

EYE-Q

by R. Thomas Barowsky, MD

Baby's Watery Eyes

Q: My son was born three weeks premature. He is now three weeks old and has started to have a lot of mattering along his eyelids and his eyes tend to water down his cheeks. His doctor says that he probably has a blocked tear duct. He assured me that it is not serious unless it gets infected and that when he is a little older it should be unblocked with surgery if it doesn't clear up by itself. How long should I wait?

A: I agree with your doctor that your son probably has a blocked tear duct. This means that the channel that normally carries tears from the eye to the nose, called the nasolacrimal duct (NLD), has a membrane blocking it. This membrane is present during the normal development of the duct and usually is gone by birth or very shortly thereafter. Since your son was born early, the development of the tear duct system probably was not yet complete and the membrane has not yet disappeared. NLD obstruction is a very common condition and is seen in approximately 6% of newborns. Most cases (70%) usually have a blockage on either the right or left but 30% can have both sides blocked. In nearly 90% of cases the blockage will open by itself by the time the child is one year old.

Typically this blockage shows up as a watery eye with tears running down the face. When he cries, he will most likely have a runny nose only on the unblocked side of his nose. The symptoms usually start at about one month of age and there is usually no swelling or redness to the eyelid unless the soggy tissues become infected.

Although the blockage is present at birth it is not unusual for it to not show up until 3-4 weeks after birth because there is usually a delay in the start of tear production for the first several weeks. With complete blockage the only way tears can exit the eye is by running down the face. Because the tears are responsible for keeping the surface of the eye moist and clean there is a risk that infection could develop in the wet tissues surrounding the duct. This would show up as red swollen tissue that is tender to the touch and usually has a yellowish discharge.

There are several opinions about how to take care of a blocked tear duct. All would agree that this is not an emergency that must be addressed immediately. Typically, the use of massage over the tear duct is recommended. Some will instruct the parent to massage upwards to clear the duct of tears and debris. Many of us however, recommend massaging downward to attempt to force the membrane open and get rid of the blockage. There are some who recommend no massage at all. Whichever way you decide to do it, see your eye care professional for proper technique to avoid injury to this delicate tissue.

If the blockage has not cleared by the time your son is 9-10 months old, it is time to see an ophthalmologist (eye surgeon) to have the blockage opened. The surgery is very

straightforward and safe. It is done under general anesthesia in the outpatient surgery center of your local hospital and is successful more than 90% of the time. Less than 10% of children undergoing this procedure require a second procedure. In addition, a very small percentage of children will require tubes to be placed if the duct is too seriously blocked.

The important things to remember are to call your child's medical doctor or eye doctor as soon as possible if the eyelid becomes very red or swollen or if a red lump appears at the inner corner of the lower eyelid. Inform your doctor's office if you notice yellow discharge, if his eye is still watering at 10 months of age or if you have other concerns or questions.

If you have questions about your eye health e-mail Dr. Barowsky at doctom@tdkj.com and we'll try to answer your questions here at Eye-Q.