

We help children and families be their healthiest

Blocked Tear Ducts

Tears:

- Are a clear fluid made by the tear glands in the eye. Tears keep the surface of the eye moist and clean.
- Drain through a small opening (punctum) in the inner corner of each eye. The tears then drain down a tube called the tear duct (nasolacrimal duct) into the nose and throat.

What is a blocked tear duct?

A blocked tear duct happens when the flow of tears from the eye down through the tear duct to the nose is blocked. One or both eyes may be affected. This is called a naso-lacrimal duct obstruction (NLDO).

What causes a blocked tear duct?

Blocked tear ducts are usually present at birth (congenital) in about 6 out of 100 babies. Sometimes a blocked tear duct happens later in life (acquired). In most cases, a baby is born with a duct that is too narrow or has extra tissue blocking the duct.

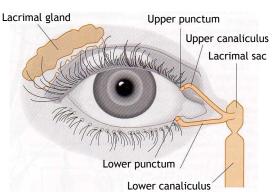
How do I know if my child has a blocked tear duct?

If your child has a blocked tear duct, you will notice that:

- One or both of your child's eyes are always watery
- Your child wakes up in the morning with a crust over the eyelid/eyelashes.
- Your child may often have discharge and a red eye because of infection. Infections are common when tears can't drain properly.

Treatments for blocked tear ducts

There are a few ways to treat blocked tear ducts. Your Ophthalmologist (eye doctor) will explain which one is best for your child.
 Eye Massage 5 times each day (example of right eye) With massage and time, 85% of blocked tear ducts will open on their own. Wash your hands before and after the massage. With your child facing you, place your right thumb in the nasal corner of the eye. Place the four fingers of your right hand on the temple on the left side of your child's head. This will prevent injury to your child's eye. If she moves her head, your hand will follow. Firmly press with your thumb 5 times.
 Antibiotics: eye drops or ointments are sometimes used to clear infection. Place an antibiotic like Polysporin® Eye Ointment on your index finger and wipe across your child's eye lashes 4 times a day. Wash your hands before and after applying antibiotic ointment.
 Surgery: may be needed if your child is at least one year old, and still has a blocked tear duct after several months of massage. Your child will have surgery in the operating room with a general anesthetic. During the surgery, the ophthalmologist: Will gently pass a smooth metal tube into the tear duct and through to the opening in the nose. The surgeon may also flush a sterile fluid through the tear duct to make sure it flows out of your child's nose. May insert a silicone tube (a 'stent') into the tear duct. This may be left in place for several months to stop the tear duct from blocking again. Your child's ophthalmologist will let you know if a tube is needed.



Naso lacrimal duct

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What will happen after the surgery?

After the surgery, your child:

- Will not have a patch over his eye
- May have some lower eyelid swelling
- May feel some mild discomfort.
- May have blood tinged tears or discharge from the nose for a day or two.

Your ophthalmologist will let you know if your child needs eye drops or eye ointment.

What if my child has tubes?

If your child has tubes placed in the tear duct, the Ophthalmologist usually takes them out while your child is awake about 6 months after the surgery. It is normal to see the tube in the inner corner of the eye; you might see a small clear loop. Call our clinic if you notice that the tube is pulled further out of the corner of the eye or out of the nose.

Taking care of your child after surgery

- 1. If your child has pain:
 - Give pain medication. You can give acetaminophen (Tylenol[®] or Tempra[®]), and follow package directions carefully.
 - Apply cold compresses to the lower eyelids and nose during the first day or two after surgery. This works best with older children. You may use frozen peas, ice cubes in a sealed plastic bag or clean face cloth for a few minutes at a time.
- 2. Apply eye drops or ointment if your doctor prescribes these. These medicines can help to reduce swelling and prevent infections.
- 3. Prevent infections! Wash your hands for 15 seconds with soap and water before and after giving eye drops or applying cold compresses.
- 4. Your child can:
 - Go back to school and other activities as soon as she is feeling well enough
 - Have a bath or shower anytime

Clinic Appointment

- \square Your child will have an appointment within the first few weeks after the surgery _
- Your child will not have a follow up appointment. Call us if the tearing continues for more than one month after surgery.
- Dr. Bonn's patients: Your child's next appointment is on the card Dr. Bonn has given to you.

When and how to call us:

If your child has had surgery, call the Ophthalmology resident on-call anytime if you notice:

- Bleeding from the nose that does not stop with pressure.
- Increased discharge from the eye(s)
- The redness or swelling of the eyelid is getting worse (especially if your child has a fever, pain and is not feeling well).

How to reach the Ophthalmology resident on-call:

- 1. Call 613-737-7600
- 2. Press "0" for the operator

3. Ask the operator to page the Ophthalmology resident on-call.

Please don't hang up. It can sometimes take 5-10 minutes for the Ophthalmology resident on-call to reach the operator.

If you can't reach us, please see your family doctor, go to a walk in clinic or come to our Emergency Department.

Ophthalmology Clinic: Monday to Friday, 8:00 am-4:00 pm 613-737-7600 extension 2035

If you have questions about treatment for blocked tear ducts, call the clinic nurse: 613-737-2418

(Monday-Friday 8:00 am-4:00pm)

 Dr. Bonn's patients: Please call Dr. Bonn if you have any concerns.
 Office: 613-729-8600 Cell: 613-761-8260





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