

Speaker 1 ([00:01](#)):

Good morning. This is part three of the series on conjunctival diseases mainly about allergic conjunctiva disease.



New Speaker ([00:11](#)):

Allergic conjunctivitis can be either simple allergic conjunctivitis or other sign like phlyctenular conjunctivitis and the severe form Called Spring catarrh or Vernal catarrh conjunctivitis.

2) Allergic Conjunctivitis

1. Simple Allergic Conjunctivitis
2. Phlyctenular Conjunctivitis
3. Spring Catarrh



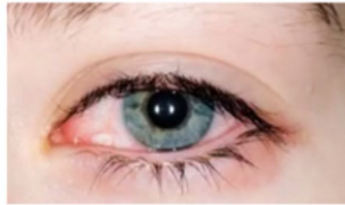
New Speaker (00:27):

Simple allergic conjunctivitis is a very common allergic conjunctivitis and it is secondary to exogenous antigen, like dust, cosmetics and pollen

2.1 Simple Allergic Conjunctivitis

Definition:

- Common allergic conjunctivitis
- Secondary to exogenous antigen
 1. Dust
 2. Cosmetics



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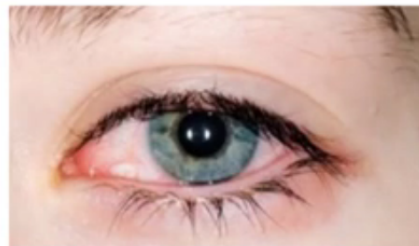
New Speaker (00:38):

Clinically the patient complained of severe itching and eye discomfort on examination there will be hyperemia which is little or white, milky red hyperemia with very scanty discharge of water nature.

2.1 Simple Allergic Conjunctivitis

Definition:

- Common allergic conjunctivitis
- Secondary to exogenous antigen
 1. Dust
 2. Cosmetics



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New Speaker ([00:56](#)):

Treatment is removal of the cause, avoiding the causative agent and antihistaminic drops, cold compresses is the most important part of the treatment and it is a physiological antidote against all the acute inflammatory mediators. corticosteroid drops rarely used except in severe cases and for very short period of time.

2.1 Simple Allergic Conjunctivitis

Treatment:

1. Removal of cause
2. Antihistaminic drops
3. Cold Compresses
4. Corticosteroids drops
 - (rarely used)



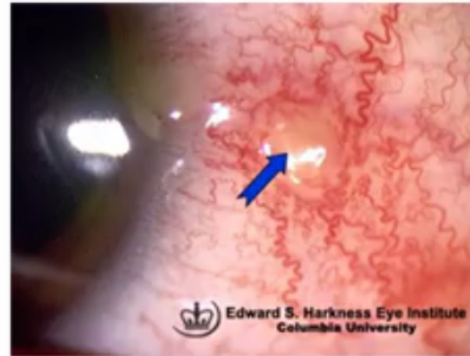
New Speaker ([01:21](#)):

phlyctenular conjunctivitis is an allergic inflammatory focus of the conjunctiva in response to endogenous toxin.

2.2 Phlyctenular Conjunctivitis

Definition:

- Allergic
- Inflammation
 - Of
- Conjunctiva
 - In response to
- Endogenous toxin



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New Speaker ([04:14](#)):

allergy can be to exotoxin of streptococcal from tonsillitis, for example or tubercular protein or intestinal parasite toxins.

2.2 Phlyctenular Conjunctivitis

Etiology:

- Allergy to endogenous toxin :
 1. Exotoxin of streptococci
 1. (Tonsillitis)
 2. Tuberculo – protein
 3. Toxins of intestinal parasites



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New Speaker ([04:20](#)):

The toxin may reach the Limbus and the cornea and it can give the same pathology so it can deflecting the conjunctiva in the cornea or in the limbus.

