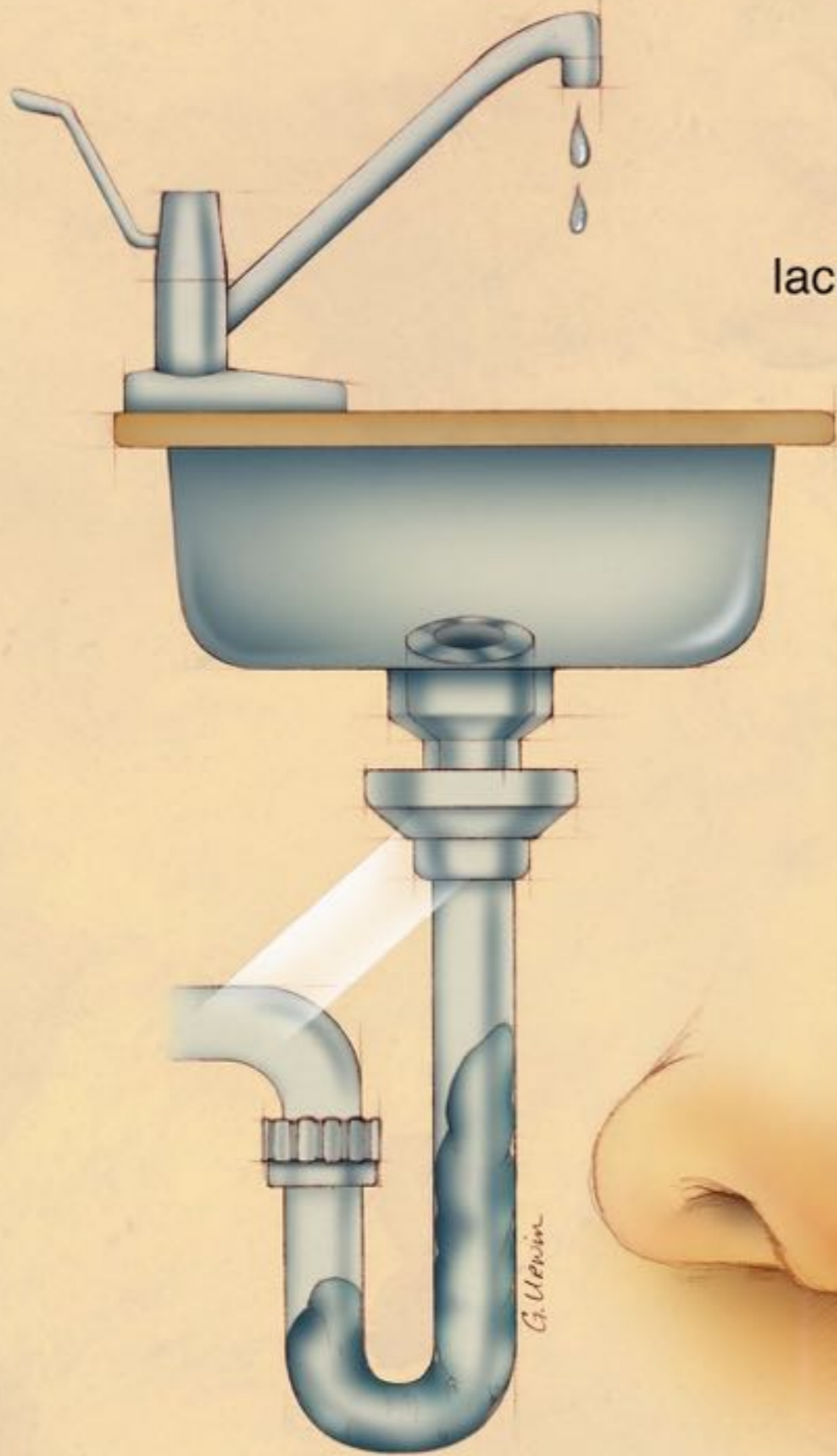


# **Tearing Evaluation and Treatment**

Samuel A. Gallo MD

Evaluating a patient with epiphora can be complex. A sink and faucet make an apt analogy



