

EYE INFECTION WITH PUS, BACTERIAL



BASIC INFORMATION

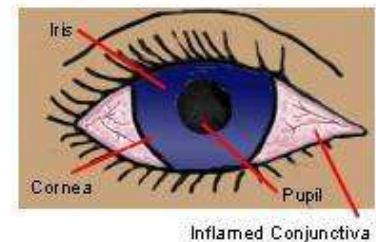
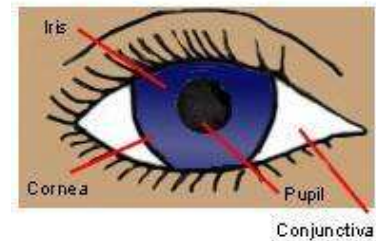
Also called "bacterial conjunctivitis", "runny eyes", or "mattery eyes"
Note: A small amount of cream-colored mucus in the inner corner of the eyes after sleeping is normal.

FREQUENT SIGNS AND SYMPTOMS

- Yellow discharge in the eye
- Eyelids stuck together with pus, especially after naps
- Dried eye discharge on the upper cheek
- The sclera may or may not have some redness or pinkness
- Eyelids are usually puffy due to irritation from the infection

CAUSES

Eye infections with pus are caused by various bacteria and can be a complication of a cold. Red eyes without a yellow discharge, however, are more common and are due to a virus.



EXPECTED COURSE

With proper treatment, the yellow discharge should clear up in 3 days. The red eyes (which are due to the cold) may persist for several days.



DIAGNOSIS & TREATMENT GENERAL MEASURES

Cleaning the Eye. Before putting in any medicines, remove all the pus from the eye with warm water and wet cotton balls. Unless this is done, the medicine will not have a chance to work.

Antibiotic Eye Drops or Ointments. Bacterial conjunctivitis must be treated with an antibiotic eye medicine. Putting eye drops or ointment in the eyes of younger children can be a real battle. It is most easily done with two people. One person can hold the child still while the other person opens the eyelids with one hand and puts in the medicine with the other. One person can do it alone if s/he sits on the floor holding the child's head (face up) between the knees to free both hands to put in the medication.

In case of **prescribed antibiotic eye drops**, apply medicine according to the prescription while your child is awake. Do this by gently pulling down on the lower lid and placing the drops there. As soon as the eye drops have been put in the eyes, have your child close them for 2 minutes so the eye drops will stay inside. If it is difficult to separate your child's eyelids, put the eye drops over the inner corner of the eye while s/he is lying down. As your child opens the eye and blinks, the eye drops will flow in. Continue until two mornings in a row have passed without any pus in the eye(s).

In case of **prescribed antibiotic eye ointment**, apply medicine according to the prescription while your child is awake. Eye ointments remain in the eyes longer than eye drops and hence need to be applied less frequently. Separate the eyelids and put in a ribbon of ointment from one corner to the other. If it is very difficult to separate your child's eyelids, put the ointment on the lid margins. As it melts from body heat, it will flow onto the eyeball and give equally good results. Continue until two mornings in a row have passed without any pus in the eye(s).

Contact Lenses. Children with contact lenses need to switch to glasses temporarily, in order to prevent damage to the cornea.

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Contagiousness. The pus from the eyes can cause eye infections in other people if their eyes get in contact with the infection. It is very important for the sick child to use his/her own washcloth and towel. Your child should be encouraged not to touch or rub the eyes, because it can make the infection last longer, and it puts many germs on the fingers. Your child's hands should also be washed often to prevent spreading the infection. After using eye drops for 24 hours and if the pus is minimal, children can return to day care or school.



NOTIFY OUR OFFICE IF

- The outer eyelids become very red or swollen.
- The vision becomes blurred.
- Your child starts acting very sick.
- The infection isn't cleared up after 3 days of treatment.
- Your child develops an earache.
- You have any other questions or concerns, call Canadian Medical Care (+420) 235 360 133, CMC in The Park (+420) 272 913 593, or after hours (+420) 724 300 303.

FURTHER INFORMATION

- www.kidshealth.org
- www.netdoctor.co.uk

SOURCE

- Moore, Stephen. Griffith's Instructions for Patients, 7th Edition. Elsevier: 2005.

Updated and reviewed by: E. Jona, April 2006