2.2 Phlyctenular Conjunctivitis

Pathology:

- The toxin may reach
 - Limbus &
 - Cornea
 - → same pathology



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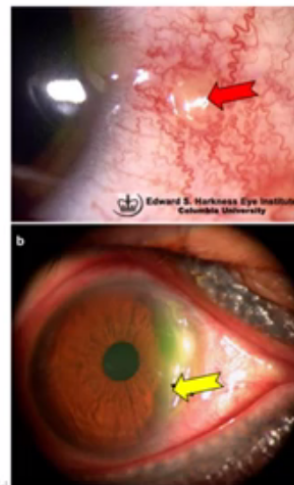
New Speaker ([04:20](#)):

Clinically deflection, deflection causes discomfort, hyperemia and lacrimation. If the cornea is involved with a phlyctenular ulcer that will lead to pain, a lot of lacrimation and watery discharge. If the discharge is mucopurulent then that's a secondary bacterial infection. Corneal involvement will also lead to photophobia and blepharospasm.

2.2 Phlyctenular Conjunctivitis

Clinical Picture:

- Symptoms:
 1. **Phlycten**
 1. Discomfort &
 2. Hyperemia
 3. Lacrimation
 2. **Phlyctenular Ulcer**
 1. Pain
 2. Lacrimation
 3. Discharge
 1. → 2ry bacterial infection
 3. **Corneal involvement:**
 1. Photophobia and
 2. Blepharo spasm



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New Speaker (04:20):

Spring catarrh or vernal kerato conjunctivitis because the cornea is involved in most of the cases, is a chronic bilateral allergic conjunctivitis caused by exogenous antigen and deform of heat, ultraviolet rays, dust and others. It is recurrent and maybe seasonal, although of its name, which means a spring it is common in warm seasons and summer as well.

2.3 Vernal Conjunctivitis

Spring Catarrh
Vernal Kerato Conjunctivitis VKC

Definition:

1. **Chronic,**
 - Bilateral,
 - Allergic conjunctivitis
 - Caused by exogenous Antigen
 - Heat, U.V. rays
2. **Recurrent,**
 1. Seasonal
 2. Common in warm seasons



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New Speaker (04:20):

It affects mainly young children and young adults, it's more in boys and more at the hot season in the summer.

2.3 Vernal Conjunctivitis

• Incidence:

1. **Age:**
 1. children &
 2. young adults
2. **Sex:**
 1. more in boys
3. **Season:**
 1. hot season
 2. summer & not spring



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New Speaker ([04:20](#)):

Clinically the patient complains of severe itching and rubbing of the eyelids, lacrimation, photophobia and ropy or thready discharge.

2.3 Vernal Conjunctivitis

Clinical picture:

Symptoms :

1. Itching
2. lacrimation
3. photophobia
4. Ropy (thread) discharge



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New Speaker ([04:20](#)):

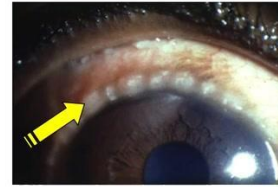
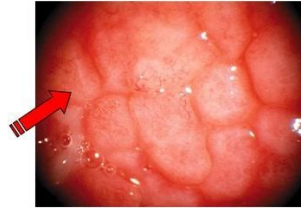
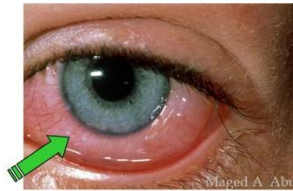
On examination, there are three types that can exist: the palpebral type which affects the back of the eyelid and the tarsal conjunctiva. The bulbar type which affects the bulbar conjunctiva near the Limbus or it can be mixed type of the two.

2.3 Vernal Conjunctivitis

Clinical picture:

Signs :

- 3 types exist:
 1. Palpebral type
 2. Bulbar type
 3. Mixed type



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New Speaker ([04:20](#)):

palpebral type usually affects the upper palpebral conjunctiva and it shows characteristic papilla which is large, flat top, red, bluish and arranged as a cobblestone appearance the fornix is always free.

