

RED EYE

Common Causes, Warning Signs & When to Seek Urgent Assessment

Red eye is a common presentation that may be due to a minor, self-limiting condition or a more serious problem requiring urgent assessment.



EDGBASTON EYE CLINIC
Safe, Efficient & Patient Centred Care

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5★ RATED ON GOOGLE



EXPERT CARE



ADVANCED TECHNOLOGY



SAFE, EFFECTIVE TREATMENTS



PERSONALISED APPROACH



SHORT WAITING TIMES & FLEXIBLE APPOINTMENTS

1 CAUSES & COMMON DIAGNOSES

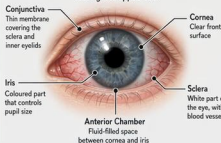
- Conjunctivitis (viral, bacterial or allergic)
- Dry eye disease / blepharitis
- Corneal abrasion or foreign body
- Contact lens-related keratitis
- Anterior uveitis (iritis)
- Episcleritis or scleritis
- Subconjunctival haemorrhage
- Acute angle-closure glaucoma
- Less commonly, trauma or chemical injury



A red eye may be benign, but pain, photophobia or reduced vision should never be ignored.

2 WHAT HAPPENS?

Inflammation, infection, dryness or raised pressure affect the front of the eye and its blood vessels, causing it to appear red.



3 COMMON SYMPTOMS

- Redness
- Irritation / grittiness
- Watery or sticky discharge
- Itching
- Pain or aching
- Light sensitivity (photophobia)
- Blurred vision
- Foreign body sensation
- Contact lens intolerance



Pain, photophobia or blurred vision may indicate a more serious cause.

4 CLINICAL CLUES



Conjunctivitis



Corneal abrasion / fluorescein staining



Anterior uveitis



Subconjunctival haemorrhage

- Diffuse conjunctival injection in conjunctivitis
- Ciliary flush may suggest uveitis or keratitis
- Discharge may occur with conjunctivitis
- Corneal staining suggests epithelial damage
- Small pupil and photophobia may occur in uveitis
- Severe tenderness may suggest scleritis

5 ASSESSMENT AT EDGBASTON EYE CLINIC

- ✓ Full symptom and visual assessment
- ✓ Keeler digital slit lamp examination
- ✓ Fluorescein staining when indicated
- ✓ Intraocular pressure measurement
- ✓ Optos Daytona ultra-widefield imaging if clinically indicated
- ✓ OCT imaging if required
- ✓ Urgent referral pathway for sight-threatening disease



Advanced diagnostics help identify the cause quickly and protect your sight.

6 MANAGEMENT / TREATMENT

A Mild / common causes:

- Lubricants for dry eye irritation
- Lid hygiene for blepharitis
- Allergy treatment where appropriate
- Advice on hygiene and symptom control

B Infective / inflammatory causes:

- Treatment tailored to diagnosis
- Antibiotic drops if bacterial infection is suspected
- Steroid treatment only when clinically appropriate and supervised
- Cycloplegic treatment may be used in anterior uveitis

C Emergency causes:

- Corneal ulcer / keratitis, acute glaucoma, scleritis or severe uveitis require urgent specialist care.

Management depends on the cause – the priority is ruling out sight-threatening disease.

7 WHEN TO SEEK URGENT HELP

- Painful red eye
- Red eye with blurred or reduced vision
- Light sensitivity
- Contact lens wearer with a painful red eye
- Trauma or chemical splash
- New halos, headache, nausea or vomiting
- A fixed mid-dilated pupil or severe eye pain
- Symptoms not improving or rapidly worsening



Seek urgent same-day eye assessment if any of the above symptoms occur.

KEY POINTS



Most red eyes are treatable, but some require urgent assessment.



Pain or reduced vision are important warning signs.



Contact lens-related red eye must be assessed promptly.



Early diagnosis helps protect sight and comfort.



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