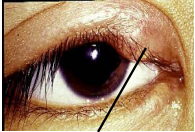


**Flashes and floaters** – The sudden onset of flashing lights, floating spots or a veil covering the vision in one eye should be reported to our office as soon as possible. Flashes and/or floaters may be benign, but may also be a warning sign for a retinal detachment or retinal tear.

### **Eyelid Problems**

**Styes** – An acute swelling of one eyelid with an associated firm bump underlying the swelling is commonly called a sty. There are actually three separate conditions—hordeolum, chalazion and preseptal cellulitis—that may appear as a sty. Hordeolum and chalazion are not emergency condi-



*Stye* tions, but preseptal cellulitis can be serious. If you develop dramatic swelling of the lid that is warm and painful to touch, or you develop a fever, contact our office immediately. Otherwise, use warm compresses as often as possible and make an appointment for evaluation.

**Allergic dermatitis** – Contact with some chemical agents may induce an allergic reaction of the skin around the eyes. The symptoms include redness, swelling and itching. Over-the-counter anti-histamines and cold (ice) compresses are often helpful to relieve symptoms.

**Insect bite** – Bites from spiders, ants or other insects will cause symptoms similar to chemical allergic dermatitis. Redness, swelling and itching are common with occasional pain or stinging. Follow the same recommendations as for allergic dermatitis; although a topical antibiotic is sometimes warranted to reduce the chances of infection through the opening in the skin caused by the bite.

**Shingles/Cold sores** – Two different herpes viruses cause sores that may ap-



*Shingles* appear on the eyelids. Shingles is caused by the herpes zoster virus and is related to chicken pox, while cold sores are a manifestation of the herpes simplex virus. When shingles strikes, a number of sores develop on one side of the forehead (typically), down to the upper eyelid, whereas cold sores usually have fewer lesions located only on the eyelids, often with a red eye. Either condition must be evaluated as soon as possible.

**DRS. NABERHAUS, LOCKE, LEON,  
BOYLE & BURNS**

**OPTOMETRIC PHYSICIANS**

**TELEPHONE:  
MELBOURNE – 725-4755  
SUNTREE - 752-0100**



# Eye Urgencies and Emergencies

**BREVARD  
VISION  
CARE**

DRS. NABERHAUS, LOCKE,  
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The health of your eyes and the care of your vision is of paramount importance to us. Our goal is to provide eye health care as well as vision correction in the form of glasses or contact lenses. During office hours, our staff have been well-trained to triage eye health problems, and one of our doctors is always on call to handle emergencies when the office is closed. The following paragraphs outline some commonly encountered eye conditions, but this pamphlet is not comprehensive and should not be used in lieu of consultation with one of our doctors. Please do not hesitate to contact our office should you have questions about your medical eye health.

## Red Eyes



**Contact lens related** – Contact lens related red eyes may be very serious and should always be treated with respect. Remove your contact lenses, use lubricating drops if needed, and contact our office if your eye does not improve within a few hours.

**Chemical burn** – Immediately flush your eyes with eyewash or tap water for at least 20 minutes. Remove your contact lenses, if applicable. Do not instill any eye drops. Write down the name of the offending agent and contact our office after rinsing the eyes.

**Corneal abrasion** – If you suspect you have abraded your cornea with a foreign object such as a fingernail or plant matter, contact the office as soon as possible. Do not instill any drops or attempt to patch your eye, but you may keep it closed for comfort.

**Foreign body** – Small foreign bodies such as metal shavings or sawdust may become embedded in the cornea, conjunctiva or sclera. If the object was high velocity (e.g. from grinding metal or hammering), do not attempt to remove it, as it may have penetrated the eye. You may attempt to rinse out a foreign body with an eyewash or fresh water, but do not use cotton swabs or any sharp objects. Call our office if



*Subconjunctival hemorrhage*

you are unable to remove the object.  
**Sub-conjunctival hemorrhage** – Occasionally, a bright red spot will appear on the white of the eye, often without any discernable symptoms. This is known as a sub-conjunctival hemorrhage which results from a broken blood vessel. These are usually benign, and often occur for no apparent reason. When there is a causative factor, it is usually related to blood pressure, or problems with blood clotting, or as a result of trauma. Feel free to contact our office if you develop a sub-conjunctival hemorrhage or have any questions concerning this condition.

## Visual Changes

**Sudden loss of vision** – Whether transient or permanent, a sudden loss of vision in one or both eyes warrants further evaluation. It is important to note the duration of the visual loss and if it occurs in one eye or on one side of the vision in both eyes. Cover each eye and note what you see. A transient loss of vision in both eyes simultaneously may be a warning sign of stroke, a precursor to a migraine headache or an indicator of poor blood flow in the brain among other causes. A transient loss of vision strictly in one eye may be a sign of compromised blood flow to that eye, an impending migraine, or an intraocular event. These symptoms warrant a prompt call to our office as soon as possible!

**Double vision**– The sudden onset of seeing two objects when you know there should be one is never normal. If double vision persists, it necessitates an emergency call to our office or a trip to the emergency room. It is important to note whether the double objects are side by side or up and down. The causes of double vision include vascular diseases such as diabetes and hypertension, other diseases such as thyroid dysfunction, Myasthenia Gravis or Multiple Sclerosis or other conditions including aneurysm, tumor or head injury.

