



The Corner

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34. Conjunctivitis: outpatient visit

Doctor: Good morning, Mrs. Thompson. How can I help you?

Mother: Good morning Dr. Lawrence. I'm here with Clara because her eyes are red since yesterday and today when she woke up they were a bit swollen and watery.

Doctor: Has she had any discharge in her eyes?

Mother: No, her eyes are just a little bit teary, she hasn't had a thick discharge like other times.

Doctor: If I recall correctly Clara usually starts with allergic symptoms around this time of the year.

Mother: Yes, that's right.

Doctor: OK. Clara, do your eyes itch?

Clara: No, they don't, but I feel like if I had sand inside when I close my eyes.

Doctor: Alright, has she had a runny nose or sneezes lately?

Mother: Well, she has been mostly coughing, not so much sneezing.

Doctor: Has she had fever? Is anyone else sick at home?

Mother: No, Clara hasn't had fever. Her brother had a cold last week though, and he did have fever for a couple of days.

Doctor: OK Clara, let's take a look at your eyes then. I can see conjunctival injection and tearing, but no discharge, and the tarsal conjunctiva has a "bumpy" appearance which seems like a follicular reaction. You also have enlarged and tender preauricular nodes on both sides.

Clara: What does all that mean?

Doctor: It means you have a viral conjunctivitis. The good news is that it is a self-limited process, which means that it will resolve on its own as your cold gets better. The bad news is that it may worsen in the next couple of days and there is no treatment except lubricating agents such as artificial tears for symptomatic relief. However, you will be totally recovered in two to three weeks.

Mother: I thought she was starting with allergic conjunctivitis again.

Doctor: In this case Clara doesn't have itchy eyes or other allergic symptoms such as sneezing. Instead it seems she has a common cold. Also, the physical examination is more compatible with viral conjunctivitis.

Mother: Thank you very much, doctor. Can there be any complications?

Doctor: She may suffer a secondary bacterial infection. You will notice that because instead of getting better after 3-5 days her eyes will continue to get worse, and pus may appear. In that case, you will have to come back because you will probably need antibiotic ointment or eye drops. That is why it's very important that you avoid touching your eyes, Clara.

Mother: Any other recommendations?

Doctor: Viral conjunctivitis is highly contagious and spreads by direct contact with secretions or contaminated objects, so she should not share handkerchiefs, tissues, towels, linens, or eating utensils.

Mother and Clara: Thank you very much, Doctor Lawrence.

KEY WORDS

Conjunctivitis: conjuntivitis.

Watery: acuoso.

Discharge: secreción.

Teary/tearing (to tear): lloroso/lagrimear.

Allergic symptoms: síntomas alérgicos.

Itch/itchy: picor.

Sand: arena/arenilla.

Sneezes/sneezing (to sneeze): estornudos/estornudar.

Conjunctival injection: inyección conjuntival.

Tarsal conjunctiva: conjuntiva tarsal.

Follicular reaction: reacción folicular.

Preauricular nodes: adenopatías preauriculares.

Self-limited: autolimitado.

Lubricating agents: agentes lubricantes.

Artificial tears: lágrimas artificiales.

Symptomatic relief: alivio sintomático.

Secondary bacterial infection: sobreinfección bacteriana.

Antibiotic ointment: pomada/ungüento antibiótico.

Antibiotic eye drops: colirio antibiótico.

Spreads (to spread): propagarse.



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