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SELF-CARE INFORMATION ON CONJUNCTIVITIS

What is Conjunctivitis?

Conjunctivitis is usually an infection or inflammation of the outer layer of the eye (conjunctiva). It can occur most commonly if you have a cold virus or have been near someone with a cold. Conjunctivitis is not usually serious, but it can affect both eyes and can be passed from person to person. Conjunctivitis is sometimes referred to as 'pink' or 'red' eye.

There are three forms of conjunctivitis:

- Bacterial
- Viral
- Allergic.



Normal eye

In a healthy eye, the sclera is essentially white with only a few small blood vessels visible. There is an adequate tear film, with no significant discharge or watering.



Bacterial conjunctivitis A red eye with a sticky yellow or yellow/green discharge. Eyelids may be stuck together upon waking. Can affect one or both eyes. Usually spread by direct contact only.



Viral conjunctivitis

The type of conjunctivitis most commonly associated with the term "pink eye." Appearance: red, itchy, watery eye. Can affect one or both eyes. Highly contagious.



Allergic conjunctivitis Very similar in appearance to viral conjunctivitis, but accompanied by nasal congestion, sneezing, eyelid swelling and sensitivity to light. Both eyes are affected. Not contagious.

CONJUNCTIVITIS

What are the symptoms?

Bacterial Conjunctivitis - often starts in one eye, occasionally spreading to the other eye. It normally causes a yellow or green sticky discharge throughout the day. The eyes will feel itchy, and the eyelids may become swollen.

Viral Conjunctivitis - often starts in one eye, usually spreading to the other eye. Normally causes a watery discharge during the day and presents with sticky discharge in the morning. The eyelids may become very swollen. In most cases of viral conjunctivitis, it does not affect the vision but rarely you might notice the vision becomes blurry or you may see dots or glare when looking at lights. These usually fade with time, but it can take a few weeks.

Allergic conjunctivitis usually causes pink or red itchy eyes. The eyes are normally watery and other allergy symptoms such as sneezing, and a runny nose may be present. These are part of the body's defence mechanism to things it sees as foreign and harmful. The seasonal type of allergic conjunctivitis will vary with the time of year and weather conditions. Those with more general allergies, such as an allergy to dust mites, animals, etc; will be most likely to have symptoms throughout the year. Other symptoms include:

- Both eyes are usually affected, and symptoms develop quickly
- The skin on the inside of the eyelids looks red and sore
- A burning feeling may occur, although the eyes are not usually painful
- The eyelids tend to swell

Risk factors

Bacterial Conjunctivitis:

- Children and the elderly.
- People with weaker immune systems such as those with diabetes
- People who do not wash their hands before inserting or removing contact .

Viral Conjunctivitis:

• Often follows a recent cold or sore throat.

Allergic conjunctivitis

- Sensitivity to grass and tree pollen, dust mites or animals.
- A history of allergies or those who have a family history of allergies.

Treatment

Conjunctivitis will normally get better on its own, without any medical treatment, in around one to two weeks. General advice for managing symptoms incudes:

- Use painkillers such as paracetamol or ibuprofen for fever or pain.
- Clean any discharge away with cooled, boiled water on a clean cotton wool ball or by using artificial tears. Clean your eye by starting at the area closest to your nose wiping outwards.
- Use antihistamines for itchy eyes. You can also get antihistamine drops from the pharmacist.
- You can also use the cotton wool as a cold compress on the closed eye to help relieve pain.
- If you wear contact lenses, you should remove these if you have an infection. Continuing to wear contact lenses with an eye infection is very serious and on rare occasions can lead to loss of eyesight.

• Any changes such as increased swelling, inflammation or increased discharge from your eye should be reviewed by your local opticians.

Viral conjunctivitis. Antibiotic drops or ointment will not help with viral conjunctivitis, but the eyes will improve over 1-2 weeks following the measures outlined above.

Bacterial conjunctivitis should get better without any drops or ointment but if severe and persistent can be treated with antibiotic drops or ointment, as this may help to speed up the process of clearing the infection within a few days (5-7 days).

Artificial tears and antibiotic ointment (Chloramphenicol) can be purchased over the counter from the pharmacist (if recommended).

If a *child is below two years* of age and has significant or persistent conjunctivitis, please contact your GP to discuss.

Allergic conjunctivitis – treatments available include:

- Mast-cell stabiliser eye drops These take a few days to start to work. These drops are good if you know when you are likely to develop an allergy and so you can use them to prevent symptoms from occurring.
- *Antihistamine eye drops* These drops provide a more immediate effect. They won't prevent an allergic reaction, but instead treat the symptoms once the allergy has started.
- Antihistamine Tablets The tablets work in the same way as the eye drops, but also treat other allergy symptoms such as a runny nose and sneezing that is caused by the allergy. If you have allergic conjunctivitis, please visit your local pharmacist for advice.

These treatments are all available over the counter at your pharmacy if they have been recommended to you.

The dos and don'ts while you have conjunctivitis:

Don't:

- Don't share flannels, towels, or pillows with anyone else.
- Don't share your eye drops with anyone else.
- Don't attend work whilst you have red, watery, or sticky eyes if you work with children, elderly people, or patients, or if you handle food in your job.
- Don't wear your contact lenses until your eyes are better and after 24 hours after the last dose of ointment/drops (if they were required).
- Do not rub your eyes
- Do not wear eye make-up.

Do:

- Wash hands regularly with warm soapy water.
- Wash pillows and face cloths in hot water and detergent.
- Use disposable paper tissues to wipe your eyes. Use one tissue per eye to prevent cross-infection and throw them straight into the bin after use.
- Avoid any allergic triggers if possible

When to seek advice?

In most cases, you will not need to return for a further check-up.

However, please seek further help and advice immediately if your sight becomes:

- More blurred over time, changes in your vision, like wavy lines or flashing.
- If the pain and redness are getting a lot worse.
- The light starts to hurt your eyes (photophobia).
- Intense redness in 1 eye or both eyes.

Useful contacts

- · Ask your pharmacist
- · Ask an optician
- Patient UK www.patient.co.uk
- NHS Choices, <u>www.nhs.uk/conditions/</u>

If you have further questions:

Call the *practice* on *01285 653184 or 01285 653122*

If you require *urgent* medical advice, call 111 (24 hours)

In an *emergency* call *999*