – needs fresh frozen plasma and heparin



Thank You