

DISORDERS OF EYE

A decorative graphic consisting of several parallel white lines of varying thicknesses, slanted diagonally from the bottom-left towards the top-right, located in the lower right quadrant of the slide.



HORDEOLUM



STYE

- ▶ Acute inflammation at the edge of the lid
- ▶ Caused by Staphylococcal infection of the gland of Zeis
- ▶ Usually ending in supuration




ETIOLOGY OF STYE

- ▶ Most common in children and young adults
 - ▶ Associate with Blepharitis
 - ▶ Lower state of health – DM, Uncorrected Refractory errors
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SIGNS AND SYMPTOMS

- ▶ Red swelling appearance
 - ▶ Pain
 - ▶ Tenderness
 - ▶ Oedema of the lids
 - ▶ Yellowish summit (indicating Suppuration)
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TREATMENT

- ▶ Hot fomentation
 - ▶ Antibiotics – Chloromycetin ointment
 - ▶ Analgesics
 - ▶ Prophylaxis
 - ▶ Antibiotic ointment
 - ▶ Treat DM, Blepharitis, correction of refractory errors
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CHALAZION



CHALAZION




- ▶ Also called tarsal or meibomian cyst
- ▶ It is a chronic non-infective granulomatous inflammation of the meibomian gland

ETIOLOGY

- ▶ *Staphylococcus*
 - ▶ Seborrhea
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CLINICAL FEATURES

- ▶ Painless swelling in the lid
 - ▶ Feeling of mild heaviness
 - ▶ Examination – small, firm to hard, non tender swelling
 - ▶ Red, purple or gray area seen on everting the lid
 - ▶ Foreign body sensation
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COMPLICATION

- ▶ Blurred vision
- ▶ Astigmatism
- ▶ Ectropion and epiphora
- ▶ Formation of fungating mass
- ▶ Leads to hordeolum infection
- ▶ Calcification
- ▶ Malignant change – meibomian carcinoma

TREATMENT

- ▶ Conservative treatment
 - ▶ Hot fomentation – 10-15 minutes , 4 times a day
 - ▶ Topical antibiotics - chloromycetin
 - ▶ Eye drops
 - ▶ Oral anti-inflammatory drugs
 - ▶ Intralesional injection – long acting steroid (Triamcinolone)
 - ▶ I & D
 - ▶ Diathermy
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BLEPHARITIS





- ▶ It is a chronic bilateral inflammatory reaction of the eyelid margins

2 TYPES

- ▶ Anterior blepharitis
 - ▶ Posterior blepharitis
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ANTERIOR BLEPHARITIS

- ▶ Staphylococcal blepharitis – ulcerative, involvement of base of hair follicles
 - ▶ Seborrhoeic Blepharitis – hyperaemia and greasy appearance to anterior lid.
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POSTERIOR BLEPHARITIS

- ▶ Meibomian seborrhea
 - ▶ Meibomianitis – inflammation of the meibomian glands
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CLINICAL MANIFESTATION

- ▶ Sore eye : burning and itching of eyelid margin
 - ▶ Dry eye or epiphora
 - ▶ Redness
 - ▶ Irritation
 - ▶ Photo phobia
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MANAGEMENT

- ▶ Lid hygiene
 - ▶ Warm compress
 - ▶ Lid massage
 - ▶ Lid cleansing
- ▶ Antibiotic ointment – chloramphenicol ointment – 1-4 times per day to lid margin
- ▶ Systemic antibiotics
 - ▶ Tetracycline – 500mg, bd, 4weeks then 250 mg bd for 8weeks
 - ▶ Oxytetracycline - 500mg, bd, 4weeks then 250 mg bd for 8weeks
 - ▶ Doxycycline - 100 mg od for 4 weeks then 50 mg od for 8 weeks

