

Seeing Clearly

A close-up photograph of a human eye. The pupil is the central focus, and through it, a landscape scene is visible. The scene shows a person walking on a dirt path towards a body of water under a blue sky. The eye's eyelashes and skin are visible around the pupil.

Managing Eye Conditions in General Practice

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Outline

- Common Eye conditions in the community
- What can be managed in the community and what to refer
- Role of Minor Eye Care Service (MECS) and Optometry in community eye care provision
- Role of the Eye Clinic Liaison officer

Red Eye: Possible Diagnosis

- **Conjunctivitis**
- **Episcleritis**
- **Corneal Abrasion**
- **Corneal Keratitis: Herpes simplex / Varicella Zoster**
- **Corneal Ulcer**
- **Iritis/Uveitis**
- **Scleritis**
- **Angle closure glaucoma**
- **Endophthalmitis**

Self-Limiting Red Eye

- Conjunctivitis
- Episcleritis
- Corneal Abrasion
- When to refer:
 - Consider differential diagnosis if prolonged or severe symptoms
- Signs of corneal involvement: Photophobia, Reduced vision, severe symptoms

Viral Keratitis

- Florescence staining is useful diagnostic tool
- Varicella zoster: consider early treatment with oral and topical Aciclovir



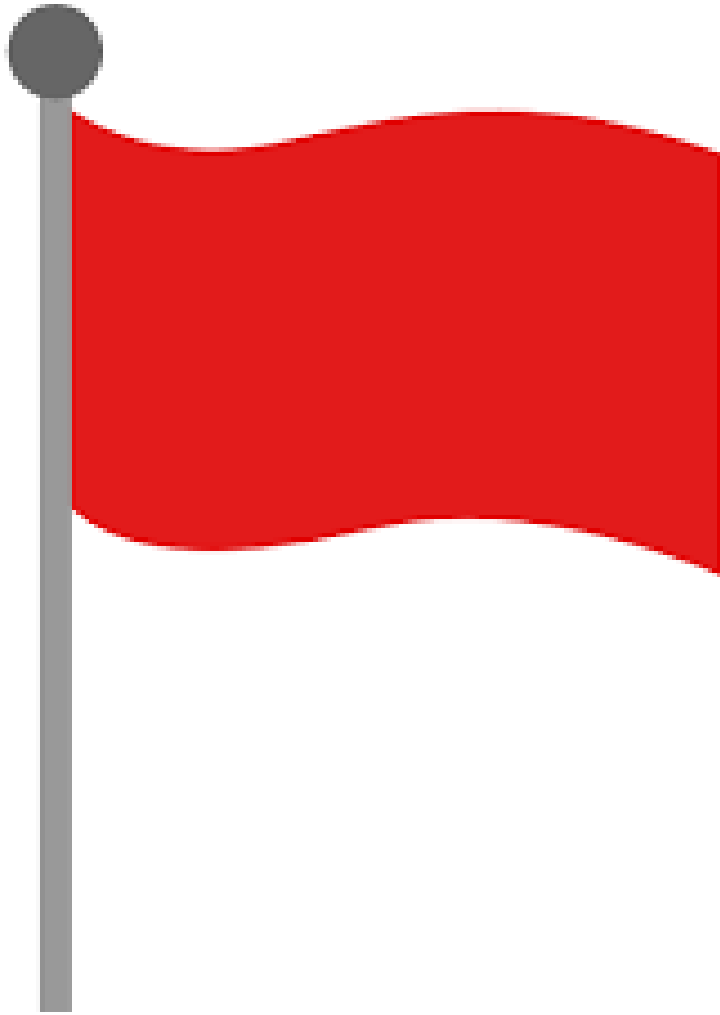
Corneal abrasion v Corneal ulcer



- Fluorescein staining is a good diagnostic tool



Red Eye



- Moderate/Severe Pain
- Photophobia
- Reduced Vision
- Contact lens Wear
- Suspected foreign body/trauma
- Recent intraocular procedure
- Red eye in a newborn

The Dry Red Eye

“I keep getting eye infections”



“I’ve used antibiotics three times but it keeps coming back”

When I use the antibiotics, it gets better but when I stop, the infection comes back”

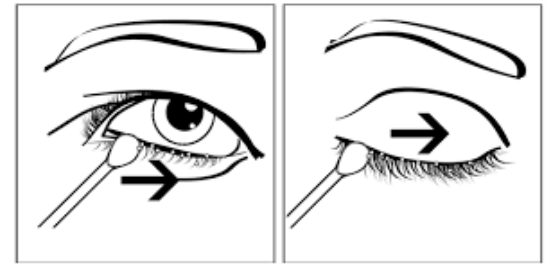


The Dry Red Eye

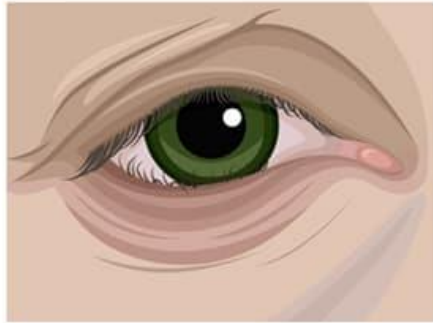
- Chronic dry eyes can lead to chronic ocular surface inflammation
- Vicious cycle that frequently requires topical steroid to break cycle of inflammation
- History often reveals underlying dry eye symptoms
- Look for Blepharitis which is a common cause of dry eyes

