2.3 Ocular trauma

Plan

Categories of ocular injuries

Ocular trauma strategy: Avoid-Treat-Prevent

Evaluation

General

Ocular

Investigations

Common open globe injuries

Subconjunctival hemorrhage

Foreign body

Abrasion

Rupture/Laceration

Intra-ocular foreign body

Common close globe injuries

Black eye

Hyphema

Concussion

Macular edema

Blowout fracture

Common chemical injuries

Alkali

Acid

Thermal, Electrical & Radiation injury

All types of trauma cause decrease vision by

- Hemorrhage
- Edema
- Damage
- Scarring

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Open-globe injury

Laceration = Full-thickness wound of the eye wall, caused by a sharp object Lamellar laceration = Partial thickness wound of the eye wall Abrasion/superficial Laceration = Superficial partial wound of the eye wall Rupture = Full-thickness wound of the eye wall, caused by a blunt object

Penetrating injury = Only entrance wound is present

Perforating injury = Both an entrance and exit wound are present

Close globe injury
Ocular contusion= Anterior segment blunt: damage at or at distance

Ocular concussion = Injury with blunt object

Frenkel syndrome = absolute term for traumatic iridoplegia

Blow out fracture = Orbit wall fracture with blunt trauma

Chemical injury (Alkali/Acid) Thermal injury Electrical injury Radiation injury

Strategy to deal with trauma

Ocular trauma: Avoid-Treat-Prevent



- Protective glasses
- Protective face shield
- Protective cloths/gloves
- Take care of children
- Treat immediately
- Treat IOP
- Microbial superinfection
- Keratoplasy
- Multidisciplinary approach
- Microbial superinfection
- Treat IOP
- Adhesions
- Scarring (Entropion, Ectropion & Symblepharon)
- Keratoplasty

EVALUATION: General

- History
 - Penetrating VS blunt VS Chemical injury
 - Record Initial Visual acuity if possible
- Orbital Structures
 - Palpate Orbital margins
 - Check extra ocular movements ----- blowout fracture.
- Adnexa
 - Eyelids ----- Subcutaneous Emphysema
 - Lacrimal structures

EVALUATION: Ocular

Anterior Segment

- Conjunctiva ----- Subconjuctival hemorrhage
- Cornea ----- Clarity
- Anterior Chamber ----- Hyphema
- Iris ---- Distortion
- Lens ---- Cataract, subluxation, dislocation.

Posterior Segment

- Vitreous hemorrhage
- Retina ----- Detachment
- Optic Nerve ----- Neuropathy, avulsion.

Evaluation: Investigation

- Investigations for general anesthesia
 - Most need general anesthesia
- Radiology
 - X-ray, CT, MRI
- Ocular
 - B-scan
 - OCT if needed & possible

Common open globe injuries & management

CATEGORIES OF OCULAR INJURIES Open-globe injury Sub-conjunctival hemorrhage Laceration Subconjunctival Hige Noticed by someone else or Lamellar laceration Foreign body wakeup in morning with red eye Abrasion/superficial Rupture Cause: straining, trauma Penetrating injury Rupture/Laceration No pain Perforating injury Resolve in 3-4 weeks Intra ocular FB Close globe injury Prophylactic topical antibiotics Ocular contusion Ocular concussion Frenkel syndrome Blow out fracture Chemical injury Thermal injúry´ Electrical injury Radiation injury

CATEGORIES OF OCULAR INJURIES Open-globe injury Foreign body Laceration Subconjunctival Hge Lamellar laceration Anesthetize cornea Foreign body Abrasion/superficial Remove FB Abrasion Rupture Prophylactic antibiotic Penetrating injury Rupture/Laceration Follow-up for rust Perforating injury Intra ocular FB Close globe injury Ocular contusion Ocular concussion Frenkel syndrome Blow out fracture Chemical injury Thermal injury Electrical injury Radiation injury

