

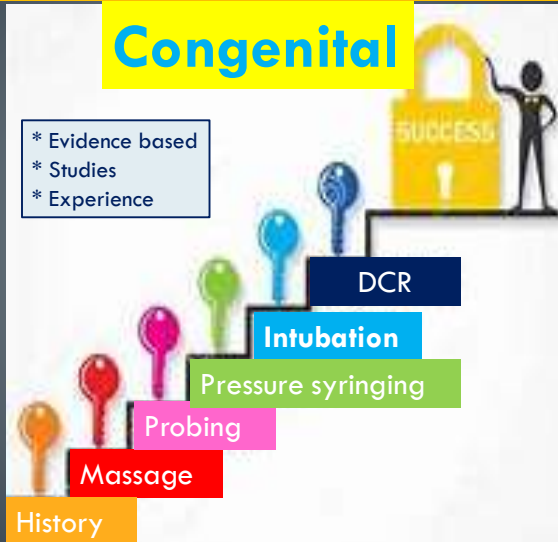
# Debates in Management of CNLDO

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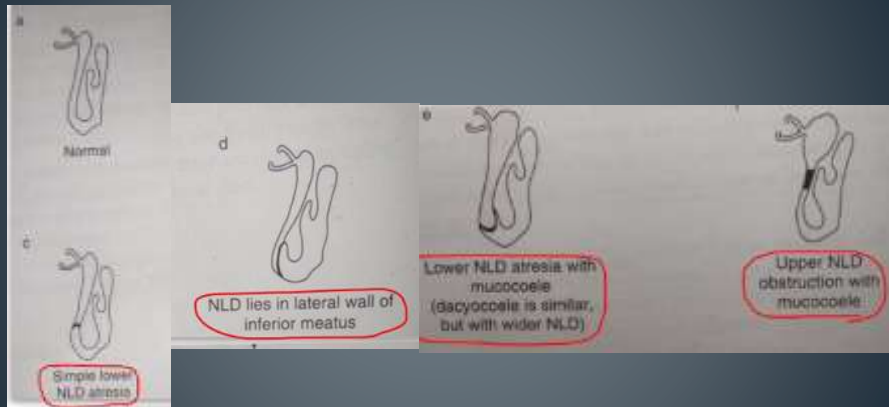
## Management Steps

### Congenital

- \* Evidence based
- \* Studies
- \* Experience



## Sites of CNLDO



## Own Practice ...Experience

I'd to thank my colleagues who shared in this questionnaire

- |                          |                       |
|--------------------------|-----------------------|
| * Dr Osama shalaby       | Tanta University      |
| * Dr Hesham Ibrahim      | Alexandria University |
| * Dr Maher Assem         | Military Hospital     |
| * Dr Rania Abdelsalam    | Cairo University      |
| * Dr Ayman AbdElGhaffar  | Mansoura University   |
| * Dr. Mohamed El-Metaher | El-Azhar University   |

To diagnose CNLDO, you depend on detailed history alone or confirmatory tests also

History alone ..... 30%

History plus Tests FDDT,... 70%

Is lacrimal massage has role in your practice?  
Frequency?

Yes ..... 100%

5 times /day → 20 times/day

For 9-12 months

Notes:

- \* Stress on Learning parents how to make massage ?
- \* Sac evacuation
- \* Hydrostatic pressure \* psychological

## Antibiotic Use ?

Empirical 100% ..

Tobramycin 60%

Quinolones 40%

*Fucithalmic eye gel*

Notes : culture and sensitivity in resistant cases

## At what age do you recommend probing?

6-9 months ..... 20%

1 year ..... 80%

Notes: \* 1<sup>st</sup> time to see the patient whatever the age  
 \* previous probing not by me  
 \* Earlier persistent profuse discharge  
 \* V. early (days) Amniocele

Are you agree that success of simple probing declines with age? From your practice

6 M ..... 12 M ..... 18 M ..... 24M

Yes 60%

No 40%

Notes : less after age of 2 years

Are you agree that success of simple probing less with bilateral cases!!

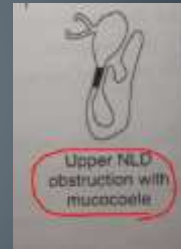
Agree 20%

Not agree 80%

Are you agree that success of simple probing less with proximal lacrimal duct obstruction than distal obstructions



Yes 100%



Do you do early probing under anesthesia or in office? Before 12 month

Anesthesia 90%

In clinic ....

**Do you infracture inferior turbinate routinely with probing?**

No ..... 100 %

*Notes : examine inferior turbinate space (tight -narrow)*

**If probing failed do you repeat it again ?  
When ? Or shift to intubation directly?**

Repeat Probing 70%

1-3 month interval

Intubation 30%

## Indications for Lacrimal intubation

→ Two Large Questionnaire Studies

UK	-----	64.5%	After 2 ineffective probing
Latin America	-----	69.5%	intubate at any age
		2.5%	child after 1 year
		28%	do not intubate

\* Initial Therapy  
\*\* Failed Probing

\* A national Survey of the management of congenital NLDO in U.K. *Pivvanachandra Net al. J ped Ophthalmol Strabismus 2010*

\*\* Management of congenital NLDO latin american study *Schellini SA et al Ophthal Plast Reconstr Surg. 2013*

### Do you have specific indications to start with intubation ?

\* Always start with intubation  
\* after age of 3 years

NO Anatomical abnormalities



**If patient has craniofacial anomalies or Down syndrome , what to recommend trial of probing or intubation from start?**

Probing 80 %  
20 % Intubation first

*Notes: CT , ENT examination*

**Do you ask for nasal endoscopy in failed probing?**

Yes 10 %

No 90%

**Do you use nasal endoscopy in tube retrieval ?**

No 100%

**Do you routinely use nasal endoscopy in your practice?**

No 100%

**How long do you leave silicone tube in intubation procedure?**

2 weeks to 2 months  
4 months  
6 months

**Did you try other techniques in intubation as monocanalicular , Masterka,.. Or always use bicanalicular intubation?**

No 90%  
If present 10%

## When do you do DCR?

2 years 30%  
3 years 50%  
8 years 10%

## Is there indications for early DCR you faced in your practice?

- \*Acute dacryocystitis
- \*If probing showed anatomical abnormalities
- \*Failed intubation
- \*Children from remote area not able to be followed up
- \*Acquired obstruction

Which approach you prefer external or endoscopic DCR?

External 100%

Do you add MMC routinely in pediatric DCR operations routinely?

No 100%

*Notes : Always in recurrent cases*



Thank You