



Konjunktivitis i prevencija

Conjunctivitis and Prevention

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Apstrakt

Konjunktivitis je inflamatorna bolest konjunktiva, uzrokovana različitim agensima. Najčešće ga izazivaju mikroorganizmi, od kojih su najčešći virusi, a posle njih najčešće su bakterije, mikoze ili parazitske infekcije. Čest uzrok crvenila i upale konjunktiva je alergija.

Prema toku razlikujemo: hiperakutne, akutne i hronične teškoće. Prema uzroku su podeljeni u dve velike grupe: infektivne (virusi, bakterije, klamidija, gljivice, paraziti) i neinfektivne (alergije, autoimuna oboljenja, ostalo - prljavština, dim, prašina, šampon, hlor u bazenima).

Prilikom utvrđivanja dijagnoze koriste se sledeće metode: medicinska istorija (anamneza), pregled prednjeg segmenta oka, everzija – okretanje očnog kapka, bris sa kapka, u slučaju sumnje i postojanosti upale – bakterijska kultura (moguće virusna), uzorkovanje krvi, alergijski testovi.

Anamnestički podaci: očni simptomi i znaci (svrab, sekrecija, iritacija, bol, fotofobija, zamagljen vid). Simptomi i znaci koji su potencijalno povezani sa nekim sistemskim bolestima su: (genitourinarna sekrecija, dizurija, disfagija, infekcija gornjeg respiratornog trakta, promene na koži i sluzokoži), alergija, astma, ekzem, upotreba lokalne i sistemске terapije, oftalmološka anamneza (ranije epizode konjunktivitisa i ranije očne operacije), pad imuniteta, sadašnje i prethodne sistemске bolesti, socijalna anamneza (pušenje, zanimanje i hobi, putovanja, seksualna aktivnost).

Prvi pregled: vidna oštrina, inspekcija, koža (znaci rozacee, ekcema, seboreje), abnormalnosti kapaka i adneksa oka (otok, diskoloracija, pozicija, gubitak elastičnosti, ulceracija, noduli, ekhimoze, neoplazme), konjunktiva (tip hiperemije, subkonjunktivilna hemoragija, hemoza, ožiljne promene, simblefaron, tumefakti, sekrecija).

Biomikroskopski pregled: ivice kapaka (inflamacija, ulceracija, sekrecija, noduli ili vezikule, krvavi debris, keratinizacija), trepavice (gubitak trepavica, stvaranje krusta, perut, gnjide, vaši, trihijaza), suzni punktumi i kanalikuli (prominencija, sekrecija), konjunktiva tarzusa i forniksa, bulbarna konjunktiva/limbus (folikuli, edem, noduli, gubitak elastičnosti, papile, ulceracije, ožiljanje, fliktene, hemoragije, strana tela, keratinizacija), rožnjača, prednja komora/dužica (inflamatorna reakcija, sinehije, transiluminacioni defekti), obojavljivanje (konjunktiva i rožnjača).

Dijagnostički testovi: Uzimanje brisa. Kod pacijenata sa SLK indikovano je ispitivanje funkcije štitaste žlezde, ukoliko nemaju dokazanu disfunkciju.

Kontrolni pregledi treba da uključuju sledeće: anamnezu u prethodnom periodu, vidnu oštrinu, biomikroskopski pregled.

Abstract

Conjunctivitis is an inflammatory disease of the conjunctiva caused by various agents. It is most often caused by microorganisms, the most common of which are viruses, followed by bacteria, mycoses, or parasitic infections. A common cause of redness and inflammation of the conjunctiva is allergy.

According to the course, we distinguish hyperacute, acute, and chronic difficulties. According to the cause, they are divided into two large groups: infectious (viruses, bacteria, chlamydia, fungi, parasites) and non-infectious (allergies, autoimmune diseases, other - dirt, smoke, dust, shampoo, chlorine in swimming pools).

When determining the diagnosis, the following methods are used: medical history (anamnesis), examination of the anterior segment of the eye, eversion - turning the eyelid, smear from the eyelid, in case of suspicion and persistence of inflammation - bacteria culture (possibly viral), blood sampling, allergy tests.

