

# How To Examine and Diagnose a Tearing patient

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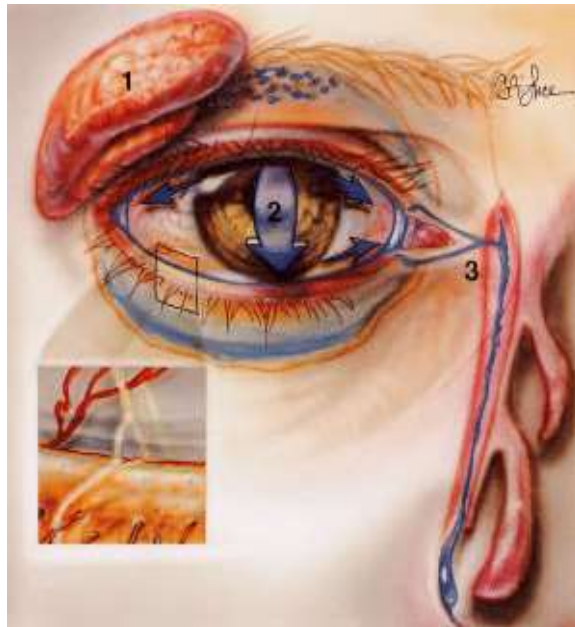
*Ain Shams University*



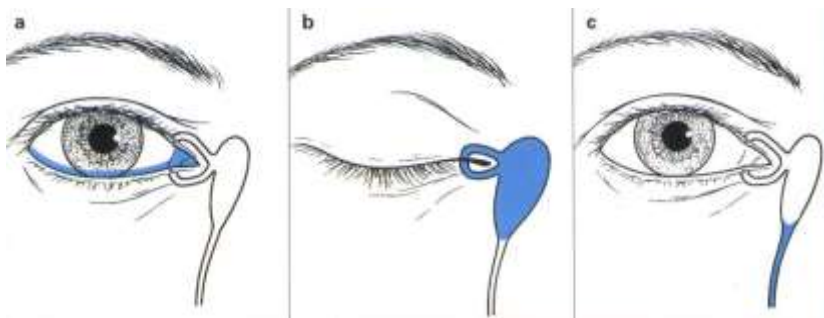
## What is Epiphora

- Overflow of tears due to a defect in the drainage mechanism : (functional or mechanical obstruction)
- D.D. : LACRIMATION ( Excess production of tears)
- Patients present with tearing in both conditions.





## TEAR FLOW

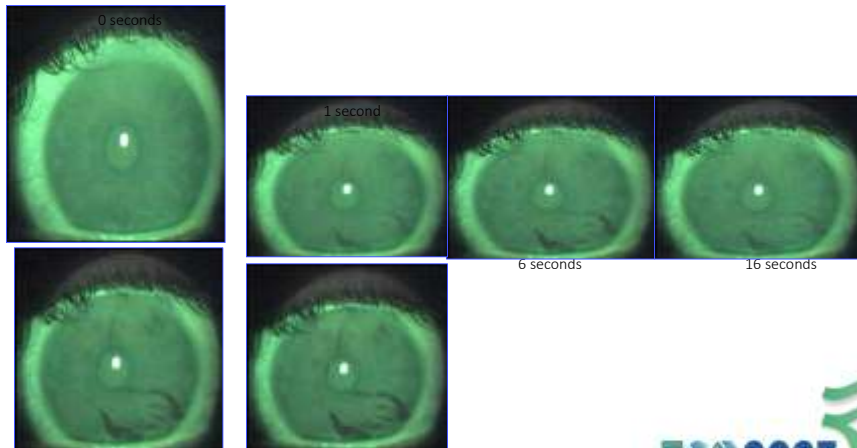


# EIPHORA CAUSES

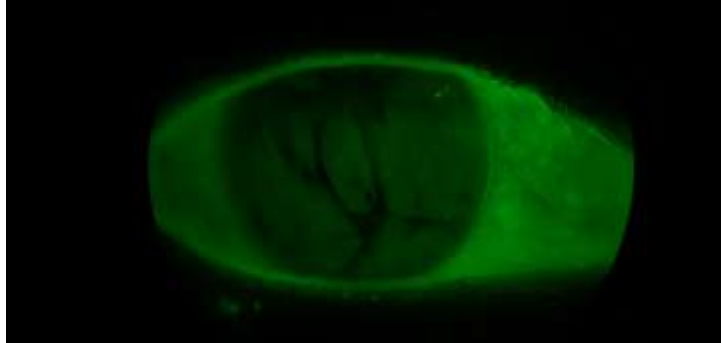
- ANATOMICAL
- PHYSIOLOGICAL
- PUNCTAL 35%
- CANALICULAR 14.8%
- NASOLACRIMAL 24%
- NASAL DISEASE 4%
- LACRIMAL PUMP 11%



BUT



BUT



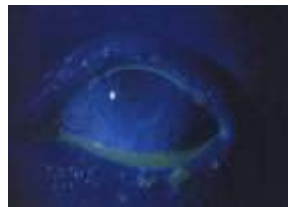
## How to identify

- Obstruction or overproduction

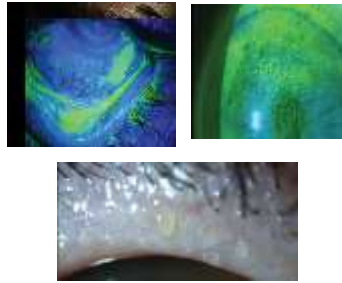
- Dye disappearance test

Wait 5 minutes in young

In older pt's wait 10 minutes



## OVERPRODUCTION



- DECREASED BLINKING
- DRY EYE
- Mechanical irritation
- KERATITIS
- ANT UVEITIS
- Surgical complications

