

## 'Tis the Season for Eye Allergies

John D. Conklin Jr., M.D.

As many people are realizing this time of year, the human eye is highly sensitive and vulnerable to airborne allergens and other irritating particles. Examples of the offending agents include pollen, pet hair or dander, mold, dust, medicines, cigarette smoke, perfume and pollutants like diesel exhaust. Once such substances come into contact with the eye's surface, histamine may be released from mast cells that are highly concentrated in the eye. The ensuing cascade of chemical reactions results in a variety of signs and symptoms referred to as allergic conjunctivitis.

These include redness and swelling of the eye, itching of the eye and lids, and excessive watering of the eyes with both eyes usually involved. It is important to distinguish such features from those associated with an eye infection where one or both eyes are affected. Typical signs and symptoms of infectious conjunctivitis are burning, bright light sensitivity, purulent discharge, and "mattering" of the lids. Therapy for allergic conjunctivitis is different from that for infectious conjunctivitis, and delay of proper treatment can have serious complications.

Management of allergic conjunctivitis appears simple – avoid the offending allergens. But this is easier said than done since the triggers are often airborne. Contact lens wearers can develop allergies to their lenses. This means either the patient must stop contact lens wear, reduce wear time, or use disposable contact lenses. In children, it's essential to prevent the rubbing of eyes with their hands and promote frequent hand washing.

For relief of symptoms, various medications (i.e. eye drops or ointments) are available. Nonprescription topical agents like decongestants constrict the eye's small blood vessels to reduce redness while antihistamines relieve ocular itching and swelling. However, such over-the counter (OTC) products have potential for abuse which can lead to "rebound effect" of increased swelling and redness, as well as dry eye and/or glaucoma. Also, the ensuing vicious cycle can mask other problems like a more severe conjunctivitis underlying the problem the patient thinks he is treating.

Therefore, the simplest, safest and most cost effective intervention is frequent application of OTC "tear substitutes" that are preferably preservative free so as to lessen ocular irritation. This approach works in two ways, by washing away allergens and lubricating the eye to prevent dryness and redness. Chilling the artificial tear preparation provides comfort to the inflamed eye. Additional therapeutic measures consist of application of cool compresses to the eye lids for twenty minutes and oral OTC antihistamines (e.g. diphenhydramine) to reduce itching and non-steroidal anti-inflammatory drugs (e.g. ibuprofen) to decrease inflammation and swelling.

If the condition persists, consultation with an ophthalmologist (eye M.D.) is in order. Then, other means of therapy are considered such as stronger topical prescription drugs.

Dual-action topical agents such as Elestat®, Patanol® or Optivar® act as antihistamines and mast cell stabilizers to provide relief. Highly potent topical steroid preparations are reserved as a last resort if other measures have failed. Because of the potential ocular side effects of topical steroids, their use must be closely supervised by an eye M.D. In unresponsive cases where the upper respiratory tract is also involved, an allergist's assistance may be indicated for possible vaccine therapy.

While allergic conjunctivitis can be a nuisance, prevention is key to minimizing its impact. Compilation of an "allergy diary" can aid in pre-emptive therapy, especially in contact lens wearers. Education on proper hygiene and behavior modification can lessen exposure to allergens and other irritating agents. So, don't lose hope and above all, don't let eye allergies spin out of control.

John D. Conklin, M.D. is an Associate Professor of Comprehensive Ophthalmology at the University Of Kentucky Department Of Ophthalmology in Lexington, Kentucky. He is Director of the University of Kentucky Refractive Surgery Service and specializes in state of the art cataract surgery. For further information, you may reach Dr. Conklin at (859) 257-2020 or 323-6752 or by e-mail at [jdconk@uky.edu](mailto:jdconk@uky.edu)