

VIRAL CONJUNCTIVITIS - Pink Eye

What is Viral Conjunctivitis?

This is a virus infection of the outer parts of the eye, normally affecting both eyes. It is usually due to the adeno virus which also causes the common cold. In fact the eye infection often follows a cold by 10 days or a cold often develops with the eye infection.

What are the Symptoms?

One or both eyes become Red. There is only mild discomfort or gritty sensation with a very watery eye. Some mucus discharge is common. Pain is not an early feature. The eye lids often become puffy and commonly the lymph glands below the ears become swollen. Your vision should not be affected.



How did I catch it?

It is very infectious and is usually transmitted by direct contact a hand shake, swimming pool, towels etc.. Epidemics can also occur amongst children at school. Thus avoid shaking hands and close contact.

Diagnosis

Traditioanl on symptoms of watery discharge & red eye, usually bilateral.

The RPS Adeno Detector is a rapid immunochromatographic test for visual, qualitative in-vitro detection of adenoviral antigens (hexon protein) directly from human eye fluid. The test is intended for use as an aid in the rapid differential diagnosis of acute adenoviral conjunctivitis.



Treatment

There is no specific cure for the virus infection. Your own body will tackle this just as it does with the common cold. It does take several weeks and can take up to three months to completely resolve. It is usually at its worst at the end of the first week and thereafter slowly improves.

We usually suggest topical antibiotics just to prevent the eye from

becoming sticky and does have a soothing effect. In addition Celluvisc (Allergan) (Carmellose 1%) or Viscotears is a good lubricant that soothes the eyes and being single disposable units is convenient to carry around, however is expensive if used regularly and thus a tube of Viscotears may be cheaper. Optrex can be used to whitening the eye in mild cases as well.

FML (Fluorometholone 0.1% Allergan) If the eye is very red or the cornea is involved then topical steroids will reduce the redness and the affects on the cornea. Usually takes a couple of days to clear the redness. This settles the discomfort and redness quickly but is often necessary to continue the drops for a month or so. There is a small chance on stopping the drops that the redness will return as the body has to deal with the infection and this can take time. FML (Fluorometholone 0.1% Allergan) is a steroid that stays on the outside of the eye but some people do get an IOP rise with steroids hence the Doctor will wish to see you again to check the IOP.

This is a infection that only time will heal.

What precautions should I take?

The infection is highly infectious especially when the eye is watering. Your tears will be viral laden and if you wipe your eye or go swimming are very likely to transmit the infection. If you work with children or the general public you should be off work until your eyes stop dripping/watering.

At home, keep face flannels, hand towels etc. separate from the rest of the family.

Try not to wipe your eyes with your hands as this will make your hand infectious. Use fresh dry tissues and dispose after each use.

Wash hands yours hands regularly.

What complications can occur?

In a few cases the virus spreads from the conjunctiva (the white part of the eye) to the cornea (the window to the eye). Your symptoms will change in that the eye is likely to become painful, the vision will blur and the lids become very swollen. If this happens you need to contact your General practitioner or ophthalmologist again for advice.

Other family members

This is a common condition and infectious. If any of the family develop red eye you will know the symptoms and they should also be seen.

Will it damage my eyes?

No, not usually. It is an infection of the outside of the eye.

Often the weeping of the eye makes the lids sore due to the water, applying some Vaseline to the lids can help prevent this.

Should you require any more information please feel free to ask your Doctor or our secretary.

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