Management of Dry Eyes

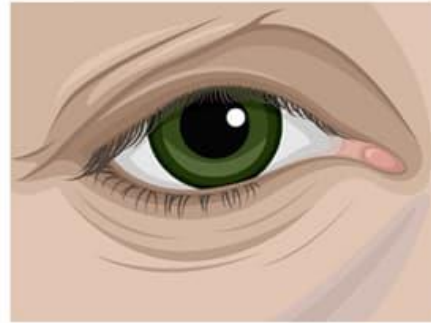
- Treatment: Artificial tears: encourage frequent use. Consider night-time ointment
- Treat Blepharitis
- Lifestyle and environment modification
- Chronic dry eyes can be referred to eye clinic if supportive treatment and artificial tears not sufficiently improving symptoms



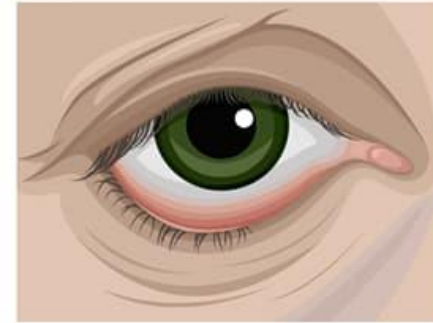
It's the Eyelids!



Entropion



Healthy eye



Ectropion

<https://www.readocs.com/eyelid-surgery/entropion-and-ectropion/>



Punctal Ectropion

Giant cell arteritis (GCA)

- GCA is commonest primary vasculitis in adults
- Can have ocular manifestation
- Managed under Rheumatology with Ophthalmology input
- Can present with a wide range of systemic and ocular symptoms
- Diagnosis can be difficult

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CLASSIFICATION CRITERIA FOR **GIANT CELL ARTERITIS**

CONSIDERATIONS WHEN APPLYING THESE CRITERIA

- These classification criteria should be applied to classify the patient as having giant cell arteritis when a diagnosis of medium-vessel or large-vessel vasculitis has been made
- Alternate diagnoses mimicking vasculitis should be excluded prior to applying the criteria

ABSOLUTE REQUIREMENT

Age \geq 50 years at time of diagnosis

ADDITIONAL CLINICAL CRITERIA

Morning stiffness in shoulders/neck	+2
Sudden visual loss	+3
Jaw or tongue claudication	+2
New temporal headache	+2
Scalp tenderness	+2
Abnormal examination of the temporal artery ¹	+2

LABORATORY, IMAGING, AND BIOPSY CRITERIA

Maximum ESR \geq 50 mm/hour or maximum CRP \geq 10 mg/liter ²	+3
Positive temporal artery biopsy or halo sign on temporal artery ultrasound ³	+5
Bilateral axillary involvement ⁴	+2
FDG-PET activity throughout aorta ⁵	+2

Sum the scores for 10 items, if present. A score of \geq 6 points is needed for the classification of **GIANT CELL ARTERITIS.**



GCA and the Eye

- Commonest eye symptoms: Unilateral loss of vision
- Vision loss can be transient
- Other ocular symptom: diplopia, eye pain, or symptoms from cranial neuropathies

Management of GCA

- Start on High dose steroids if suspected GCA
- Who to refer to first? Rheumatology or Ophthalmology
- If no ocular symptoms, consider Rheumatology referral first
- If ocular symptom, consider Ophthalmology referral first

Floater and Flashing Lights

- Very common symptoms
- Usually due to Posterior vitreous detachment
- Rarely due to retinal tear or retinal detachment
- Ask about
 - New, sudden onset of floaters
 - New and frequent flashes of light
 - “Shadow or curtain” in peripheral vision



Risk factors for Retinal detachment

- High short sighted
- Recently had eye surgery
- Have a past medical or family history of a detached retina
- Previous eye injury

When to refer?

