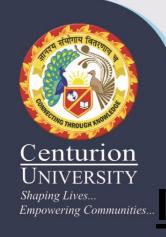


OCULAR DISEASE

SWELLINGS OF THE LACRIMAL GLAND

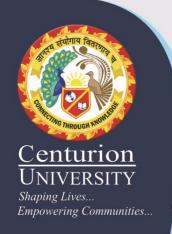


DACRYOADENITIS

Empowering Communities... Acute dacryoadenitis:

Etiology.

- It may develop as a primary inflammation of the gland or secondary to some local or systemic infection.
- Dacryoadenitis secondary to local infections occurs in trauma, erysipelas of the face, conjunctivitis (especially gonococcal and staphylococcal) and orbital cellulitis.



Continue...

Dacryoadenitis secondary to systemic infections is associated with mumps, influenza, infectious mononucleosis and measles.



Clinical picture

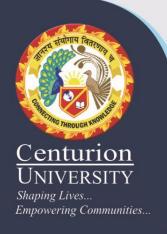
- painful swelling in the lateral part of the upper lid.
- The lid becomes red and swollen with a typical S-shaped curve of its margin
- Acute orbital dacryoadenitis produces some painful proptosis in which the eyeball moves down and in.



A patient with bilateral dacryoadenitis: note, s-shaped curve of upper eyelid.

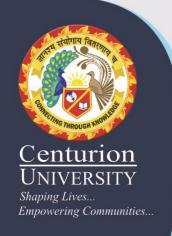




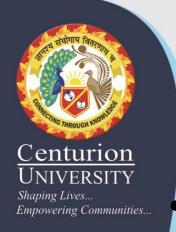


Treatment

- It consists of a course of appropriate systemic antibiotic, analgesic and antiinflammatory drugs along with hot fomentation.
- When pus is formed, incision and drainage should be carried out.

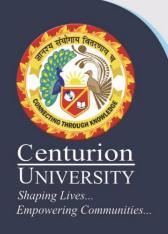


II. Chronic dacryoadenitis



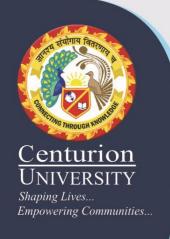
Introduction

It is characterised by engorgement and simple hypertrophy of the gland.



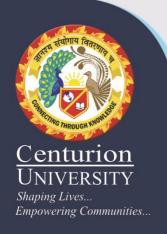
Etiology

- (i) as sequelae to acute inflammation;
- (ii) in association with chronic inflammations of conjunctiva and;
- (iii) due to systemic diseases such as tuberculosis, syphilis and sarcoidosis.



Clinical features.

- (i) a painless swelling in upper and outer part of lid associated with ptosis;
- (ii) eyeball may be displaced down and in; and
- (iii) diplopia may occur in up and out gaze.
- On palpation, a firm lobulated mobile mass may be felt under the upper and outer rim of the orbit.



Differential diagnosis

 from other causes of lacrimal gland swellings is best made after fine needle aspiration biopsy or incisional biopsy.