

Conjunctivitis

Conjunctivitis means inflammation of the conjunctiva, or the lining of the eye. The conjunctiva covers the white part of the eye (the sclera) as well as the inside of the eyelids. There are several forms of conjunctivitis.

Bacterial conjunctivitis or Pink Eye

- When bacteria infect the lining of the eye, the conjunctiva become intensely red or inflamed, hence the term “pink eye”
- There is heavy ooze of pus from the eye, usually green or yellow
- The pus may dry into a crust along the eyelashes, especially during sleep
- The eye is itchy, burning, or irritated but severe pain is not present
- The skin of the eyelids may be irritated from rubbing or moisture
- There is usually no fever or other signs of illness
- Although it may start on one side, bacterial conjunctivitis usually spreads from one eye to the other
- Contagious from person to person, usually by rubbing or touching the eyes
- Bacterial conjunctivitis is treated with antibiotics, usually in the form of eye drops
 - Children are excluded from daycare, activities and school until treated for at least 24 hours
 - Do not share washcloths, towels, or linens. Launder in hot water daily for a few days, until eye discharge resolves.
- Children under the age of two may have an associated ear infection; in this case, oral antibiotics are prescribed.

Viral conjunctivitis

- The conjunctiva become irritated, although the degree of redness is usually mild to moderate
- The eye discharge is usually clear to white, although a yellow or green color may be present if the mucus sits in the eye for a while
- A crust may form along the eyelashes when the mucus dries
- The child usually has a runny nose, cough, sore throat, or other signs of a cold and may have a fever.
- Viral conjunctivitis resolves on its own in a few days; antibiotic eye drops are not helpful since they can only kill bacteria, not viruses. Compresses may be used to soothe the irritation.

Allergic conjunctivitis

- Extremely itchy eyes, with redness that ranges from mild to severe
- Swelling of the lids is common
- Tearing is common, but pus is not expected
- Child may also be sneezing or congested
- May follow a seasonal pattern, especially if related to pollen
- Treatments include
 - Oral antihistamines such as Claritin, Zyrtec, benadryl, etc
 - Cool compresses
 - Anti-allergy eye drops
 - Naphcon or Opcon or Zaditor for occasional use (over the counter)
 - Patanol or Pataday for more frequent use (prescription)
 - Minimize pollen exposure by keeping windows shut, washing face after outdoor exposure, using air conditioner (see Allergy handout)