- Patients need retinal examination to exclude retinal tears or retinal detachment
- Longer duration of symptoms and no risk factors can be referred for review by optician or routinely in eye clinic
- High suspicion of retinal detachment or risk factors should be referred to ophthalmic triage

Barnsley Minor Eye Care Service (MECS)

PRACTICE NAME	ADDRESS	CONTACT NUMBER
Auckland Opticians Ltd	Ivy Cottage, Back Lane, Penistone, Sheffield, S36 6AB	01226 766 996
Auckland Opticians Ltd	111a Houghton Road, Thurnscoe, Nr. Rotherham, S63 0NG	01709 893 317
Auckland Opticians Ltd	14-16 Barnsley Road, Goldthorpe, Nr. Rotherham, S63 9NF	01709 891 991
Berry's Opticians	54 Market Street, Barnsley S70 1SN	01226 203 074
C.A.Raison Opticians	46 Cheapside, Barnsley, S70 1RU	01226 731 292
Martyn Kemp Opticians	6 Harry Brearley House Fox Valley way Stocksbridge, Sheffield, S36 2AE	01142 882 287
Morton J R (Wakefield) Ltd	38 Church Street, Darton, Barnsley, S75 5HG	01226 385 498
Norwood & Perrin Opticians	8-10 Eldon Arcade, Barnsley, S70 2JP	01226 206 033
Parkhurst Opticians	4 High Street, Goldthorpe, Rotherham, S63 8LR	01709 894 479
Parkhurst Opticians	1 Lower Dolcliffe Road, Mexborough, Doncaster, S64 9NU	01709 582 315
Premier Eyecare	5 King Street, Holyland, Barnsley, S74 9JU	01226 742 158
Sadler Opticians	102 Midland Road, Barnsley, S71 4QT	01226 722 238
Scrivens Ltd	13 Market Street, Barnsley, S70 1SL	01226 295 293
Scrivens Ltd	7 High Street, Penistone, Sheffield, S30 6BR	01226 762 344
Specsavers Barnsley	14 Queen St, Barnsley, S70 1SJ	01226 771 455
Specsavers Opticians	16-18 York Square, Mexborough, Doncaster, S64 9DG	01709 573 010
Specsavers South Elmsall	10 Barnsley Rd, South Elmsall, WF9 2SE	01977 648 182
iVision Opticians	6-8 Peel Square, Barnsley, S70 1YA	01226 731 271
iVision Opticians	77a High Street, Wombwell, Barnsley, S73 8HS	01226 731 271
Olive Opticians	15 Ecclesfield Road, Chapelton, Sheffield, S35 1TD	01142 467 764
Vision Express @ Tesco	Wombwell Lane, Barnsley, S70 3NS	01226 107 161
Vision express - Tesco Extra	Abbeylea Drive, Sheffield, S7 2QB	01144 784 088
Vision Express Ltd	41-43 Fargate, Sheffield, S1 2HD	01142 780 838
Vision Express Ltd	57 High Street, Meadowhall centre, Sheffield, S9 1EN	01142 568 866
Vision Express Ltd	3 The Arcade, meadowhall Shopping, Sheffield, S9 1EH	01142 568 899



Minor Eye Problems?

If you have a recent problem with your eyes –
such as sore eyes, red eyes
or visual disturbance –
you can be assessed and treated by our
local Minor Eye Conditions Service.

This is a free NHS service available from a
number of local opticians. See inside for more
information of what conditions are covered and
how to book an appointment.

What is a Minor Eye Conditions Service (MECS)?

Conditions that can be seen under the service include:

- Red eye or eyelids
- Dry eye, or gritty and uncomfortable eyes
- Irritation and inflammation of the eye
- Significant recent sticky discharge from the eye or watery eye
- Recently occurring flashes or floaters
- Ingrowing eyelashes
- Recent and sudden loss of vision
- Foreign body in the eye

Please note, this is not a sight test

Also, if you have a major eye condition that is being regularly monitored by your optometrist or hospital eye service, this will not be covered by this service; for example, cataracts, diabetic retinopathy or glaucoma.

Where should I go?

Registered optometry practices (opticians) offering the service are listed on the back of this leaflet. An appointment will normally be required, so telephone first. Appointments are available during normal working hours and some practices offer appointment at weekends. Not all practices have an optometrist available every day, but if they don't, they will be able to find you an alternative appointment nearby.

Who is this service for?

If you are registered with a local GP you can use this free service. It is for people of all ages – adults and children. Children under 16 years must be accompanied at their appointment by an adult.

How do I book an appointment with the service?

To make an appointment, call one of the opticians. You will be asked some questions about your symptoms in order to assess how quickly you need to be seen by the service, which will be within 24 hours in urgent cases and within a few days for routine appointments.

Please take your glasses and a list of your current medication with you to the appointment. The optometrist may put drops in your eyes to enlarge your pupils in order to get a better view inside your eyes. You should not drive until the effects of these drops have worn off, which may take a few hours.

If your condition is more serious, the optometrist will book you an urgent appointment at a hospital eye clinic. If you need a routine appointment with a hospital, the optometrist will organise this for you.

You may also be advised to make an appointment with your GP if your eye condition is related to your general health.





Eye Clinic Liaison Officer

- Part of Royal National Institute for the Blind (RNIB)
- Provide emotional and practical support to people with a sight condition and their families and carers
- Support for patient with new diagnosis or those who have been living with visual loss
- Barnsley ECLO: Elaine Meehan

Email address: eclo.barnsley@nhs.net

Thank you
for
listening!