CATEGORIES OF OCULAR INJURIES Open-globe injury Abrasion Laceration Subconjunctival Hge Lamellar laceration Heals in 48 hours Foreign body Abrasion/superficial Patch eye Rupture Abrasion Better put bandage contact Penetrating injury Rupture/Laceration Perforating injury Prophylactic topical antibiotics Intra ocular FB Close globe injury Ocular contusion Ocular concussion Frenkel syndrome Blow out fracture Chemical injury Thermal injury Electrical injury Radiation injury



Mechanical injury

Open-globe injury | Common OGIS

Laceration

Lamellar laceration Abrasion/superficial

Rupture Penetrating injury

Perforating injury

Close globe injury Ocular contusion Ocular concussion Frenkel syndrome

Blow out fracture

Chemical injury Thermal injury Electrical injury Radiation injury

Subconjunctival Hge

Rupture/Laceration

Intra ocular FB

Foreign body

- Refer to hospital
- Primary repair

IOFB

Followed by secondary foreign



Common close globe injuries: General

Pathogenesis:

Blunt trauma or close globe injury results in anterior posterior compression of globe with expansion at equator associated with increase intraocular pressure



Common open globe injuries & management

CATEGORIES OF OCULAR INJURIES Open-globe injury Black eye Laceration Lamellar laceration Make sure not medico legal Abrasion/superficial laceration Look for other injuries Rupture Resolves with cold compresses Penetrating injury Prophylactic treatment Perforating injury Close globe injury Ocular contusion Black eye Ocular concussion Hyphema Frenkel syndrome concussion Blow out fracture Macular edema Chemical in Blow out fracture Thermal injū **Electrical injury** Radiation injury

CATEGORIES OF OCULAR INJURIES Open-globe injury **Mechanical injur** Hyphema Laceration Lamellar laceration Admit for rest & monitoring Abrasion/superficial laceration Bed rest at home Rupture Rest is important to prevent Penetrating injury secondary bleed Perforating injury Watch IOP Close globe injury Usually resolves in 3-7 days Black eye Ocular contusion Topical antibiotics & steroids Ocular concussion Hyphema If persists then wash anterior Frenkel syndrome concussion chamber Blow out fracture Macular edema Chemical in Blow out fracture Thermal inju Electrical injury Radiation injury

Mechanical injury

Open-globe injury

Laceration Lamellar laceration Abrasion/superficial laceration Rupture

Black eye

Hyphema

concussion

Macular edema

Penetrating injury Perforating injury

Close globe injury Ocular contusion Ocular concussion

Frenkel syndrome Blow out fracture

Chemical in Thermal inju Blow out fracture Electrical injury

Radiation injury

Concussion

- Can cause damage to ant part of eye
- Conservative treatment to stabilize condition
- Treatment according to pathology

CATEGORIES OF OCULAR INJURIES

Mechanical injury

Open-globe injury

Laceration Lamellar laceration

Abrasion/superficial laceration

Black eye

Hyphema

concussion

Macular edema

Rupture

Penetrating injury Perforating injury

Close globe injury Ocular contusion

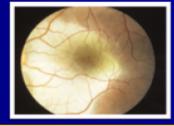
Ocular concussion Frenkel syndrome

Blow out fracture Chemical in <u>Thermal injú</u>

Blow out fracture Electrical injury Radiation injury

Macular edema (Commotio retina)

- OCT to document and see progression
- NSAIDs for 6 weeks



Open-globe injury

Laceration Lamellar laceration Abrasion/superficial laceration

Black eye

Hyphema

concussion

Penetrating injury Perforating injury

Close globe injury Ocular contusion Ocular concussion

Frenkel syndrome Blow out fracture

Macular edema Chemical in Thermal inju How out Industrial Electrical injury

Radiation injury

Blow out fracture

- Look for double vision
- Hess chart if needed
- Surgery if inferior oblique muscle trapped in fracture and causing double vision



Common chemical injuries & management

