Red eye

/several types of red eye /

Red eye - the most common cause of eye problems

- similar symptom associated with different complains
- pain or decreased vision

Etiology – trauma, chemical injuries, infection, allergy, systemic conditions

History – acute or chronic onset, previous episodes, eye pain, vision problems, presence of photophobia, unilateral, bilateral?

Physical exam – visual acuity, IOP, slid lamp exam and inspection of anterior segment, pupilary inspection

Non vision threatening disorders:

- Subconjuctival haemorrhage
- Chalasion
- Blepharitis
- Conjuctivitis
- Dry eye
- Episcleritis

Vision threatening disorders:

- Corneal erosions
- Corneal infections
- Hyphema
- Iritis and uveitis
- Acute angle closure glaucoma
- Orbital celulitis

Symptoms:

- Itchy eye allergy
- Burning lid, conjunctival, corneal disorders
- Dryness or tearing dry eye
- Localized tenderness- stye, chalasion

- Intensive pain corneal abrasions or ulcer, iritis, acute glaucoma, scleritis
- photophobia Iritis, acute glaucoma, corneal abrasions
- Halo vision cornael edema

Red eye, no pain, normal VA (visual aquity): conjuctivitis, subconjuctival hemorrage

Red eye, pain, normal VA: subtarsal foreign body, Episcleritis, Scleritis

Red eye, moderate pain, moderately decreased VA: corneal abrasion, keratoconjunctivitis

Red eye, severe pain, severe decreased VA: Acute glaucoma, Uveitis, keratitis, Scleritis

Subconjuctival Hemorrage – causes: trauma, arterial hypertension, conjunctival teleangiectasia, excessive physical exertion, vomitus, idiopatic

Conjuctivitis – etilogy –virus, bacteria, Allergy, Trauma, Dry eye

symptoms – tearing, burning, foreign body sensation, photophobia

Conjuctivitis discharge:

- white mucous allergy
- -purulent bacteria
- -clear viruses, allergies, chemical

Viral conjuctivitis: usually adenoviral,

- -watery discharge, tarsal follicles,
- -highly contagious
- -associated with respiratory infections

Keratoconjunctivitis:

- if its localised centrally can produce decreased visual acuity
- keratitis presents with subepithelial corneal infiltrates
- -treatment -antibiotic eye drops , artificials tears, NSAID eye drops, steroid eye drops for subepithelial infiltrates

Allergic conjuctivitis treatment:

- -associated conditions -hay fever, asthma, eczema- treat underlying disease.
- -contact allergy- chemical- avoid exposure

- topical olopatadine / ketotifen for AAC
- topical steroids and immunosupressive eyedrops for vernal and atopic keratoconjunctivitis

Vernal keratoconjunctivitis:

- -photophobia, young child, chronic allergy in few case, risk of cornea damage, amblyopia /child/
- -treatment –steroid eyedrops, immunosuppressive drops
 - Amniotic membrane graft for plaque ulcer

Tear film:

- -functions: lubrication and antibacterial activity
- -essential for maintaining a healthy cornea and conjuctiva
- -dry eye is a tear deficiency state
- -Tears have liquid, mucous and oil components

Tear deficiency associated conditions: aging, sex, Reumatoid arthritis, Stevens-Johnson sy.

,ocular cicatricial pemphigoid

- systemic medications- antihistamines , high doses of ibuprofen, antidepressants

Traumatic keratitis:

- -Foreign body sensation
- -painful
- -VA depend on the location of the keratitis

Anterior uveitis: signs and symptoms:

- -circumcorneal redness, cilliary flush
- -pain
- -photophobia
- -Decreased vision
- -plegic pupil
- -hypopyon, pupillary membranes and posterior synechiae

Anterior uveitis associations:

- -trauma
- -systemic inflammation
- -dental abscesses
- -HLA B27
- -sarcoidosis
- -Reiters urethritis
- -inflammatory bowel disorders

Therapy: mydriatic drops, steroid drops, systemic steroids

Episcleritis:

An inflammation of the subconjunctival and episcleral tissue is known as episcleritis.

There is lymphocytic infiltration of subconjunctival and episcleral tissue.

Etiology:

- 1. It is an allergic reaction to endogenous protein or toxin.
- 2. It may be a collagen disease as history of rheumatoid arthritis is often associated.
- 3. It can be associated with prior episodes of herpes zoster and gout.
- It occurs commonly in women, there is usually bilateral involvement, the peak age incidence is in the 4th decade.
- Types: 1. Simple diffuse episcleritis
 - 2. Nodular episcleritis.
- Signs: 1. Circumscribed nodule-like lentil is situated 2-3 mm away from the limbus.
 - 2. It is hard, immovable and tender.
 - 3. The conjunctiva moves freely over the nodule.
 - 4. The conjunctiva looks purple in colour as deep episcleral vessels traverse it.

Complications: Severe neuralgia may occur due to nerve involvement., scleritis results from deeper infiltration of inflammation., there may be associated uveitis.

Treatment: Corticosteroid eyedrops and ointment are applied, warm compresses are very soothing.

Anti-inflammatory and analgesics relieve pain and control inflammation.

Scleritis:

An inflammation of the deep scleral tissue is known as scleritis. It can occur as anterior (95%) and posterior (5%) scleritis.

Etiology:

In 50% cases, associated connective tissue diseases are present such as: • Rheumatoid arthritis • Polyarteritis nodosa • Systemic lupus erythematosus • Non-specific arteritis • Wagener's granulomatosis • Dermatomyositis • Polychondritis 2. It may be associated with prior episodes of herpes zoster and gout.

Women are commonly affected in 4th-5th decade.

Types: 1.Diffuse scleritis. 2. Nodular scleritis 3. Necrotizing scleritis.

Complications: Iritis, cyclitis, anterior choroiditis, annular scleritis, change in the cornea- stromal keratitis, deep keratitis, limbal guttering and keratolysis, secondary glaucoma, ciliary staphyloma, scleormalacia perforans, granuloma of the sclera.

Treatment: corticosteroids – local and systemic, cytotoxic immunosuppresive drugs or surgical

Treatment.

Contact lens overwear:

- -produce corneal edema, pain, tearing
- -corneal abrasion
- -treatment: antibiotic drop, artificial tears, steroids, epithelial ointments

Orbital cellulitis:

- -external redness, oedema, pain, eyelid swelling, conjunctival chemosis
- impaired painful motility,
- -proptosis
- -optic nerve affection- decreased VA, RAPD+, disc edema
- -complications: cavernous sinus trombosis, meningitis.

Acute angle closure glaucoma: see lecture glaucoma

This is a brief summary of red eye and its possible causes. It is necessary to have knowledge about all of them /see next lectures/