

Pink Eye

Hilliard Pediatrics, Inc. - Dr. Tim Teller, MD

Introduction

“Pink eye” is a general name for an irritated or infected eye with a reddish or pink color to the white of the eye (the sclera). Pink eye can be caused by infections, allergies, irritation, or a scratch and other trauma to the eye.

How to Tell Different Kinds of Pink Eye Apart

- **Bacterial conjunctivitis** normally causes the white of the eye to be pink or red, thick and discolored (not just clear and watery) eye drainage, no or minimal eyelid swelling, and no or minimal itching. Often with bacterial conjunctivitis, if the thick and discolored eye drainage is wiped away, the eye will quickly make more drainage (you may find yourself wiping away your child’s drainage every hour or more). Bacterial conjunctivitis can be in one or both eyes, and it is very contagious.
- **Viral conjunctivitis** normally causes the white of the eye to be pink or red, clear and watery to thick and discolored eye drainage, no or minimal eyelid swelling, and no or minimal itching. This can occur with or without a “cold”. If a child does have a “cold” and has a pinkish color to the eye, but the drainage is only there a couple times a day, we are more likely to feel the “pink eye” is due to a “cold” virus and will not need antibiotic drops. Viral conjunctivitis can be in one or both eyes, and it is very contagious.
- **Allergic conjunctivitis** normally causes the white of the eye to be pink or red, thin and watery eye drainage, no or minimal eyelid swelling, and lots of itching. It can occur with other signs of allergies -- sneezing, nasal congestion, and itchy nose – but does not always. Allergic conjunctivitis is often in both eyes, but can be in just one eye if a child touched something (a common example would be an animal if they are allergic to it) and then just touched one eye. Allergic conjunctivitis is not contagious.
- **Conjunctivitis from irritation** often occurs after a specific irritation to the eye, including having a child accidentally rub or touch their eye when they have something on their hands (soap, sunscreen, etc.). Although there can be discharge, the most noticeable change is redness at the white of the eye. This kind of “pink eye” is not contagious.
- **A scratch to the cornea** (top, outer surface of the eye) often will result in pain, a patch of redness, with some tearing, but little or no discolored drainage. Infants and toddlers with a scratched cornea often are in pain and fussy, sometimes without there being an obvious cause until we discover the scratched cornea. We can decide whether a scratch has occurred by using a special liquid (fluorescein) and a special blue light in the office.
- **A peri-orbital cellulitis** is a medical emergency. It involves one eye lid and the area around it, with rapidly (hour by hour) worsening of redness, swelling, and tenderness of the eye lid and surrounding area up to the eyebrow and/or down to the cheekbone. It is a bacterial infection that most commonly occurs in children less than 5 years of age. Children can have a fever, an ear infection, and a reddened white of the eye with thick, discolored eye drainage.
- Another common problem we see is a child with painless pink swelling at one eyelid after an **insect bite**. This generally causes no color change to the white part of the eye and no

Pink Eye

Hilliard Pediatrics, Inc. - Dr. Tim Teller, MD

discharge is present. This painless swelling after an insect bite is not worrisome if the child's vision seems normal, if they have no redness to the white of the eye, if they have no drainage, and if the swelling is not rapidly changing (hour by hour). The area where an insect bite occurred may feel warm.

Treatment

- **Bacterial conjunctivitis** requires treatment with prescription antibacterial eye drops. If the diagnosis is straight-forward, we can prescribe these over the phone without seeing the child in the office for an appointment. Your child is no longer contagious after being treated with the drops for **24 hours**. The drainage from the eye can be gently wiped away with a tissue or warm, wet wash cloth. Encourage your child to not rub at their eye and to wash their hands frequently to keep the infection from spreading from one eye to another and from one child to another.
- **Viral conjunctivitis** requires no special treatment. The child will continue to be contagious for as long as there is redness or drainage from the eye. Antibacterial prescription eye drops will do nothing for a viral conjunctivitis.
- **Allergic conjunctivitis** is often treated with over-the-counter or prescription eye drops that reduce the redness, itching, and tearing caused by the allergies. The drops are used "as needed". In other words, if the allergies are bothering someone eyes or you know your child will be exposed to the thing that triggers their allergies, use the drops according to the drops' schedule. If the allergies are not bothering your child, do not give the drops at that time. If there is a lot of itching, a cool compress can be applied to the eyes to reduce the itching. Children with nasal allergy symptoms who take an allergy medicine by mouth should continue to take this medicine, but the allergy medicines taken by mouth do not often give someone enough relief from the eye symptoms to avoid using the prescription eye drops. The over the counter eye drops we recommend are Zaditor® 1 drop to each eye twice a day.
- **Conjunctivitis from irritation** typically clears quickly on its own. If the eye is bothering your child, *artificial tear eye drops* (such as Tears® Naturale Free over-the-counter drops) can be used as needed according to the schedule on the package. Do *not* use Visine® Redness Reliever Eye Drops for this.
- **For a scratch to the cornea**, if there is a lot of eye-rubbing or eye pain for the child, we will place a soft eye patch on the eye for 1-3 days. To prevent a corneal scratch from becoming infected, we treat the effected eye with prescription antibacterial eye drops. An infected corneal scratch could leave a permanent scar on the cornea, so treatment with the antibiotic drops is very important.
- **A peri-orbital cellulitis** is treated with antibiotics. Often an initial antibiotic injection is giving in the office and then an antibiotic is taken by mouth for another 10 days. We will often want to see a child with peri-orbital cellulitis back in the office for close follow-up.
- **An insect bite** around the eye often gets better by giving the child Benadryl® Allergy Elixir by mouth every 6 hours as needed and applying cold compresses as needed to help with the swelling and itching. A simple way to remember the recommended dose is that children less

Pink Eye

Hilliard Pediatrics, Inc. - Dr. Tim Teller, MD

than 25 pounds receive ½ tsp. (2.5 ml.); for children between 25 and 50 pounds, give 1 tsp. (5 ml.); and for children greater than 50 pounds, give 2 tsp. (10 ml).

- **A note about putting the drops into the eye:** many of the children who need eye drops for pinkeye are toddlers in daycare. Toddlers are a challenging age group for applying the eye drops. You may find other methods helpful, but one method is to sit on the floor with your toddler's head between your legs. You may have to gently spread their eyelids open with your fingers. Approach from the top and place the drop in the eye. This may be a two-adult job!

What To Do When

- If you suspect that your child has a **bacterial conjunctivitis** => call our office during regular office hours to discuss treatment. If it is after hours, please try to call during early evening hours. If it is on a weekend and the office is closed, please call during the day or early evening. It will be quite helpful if you have the name and phone number for the pharmacy available when you call.
- If your child is being treated with antibiotic prescription eye drops and they have **not improved after 3 days** of treatment => call during regular office hours to discuss further treatment.
- If your child is being treated with antibiotic prescription eye drops and they have less drainage but every time you apply the drops, the **eyes look more red** for a short time => this redness is not an uncommon side effect of the antibiotic drops. Continue the prescription eye drops.
- If you suspect that your child has **allergic conjunctivitis** => try the over-the-counter Zaditor® (ketotifen) eye drops 1 drop twice a day as needed. If these do not help after a few days or you have other questions, call our office during regular office hours to discuss treatment.
- If you suspect that your child has a **scratch to their cornea** or a **peri-orbital cellulitis** => call during regular office hours for an appointment for further evaluation or if after hours or on a weekend, take your child to Nationwide Children's Hospital Urgent Care or Emergency Room.