2.3 Vernal Conjunctivitis

Palpebral type:

- The upper
- Palpebral conj. shows
- Characteristic Papillae
 1. Large &
 2. Flat topped
 3. Bluish
 4. Arranged as cobble stone
- Fornix is always free



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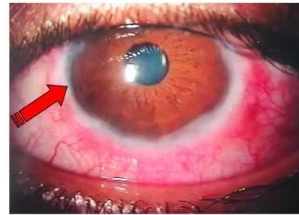
New Speaker ([04:20](#)):

The bulbar conjunctiva near the Limbus may show gelatinous masses which first appeared medial and lateral then it spreads all around the limbus

2.3 Vernal Conjunctivitis

Bulbar type :

- Bulbar conj
- Near limbus
- Shows:
- Gelatinous masses:
 - 1st med. & lat.
 - then all around



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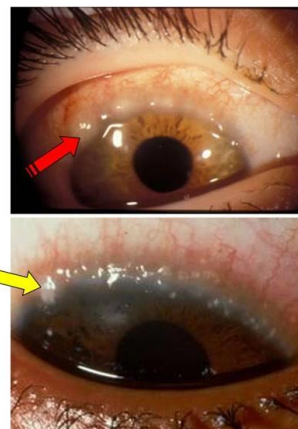
New Speaker ([04:21](#)):

limbal follicle may be present on the limbus as in the above, photo, however trantas spots, which are gelatinous degeneration of the deeper layer of the epithelium, which appears as a clear Spear spots within gel masses appear in the lower photograph.

2.3 Vernal Conjunctivitis

Bulbar type :

1. Limbal Follicles
2. Tranta's spots:
 - Clear spear spots
 - within gel. Masses
 - Degeneration of
 - deeper layers of
 - Epithelium



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New Speaker ([04:44](#)):

Vernal Conjunctivitis can be complicated with corneal manifestation. It is rare. However, it is seen with Bulbar type. It can form a pannus on the upper limbus and ulcer in the cornea or a special form of superficial keratitis.

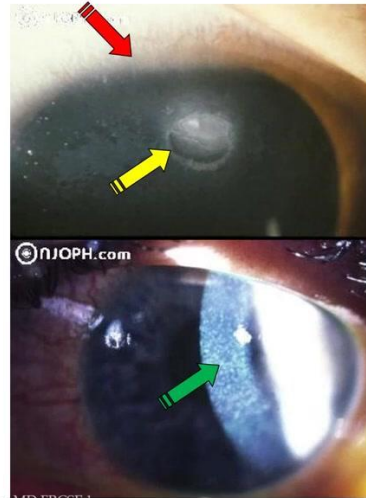
2.3 Vernal Conjunctivitis

Complications

=

Corneal Manifestations

- Rare &
- Seen with Bulbar type :
 1. Pannus
 2. Ulcer
 3. Keratitis superficialis of Tobgi



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New Speaker (05:04):

treatment. Generally is anti allergic drugs like antihistaminic .

2.3 Vernal Conjunctivitis

Treatment:

General ttt

- Anti- allergic drugs
 - Antihistaminic
 - Antistine

New Speaker (05:08):

locally, dark glasses and cold compresses is the major component of effective treatment. antihistaminic eye drops, Antazoline and naphazoline vasoconstrictor is usually used. Cortisone is reserved to only in severe cases in case of drops. and for very short course.

Allergic Conjunctivitis

Treatment:

Local ttt:

1. Dark glasses +
2. Cold compresses
3. Antihistaminic eye drops
 1. Antazolin
 2. Naphazolin
4. Cortisone
 - Drops
 - Only in severe cases
 - Short course



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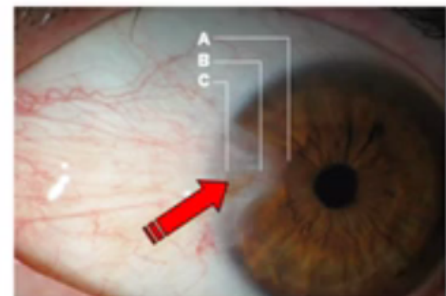
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New Speaker ([05:36](#)):

degeneration of the conjunctiva can involve two common types. The pterygium, and the pinguecula.

