Ocular chemical injuries and their management

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INTRODUCTION

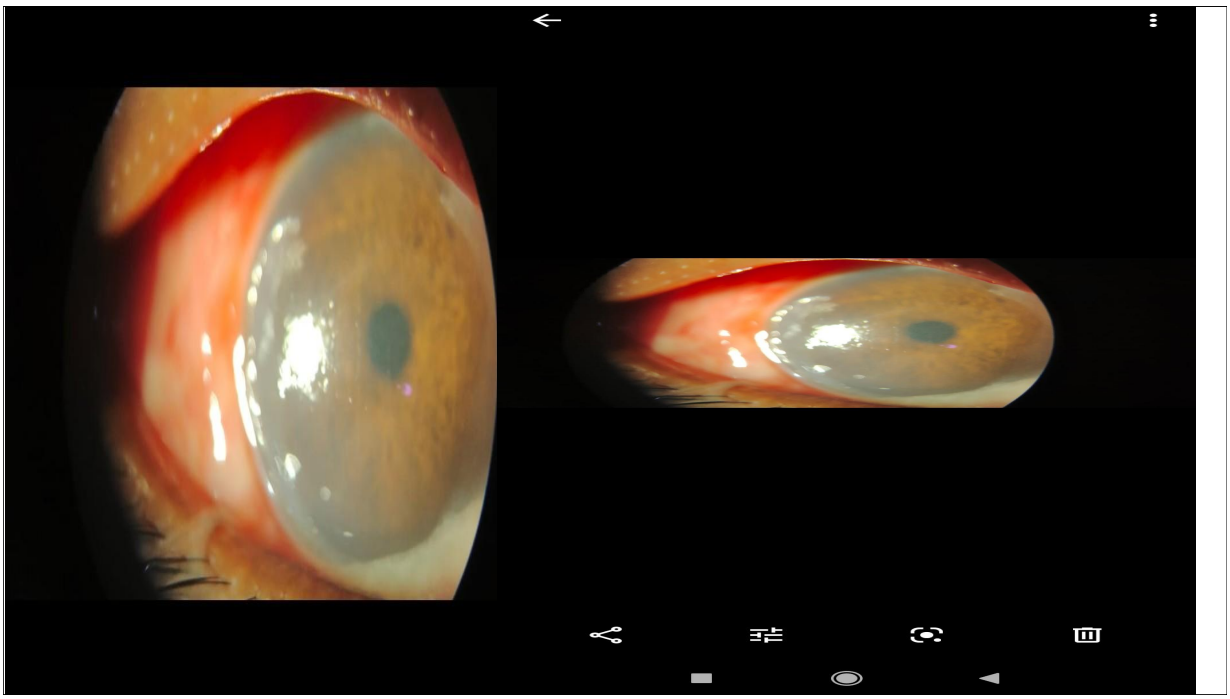
- Chemical burns represent potentially blinding ocular injuries and constitute a true ocular emergency requiring immediate assesmemtband intiation of treamenent.
- Alkali injuries are more dangreous than acid injuries due to deeper penetration .
- Chemical injuries of the eye produce extensive damage of ocular surface epithelium, anterior segment and limbal stem cells resulting in permanent unilateral or bilateral visual impairment .
- Emergency management if appropriate may be the single most important factor to determine outcome.Alkali burns cause corneal damage by PH change in the tear flim ,proteolyzes ,and collagen synthesis defects, that leads to ulceration. .

CASE REPORT:

35 year old male patient presented with accidental fall of acid in the right eye of 3 days duration.He complained of pain,watering ,photophobia of the eyes.

INVESTIGATION

- Slit lamp examination showed congestion of the bulbar conjunctiva,limbal ischaemia more than 6 clock hours,corneal epithelial defect,stromal haze ,fluroscein stain showed epithelial defect in lower half of the right cornea



Fundus examination botheyes reveals normal .Ocular movements were full.Visual acuity of the right eye was 6/36 with pinhole 6/24 ,Left eye was6/ 6 .According to Roper Hall classification this patient comes under grade 3

Discussion

Pt was admitted in the ophthalmology ward

-Copious irrigation with ringer lacate.

-Preservative free tear substitutes .

- To control inflammation moxifloxacin 0.5 Percent and prednisolone 1 percent eye drops instilled topically 6 times per day

- Systemic antibiotics T.Doxycycline 100 mg twice a day .

-Lacrigel eye ointment night time application.

Progonosis

- Visual acuity of the patient Left eye improved upto 6/ 9 with pinhole 6/6 .

- on Slit lamp examination anterior segment of LE with in normal limits .