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## Obstruction



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## Lat canthus



## Lid margin



## LID INTEGRITY



## MPL laxity



## Conjunctiva

- Conjunctivochalasis
- Conj. Granuloma



## Examine the Punctum

- Punctum :  
POSITION  
color
- Punctal eversion
- Pouting punctum

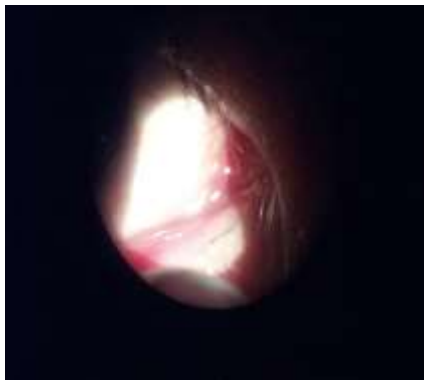




## Punctal problems

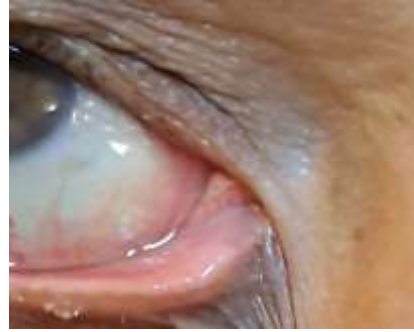


## PUNCTAL ANOMALIES



# Stenosis

Diameter less than 0.3mm  
\* Inability to introduce in the punctum a 26 g  
Cannula



# Stenosis

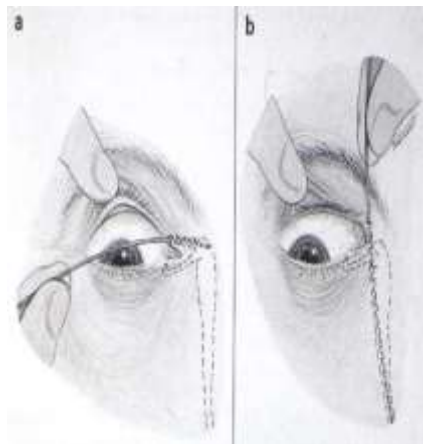
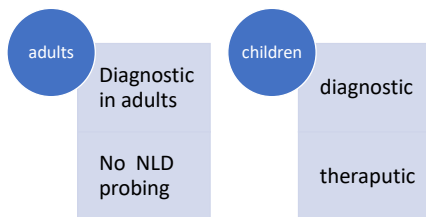


# Canalicular Pathology



# Probing and Irrigation

- Proximal obstruction
- Distal Obstruction



## Probing and irrigation

- Avoid violent dilatation
- 00 probes or thicker
- Stretch the lid laterally
- Blunt ended cannula
- Viscoelastic
- Side port
- Never thinner than 23 gauge

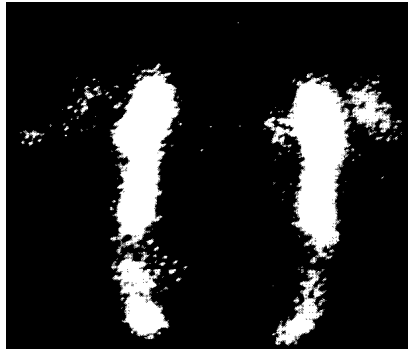
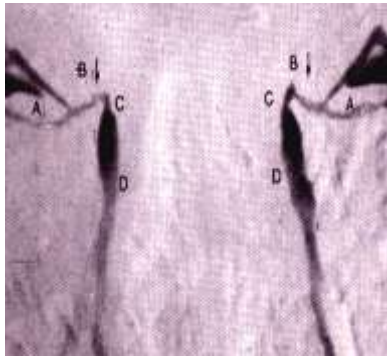


## All previous tests are -ve

- Functional obstruction is diagnosed and this can be confirmed by investigations



## DCG & Scintillography



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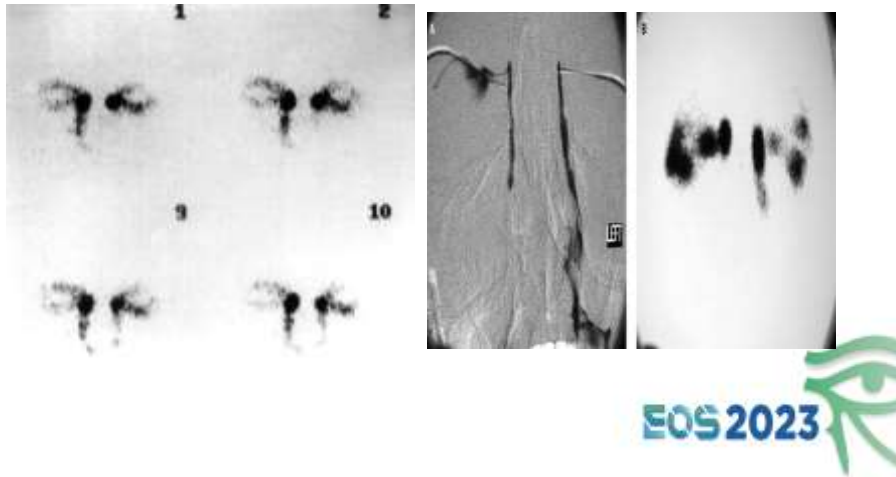
## DCG



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# scintillography



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INTERNATIONAL CONGRESS OF THE  
EGYPTIAN OPHTHALMOLOGICAL SOCIETY  
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# Thank you