3) Degeneration of the Conjunctiva

1. Pterygium
2. Pinguecula



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New Speaker (05:46):

the pterygium is a triangular encroachment of the conjunctival tissue over the Cornea the etiology is unknown. However, it's may be related to chronic irritation by the sun, wind, dryness & dust,

3.1 Pterygium

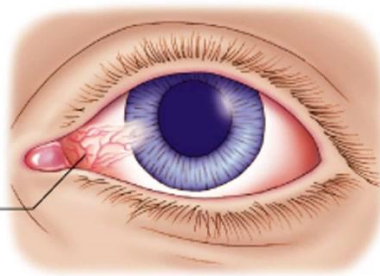
Definition:

- Triangular
- encroachment
- of conjunctiva
- over cornea

Etiology:

- Unknown
- May be related to
 - Chronic irritation by:
 - **Sun**
 - **Wind**
 - **Dryness**

Pterygium



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New Speaker (06:04):

there is no needed treatment. If the pterygium is is small and not growing, however, if it gets larger in size or it encroaches upon the pupillary area, it have to be removed surgically, uh, to prevent affection of vision, it can also be removed if cosmetically it annoying the patient ,recurrence is very common after surgical excision .

3.1 Pterygium

Treatment:

1. No ttt
 - If small &
 - stationary
2. Surgical excision: If
 1. Encroaches on pupillary area
 2. Progressive type
 - (as it will encroach)
 3. Cosmetically annoying patient
 4. Recurrent cases

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New Speaker (06:36):

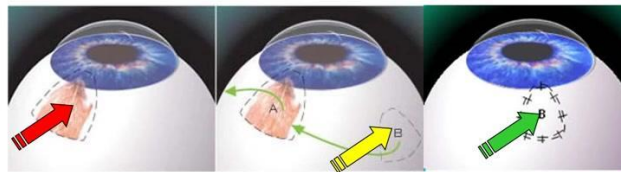
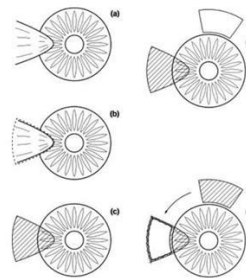
newer treatment is excision with conjunctival transplant ,otologist using mitomycin C in order to prevent the fibrous, the fibroblast multiplication, together with the otologist conjunctival transplant. As we can see here, the red arrow is removing the pterygium, the yellow. We taked an otologist graft and put it on the excision site after being treated with mitomycin C

3.1 Pterygium

New Treatment

Excision with Conjunctival Transplant

- Excision of Pterygium
- MM-C
- Autologous Conjunctival Transplant



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pinguecula is a degenerative condition, which actually appears in old age. It is yellowish raised triangular nodule usually nasal to the limbus.

3.2 Pinguicula

Definition:

- Degenerative condition of conj.
 - In old age
- Yellow,
- Raised,
- Triangular
- Nodule
- Nasal to limbus



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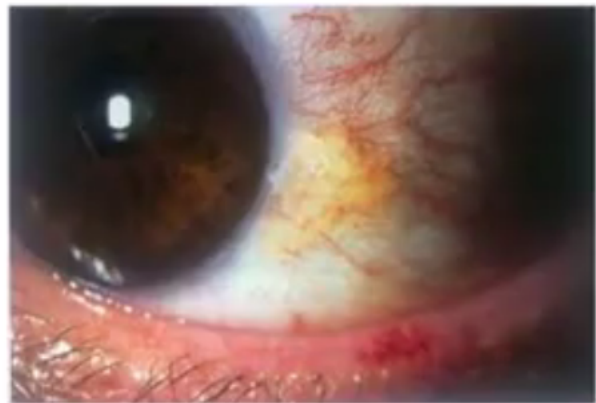
New Speaker ([07:26](#)):

There is no treatment needed, except if this is cosmetically annoying, then it can be simply surgically excise,

3.2 Pinguicula

Treatment:

- No ttt
- But
 - if cosmetically
 - annoying pt.
 - → excision



New Speaker ([07:37](#)):

Xerosis it is a severe form of dryness in the eye involving the cornea and the conjunctiva.

4) Xerosis

Definition:

- Dryness of
- Cornea &
- Conjunctiva



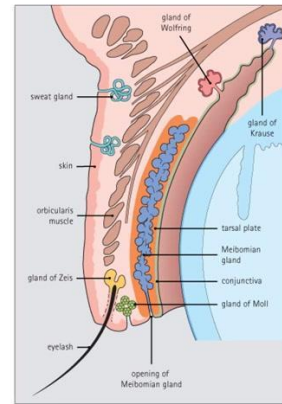
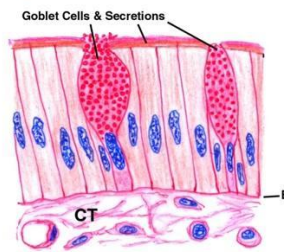
New Speaker (07:43):

Xerosis is a syndrome & not a disease. It's a sign it's mainly due to destruction of goblet cells in the conjunctiva and the accessory lacrimal gland in the palpebral conjunctiva and in fornix due to several causative agents and factors.

