

Allergic Conjunctivitis

WHAT IS ALLERGIC CONJUNCTIVITIS?

Allergic conjunctivitis is a common eye problem that affects more than 20% of people. It is a reaction of the outer lining of the eyeball (conjunctiva) to things in the environment to which a person is allergic (allergens). Dust, pollen, animal dander, and sometimes even medications can all be allergens. When the eyes are in contact with these allergens, the eyes get red, inflamed, watery, itchy or swollen. Although these symptoms can look like the signs of an infection, allergic conjunctivitis is not an infection and is not contagious.

WHAT CAUSES ALLERGIC CONJUNCTIVITIS?

As noted above, allergic conjunctivitis is caused by contact with something to which a person may be sensitive or allergic to (allergens). Spring, summer and fall allergies tend to be caused by trees weed, grass, and flower pollen. Some people can have allergies all year round due to other household allergens, including dust, mold and animal dander/hair/fur. Some children may have an underlying medical problem making them more at risk for an allergic eye condition.

WHAT ARE SOME COMMON SYMPTOMS OF ALLERGIC CONJUNCTIVITIS?

Symptoms of allergic conjunctivitis may vary from person to person. They can be very mild or very severe. Itching is the most common symptom; eye allergy is unlikely to be present if itching is not present. Other symptoms may include stinging, tearing, and burning. The conjunctiva is usually pink and/or bloodshot [See Figure 1]. The white area immediately around the colored part of the eyes can also swell, causing tiny bumps visible on the surface of the eye. Eyelid skin can also be affected, becoming thick, swollen, itchy, or red [See Figure 2]. Children may frequently rub or roll their eyes if they have allergies. They may even tightly squeeze or blink frequently to help with the itchiness. Symptoms are often worse in the spring and/or summer months, but may stick around throughout the year.





Fig. 1: A pink or bloodshot conjunctiva with itching can be a sign of allergic conjunctivitis.



Figure 2. Swelling and redness of one or both eyelids may accompany allergic conjunctivitis.

IS ALLERGY TESTING NECESSARY TO FIND OUT WHAT IS CAUSING THE ALLERGIC REACTION?

A diagnosis of allergic conjunctivitis is made by history and examination. Although allergy testing may help pinpoint the specific allergens, it is usually not necessary since the types of allergens that usually cause conjunctivitis are very common, like grass, weed, and tree pollens. Eye drop treatments are



the same no matter what allergen is causing the reaction. Although the most common allergens are often hard to avoid, we have some tips to help with allergic conjunctivitis (see below).

HOW DO YOU TREAT ALLERGIC CONJUNCTIVITIS?

Allergen avoidance is the first line of treatment for allergic conjunctivitis. In the case of pollen allergies, symptoms are often made worse by outdoor activities. Wearing glasses or goggles outdoors can limit contact with allergens. Frequent washing of pillowcases and mattress covers as well as vacuuming the carpeting in the child's room help remove allergens from the child's surroundings. Regular washing the hair and face can help remove these allergens from the surface of the eyes, hair, and skin. Using artificial tear drops to rinse the eye and remove allergens from the eye can help with symptoms and help calm down the eye inflammation. These drops can provide even more relief when used cold (refrigerated) instead of at room temperature. It is also important to avoid rubbing the eyes, as this can make allergic conjunctivitis worse.

WHAT MEDICATION(S) ARE AVAILABLE TO TREAT ALLERGIC CONJUNCT IVITIS?

Both prescription and over-the-counter allergy eye drops can treat allergic conjunctivitis. Most of the easily available allergy eye drops work best when used daily for at least a few weeks, and it may take up to a week to get full symptom relief. Some eye drops can be used only on an as needed basis. Allergy eye drops may work better for some than pill or liquid medications as eye drops do not cause any drowsiness or changes in appetite. However, pill or liquid medications may be more helpful if allergies cause a lot of eyelid swelling or affect more than just the eyes. Please speak with your ophthalmologist if you have questions about allergy medications.

WHAT OPTIONS ARE AVAILABLE IF ANTI-ALLERGY EYE DROPS ARE NOT HELPING?

Given the different types of over-the-counter eye drops, sometimes what works well for one person may not work as well for another person. You may



need to try different types of eye drops before you find one that works for your child. If there are still allergic conjunctivitis symptoms even after trying different kinds of allergy eye drops, adding a short-term liquid or pill allergy medication by mouth may help relieve symptoms. Pills and liquid medications by mouth may also a good treatment for children who don't do well eye drops, or who have other allergy symptoms like a runny nose.

ARE STEROID EYE DROPS OKAY FOR CHILDREN?

In some cases, steroid eye drops may be needed along with allergy eye drops if the allergic reaction is very severe. Steroid use needs to be monitored closely by your child's ophthalmologist and used only as directed to prevent serious eye problems (see below).

Why can't steroid drops be used all the time? Use of steroid drops for a long time or at a large amount can cause serious vision problems, including glaucoma, cataracts and eye infections (keratitis). A child on steroid drops needs to be monitored for these side effects. Only ophthalmologists who can monitor for side effects should prescribe steroids for allergic conjunctivitis. Talk with your child's ophthalmologist if you have questions about steroid drops.

PROGNOSIS

Most children with allergic conjunctivitis do not lose vision. However, problems can occur related to certain types of severe eye allergies, too much eye rubbing, eye infections, or steroid use. In general, allergic conjunctivitis does well with treatment.

WHAT IS VERNAL CONJUNCTIVITIS?

Vernal conjunctivitis is a severe type of seasonal allergic conjunctivitis that is often seen in areas of the world where the weather is warm and dry. It is also more common in young boys. Often, patients with vernal conjunctivitis also have asthma or eczema. Symptoms typically occur throughout the year, but are worse in spring (vernal means spring in Latin) and summer time. Symptoms can be so bad that children need to be treated with steroid eye drops in addition to allergy eye drops. Large bumps or papillae on the conjunctiva are a classic sign of vernal conjunctivitis [See Figure 2]. Vernal



conjunctivitis is more difficult to treat than other types of allergic conjunctivitis, and may need special immune based medications such as cyclosporine drops to control the eye inflammation and prevent other eye problems. However, most patients eventually do grow out of this problem.



Fig. 2: Large conjunctival papillae on the underside of the upper eyelid of a patient wi th vernal conjunctivitis.

For more information on allergic conjunctivitis and vernal conjunctivitis see: https://eyewiki.org/Allergic_Conjunctivitis
https://eyewiki.aao.org/Vernal_Keratoconjunctivitis