

DISEASES OF THE CONJUNCTIVAL DISEASE

Sawa private university

**College of health and medical
technology**

fourth class

Fifth eye disease lecture

SAWA UNIVERSITY



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Introduction

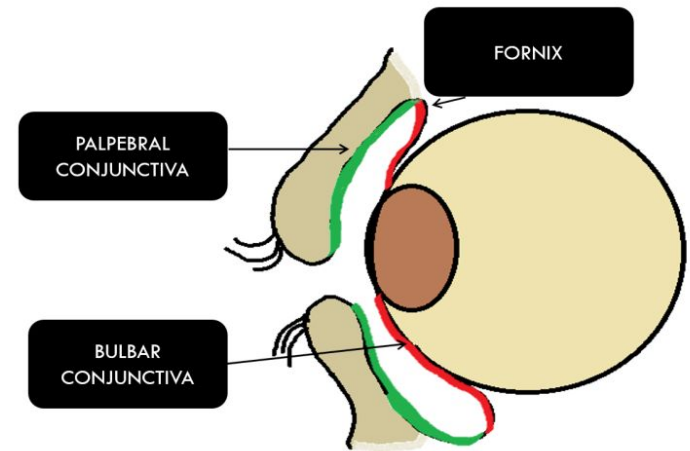
- Conjunctivitis = inflammation or infection of the conjunctiva.

- Common cause of red-eye.

- Visual acuity usually preserved unless cornea involved.

Anatomy of Conjunctiva

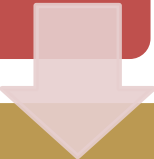
- • Covers inner eyelid and anterior sclera.
- • Non-keratinized epithelium + vascular stroma.
- • Contains immune cells and goblet cells.



PARTS OF CONJUNCTIVA

Pathophysiology

- Vessel dilation → redness and swelling.

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- Exudate forms due to inflammation.

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- Papillae or follicles depending on cause.

Classification

Conjunctivitis

Pink Eye



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- Infectious: Viral, Bacterial, Chlamydial, Gonococcal.
 - Non-Infectious: Allergic, Toxic, Irritant.

Viral Conjunctivitis



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- • Most common in adults.
 - • Adenovirus is main pathogen.
 - • Watery discharge, preauricular lymphadenopathy.
 - • Self-limiting, contagious.

Bacterial Conjunctivitis

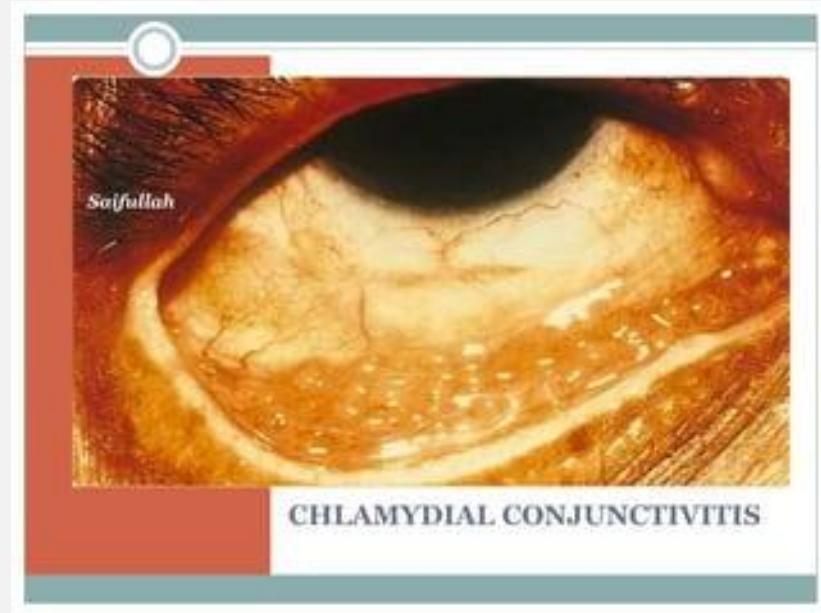


BACTERIAL CONJUNCTIVITIS

Dr. Chavan P. R.
Pharm D

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- Common in children.
 - Staph, Strep, H. influenzae.
 - Purulent discharge, eyelids stuck in morning.
 - Treated with topical antibiotics.

Chlamydial & Gonococcal Types



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- • Chlamydial: Chronic, follicles, scarring possible.
 - • Gonococcal: Hyperacute, copious pus, corneal risk.
 - • Require systemic antibiotics and referral.

Clinical Features

- Redness, tearing, foreign body sensation.



- Watery vs purulent discharge differentiate causes.



- Vision loss only if cornea involved.

Optometrist Examination

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- Check visual acuity.

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- Slit-lamp:
papillae/follicles,
discharge, membranes.

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- Examine cornea and
lymph nodes.

Management

- Hygiene & isolation (viral).
- Artificial tears, compresses.
- Antibiotics for bacterial.
- Stop contact lens use.

When to Refer

- Severe pain or vision loss.
- Corneal ulceration.
- Contact lens-related infection.
- No improvement after 48 hours.

Complications & Prognosis

- Usually resolves without sequelae.
- Complications: keratitis, scarring (chlamydia).
- Prevention: hygiene and early management.

Optometrist Role

- Differentiate red-eye causes.
- Educate patients on hygiene.
- Document findings.
- Know referral pathways.

Summary

- Conjunctivitis = common but must be classified.

- Viral > bacterial > allergic.

- Treat supportively or with antibiotics.

- Watch for red flags.