



Diagnosis and Treatment of Conjunctivitis

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DESCRIPTION

Conjunctivitis is characterized by inflammation and lump of the conjunctival tissues, accompanied by engorgement of the blood vessels, optical discharge, and pain. Numerous subjects are affected with conjunctivitis worldwide, and it's one of the most frequent reasons for office visits to general medical and ophthalmology conventions. Further than 80% of all acute cases of conjunctivitis are reported to be diagnosed by non-ophthalmologists including internists, family drug physicians, and pediatricians. This imposes a great profitable burden to the healthcare system and occupies a great proportion of the office visits in numerous medical specialties. It's estimated that the cost of treating bacterial conjunctivitis is \$857 million annually in the United States alone [1].

There are several ways to classify conjunctivitis, it may be classified based on etiology, regularity, inflexibility, and extend of involvement of the girding towel. The etiology of conjunctivitis may be contagious or non-infectious. Viral conjunctivitis followed by bacterial conjunctivitis is the most common cause of contagious conjunctivitis, while antipathetic and poison-convincing conjunctivitis are among the most common non-infectious etiologies. In terms of regularity, conjunctivitis may be divided into acute with rapid-fire onset and duration of four weeks or lower, subacute, and habitual with duration longer than four weeks [2]. Likewise, conjunctivitis may be labeled as severe when the affected individualities are extremely characteristic and there's a cornucopia of mucopurulent discharge. Conjunctivitis may be associated with the involvement of the girding towel similar as the eyelid perimeters and cornea in blepharo conjunctivitis and viral kerato conjunctivitis, independently.

Conjunctival injection or "red eye" is a participated donation for numerous ophthalmic conditions, and it accounts for over to 1 of all primary care office visits. The clinicians, whether ophthalmologist or not, must be apprehensive that "red eye" may be the presenting sign for serious eye conditions similar as uveitis, keratitis, or scleritis, or it may be secondary to further benign conditions that are limited just to the conjunctival towel

(e.g., conjunctivitis or subconjunctival hemorrhage). Traditionally, it was believed that further dangerous ophthalmic diseases are associated with disturbances in vision, disabling pain, and photophobia. Still, in a recent large meta-analysis, anisocoria and mild photophobia were significantly associated with "serious eye conditions", the presence of these two signs could discover 59 of cases of "serious eye conditions", including anterior uveitis and keratitis [3].

Some of the clinical signs and symptoms that are used to help diagnose contagious conjunctivitis include the following eye discharge, conjunctival injection, presence of red eye, eyelashes being stuck together in the morning, grit of the eye, eyelid or conjunctival edema, and history of contact with individualities with conjunctivitis[4].

Antipathetic conjunctivitis may be underdiagnosed and undertreated. It's presented with itching, chemosis, and redness in the absence of any significant corneal involvement. The degree of conjunctival lump is frequently out of proportion to conjunctival hyperemia. The main findings in Vernal Kerato Conjunctivitis (VKC) are the presence of giant papillae in the superior tarsal conjunctiva accompanied by severe itching, while the presence of conjunctival scar and anterior subcapsular cataract supports the opinion of Atopic Kerato Conjunctivitis (AKC) [5].

CONCLUSION

It can constitute a unique clinical incarnation or can be associated with other symptoms appearing within the 1-week period. Thus, in cases of acute conjunctivitis, it's important to perform a SARS-CoV-2 RT-PCR test, for an early discovery of infection. Due to the high transmissibility through small dribblers reaching the conjunctiva, the use of gloves, eye spectacles, and face securities should be largely be encouraged and made obligatory in medical units, where the exposure rates are immensely high. Mild conjunctivitis manifesting as conjunctival traffic is common and is one of the major optical instantiations in COVID-19 positive patients indeed with milder diseases.

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