Anamnesis data: eye symptoms and signs (itching, discharge, irritation, pain, photophobia, blurred vision). Symptoms and signs potentially associated with some systemic diseases (genitourinary secretion, dysuria, dysphagia, upper respiratory tract infection, skin and mucous membrane changes), allergy, asthma, eczema, use of local and systemic therapy, ophthalmic history (previous episodes of conjunctivitis and previous eye surgeries), decreased immunity, current and previous systemic diseases, social history (smoking, occupation and hobbies, travel, sexual activity).

First examination: visual acuity, inspection, skin (signs of rosacea, eczema, seborrhea), abnormalities of the eyelids and adnexa of the eye (swelling, discoloration, position, loss of elasticity, ulceration, nodules, ecchymoses, neoplasms), conjunctiva (type of hyperemia, subconjunctival hemorrhage, chemosis, scar changes, symblepharon, swellings, secretion)

Biomicroscopic examination: lid margins (inflammation, ulceration, secretion, nodules or vesicles, bloody debris, keratinization), eyelashes (loss of eyelashes, crusting, dandruff, nits, lice, trichiasis), lacrimal punctums and canaliculi (prominence, secretion), conjunctiva tarsus and fornix, bulbar conjunctiva/limbus (follicles, edema, nodules, loss of elasticity, papillae, ulceration, scarring, phlycten, hemorrhages, foreign bodies, keratinization), cornea, anterior chamber/iris (inflammatory reaction, synechiae, transillumination defects), staining (conjunctiva and cornea).

Diagnostic tests: Taking a swab. In patients with SLK, a test of the function of the thyroid gland is indicated if there is no evidence of dysfunction.

Control examinations should involve the following: history in the previous period, visual acuity, and biomicroscopic examination.

Prevencija uključuje: redovno pranje ruku sapunom i vodom; ne dirati oči prljavim rukama; ne koristiti tuđe peškire (svaki član domaćinstva treba da ima svoj peškir za lice); lične kapi, sopstvena šminka; voditi računa o kontaktnim sočivima; koristiti naočare za sunce kada se boravi u prirodi, na suncu, na vetu; dovoljan unos tečnosti; vitamini (uglavnom A) i multi-minerali; koristiti zaštitnu opremu pri rizičnim poslovima; zaražene osobe, posebno deca, treba da ostanu kod kuće, u izolaciji, za vreme trajanja bolesti.

Tokom perioda upale, preporučuje se izbegavanje upotrebe kontaktnih sočiva. U lečenju pomaže kapi za vlaženje oka, veštačke suze i hladne obloge. Za obloge se mogu koristiti crni i zeleni čaj, kamilica, uljane repice, neven.

Pored toga, bitno je i sledeće: čuvati oči i ne naprezati ih; ograničiti gledanje TV-a i gledanje u monitor; napolju treba zaštititi oči naočarama, izbegavati vetar, promaju, klimatizaciju; izbegavati boravak u blizini nadražujućih supstanci. Edukacija pacijenata:

Edukovati zaražene pacijente da bi se smanjilo ili preveniralo širenje zaraznih bolesti u zajednici. Informisati pacijenta koji zahteva ponavljanu kratkotrajnu kortikosteroidnu terapiju o potencijalnim komplikacijama upotrebe kortikosteroida. Upoznati pacijenta sa alergijskim konjunktivitism da češće pranje garderobe i kupanje pre spavanja mogu biti od koristi.

Prevention includes regular hand washing with soap and water, not touching your eyes with dirty hands, and not using other people's towels. Each household member should have their own face towel, personal drops, and own make-up. Take care of contact lenses, use sunglasses when staying in nature, in the sun, in the wind, sufficient fluid intake, vitamins (mainly A) and multi-minerals, and use protective equipment in risky jobs, infected persons, especially children, should stay at home in isolation for the duration of the disease.

During the period of inflammation, it is recommended to avoid using contact lenses. Eye drops, artificial tears, and cold compresses help in the treatment. Black and green tea, chamomile, oilseed rape, calendula can be used for poultices.

In addition, take care of your eyes and do not strain them thus limiting watching TV and looking at the monitor, when you are outside, protect your eyes with glasses, and avoid wind, draught and air conditioning. In the case of irritating substances, avoid being near them.

Patient education: Educate infected patients to reduce or prevent the spread of infectious diseases in the community. Inform the patient who requires repeated short-term corticosteroid therapy about the potential complications of corticosteroid use. Tell the patient with allergic conjunctivitis that washing clothes more often and bathing before going to bed can be beneficial.