4) Xerosis

Etiology:

- Mainly due to destruction of:
 - Goblet cells,
 - Accessory lacrimal glands



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Speaker 1 (08:07):

Local agents can lead to fibrosis of the conjunctiva with severe inflammation, trachoma, diphtheria & burns, also the prolonged exposure of the conjunctiva in lagophthalmos or inability to close the eye can also lead to severe dryness.

4) Xerosis

Etiology:

local:

1. Fibrosis of conjunctiva
 1. Inflammation
 2. Trachoma
 3. Diphtheria
 4. Burn



2. Exposure of conjunctiva
 1. (Lagophthalmos)

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New Speaker ([08:28](#)):

general causes of eye dryness is vitamin a deficiency, especially in (?) And sjogren's syndrome or keratoconjunctivitis sicca which involves several organs in the body.

4) Xerosis

Etiology:

General

1. Vitamin A deficiency
2. Sjogren's syndrome
 - (Kerato conjunctivitis sicca)



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New Speaker ([08:45](#)):

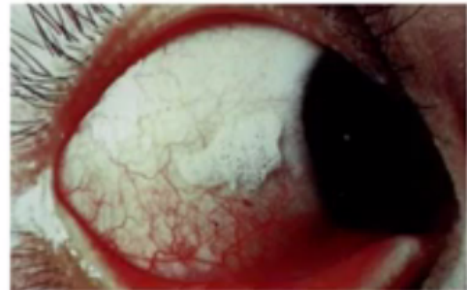
Clinically the patient complains of Gritty sensation, sand sensation, discomfort. And if the causes vitamin a deficiency, there will be also night blindness.

4) Xerosis

Clinical picture:

Symptoms:

1. Gritty sensation,
2. Discomfort,
3. Night blindness
 - (Vit. A def)



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New Speaker ([08:56](#)):

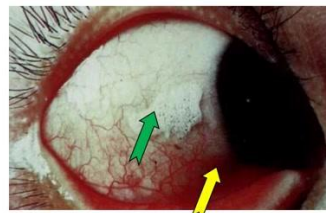
, first the cornea loses its normal luster. The conjunct becomes hyperemic and thickened keratinized and wrinkled. And at the end, a Bitot spot, the green arrow will appear as a triangular white patches, medial, and lateral to the limbus. And this is due to keratinization of the conjunctival epithelium.

4) Xerosis

Clinical picture:

Signs:

1. Loss of luster
2. Conjunctiva is
 1. Hyperemic
 2. Thickened
 1. (keratinized & Wrinkled)
3. Bitot Spots:
 - A triangular
 - White patches
 - Med. & lat. To limbus
 - Due to Keratinization
 - Of the epithelium



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New Speaker ([09:27](#)):

Xerosis Is diagnosed by the clinical picture, coupled with some investigation like,Shemar test, which can estimate the amount of tear production, also together with the looking for any systemic or causative disease.

4) *Xerosis*

Diagnosis:

- By clinical picture

+

- Investigations
 - Schemar test:



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New Speaker ([09:49](#)):

treatment is usually treatment of the cause, vitamin a supplement or immune system treatment, tear substitutes is a local topical temporary treatment,

4) *Xerosis*

Treatment:

1. ttt of cause
 1. (vit A)
 2. Immune system
2. Tear substitutes

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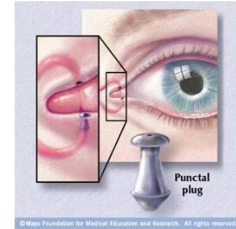
New Speaker ([10:08](#)):

tear preservation can also be done by using special sort of scleral contact lenses or by punctal occlusion, which enclose the punctum and preserve the natural tear produced by the eye itself.

4) Xerosis

Treatment:

- Tear preservation
 1. Contact lenses!
 2. Punctal occlusion



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Speaker 1 ([10:27](#)):

Thank you.