lacrimal sac

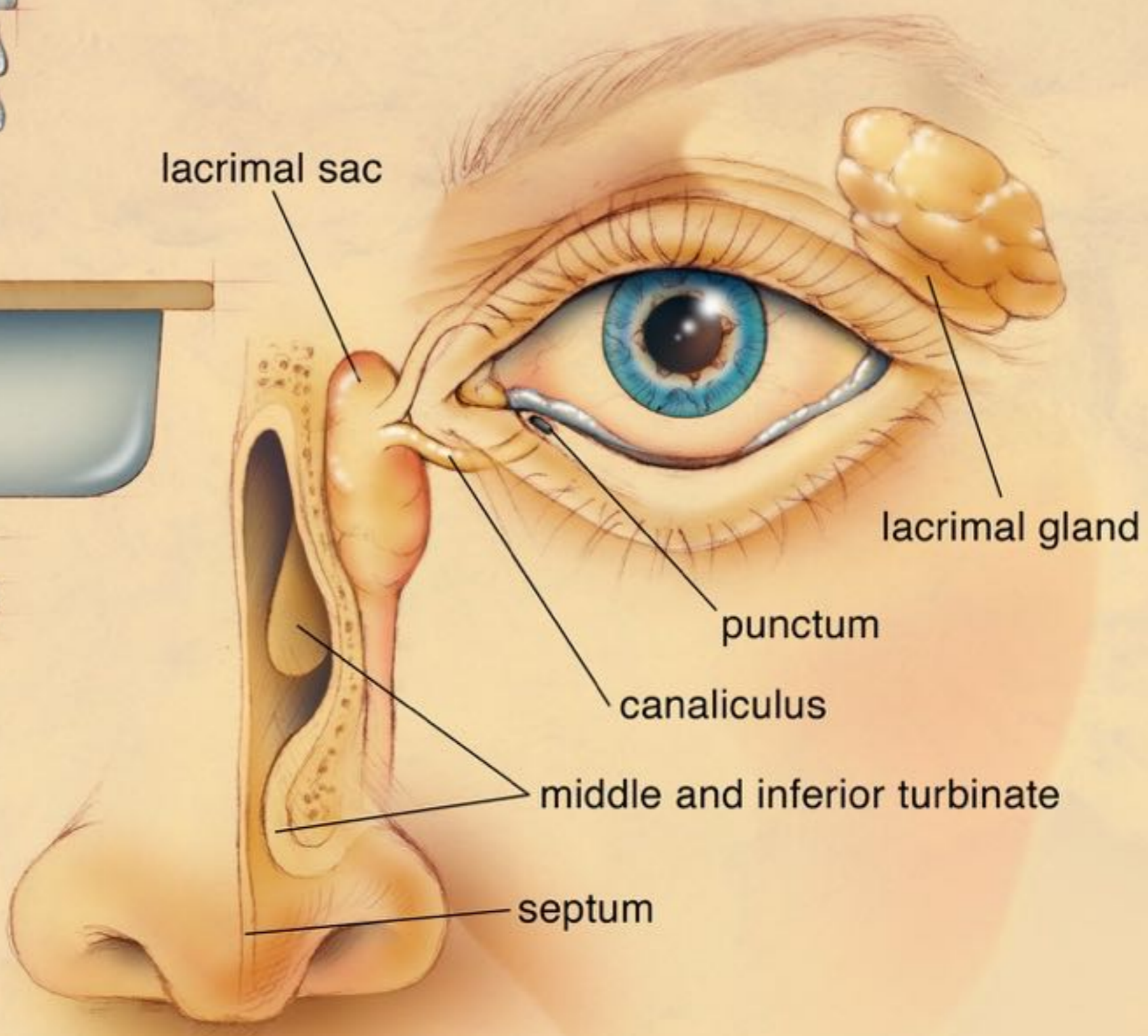
lacrimal gland

punctum

canaliculus

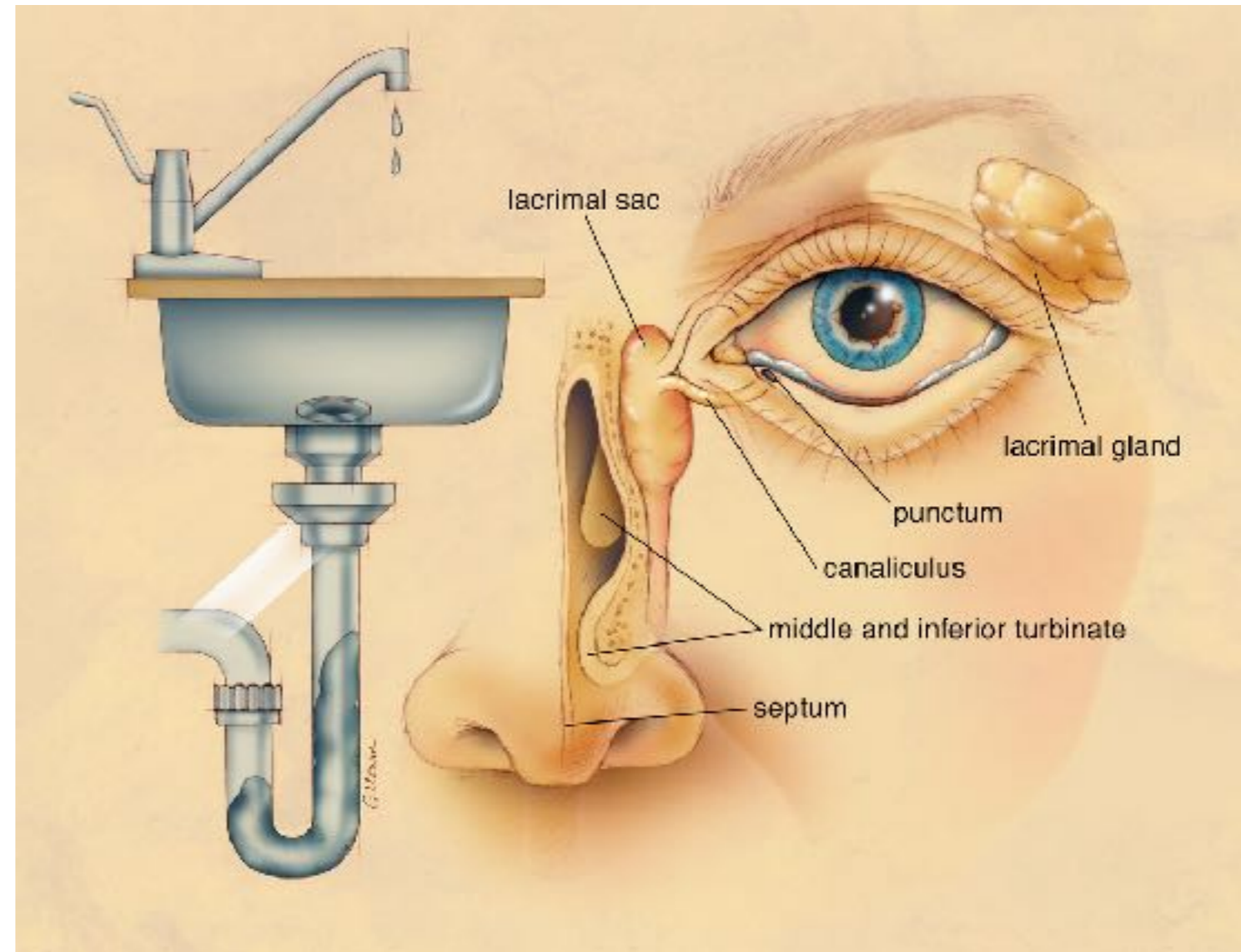
middle and inferior turbinate

septum



# Causes of Tearing

- Complex and multifactorial
- Two broad causes
  - Increased Production
  - Decreased Outflow



# Causes of overproduction

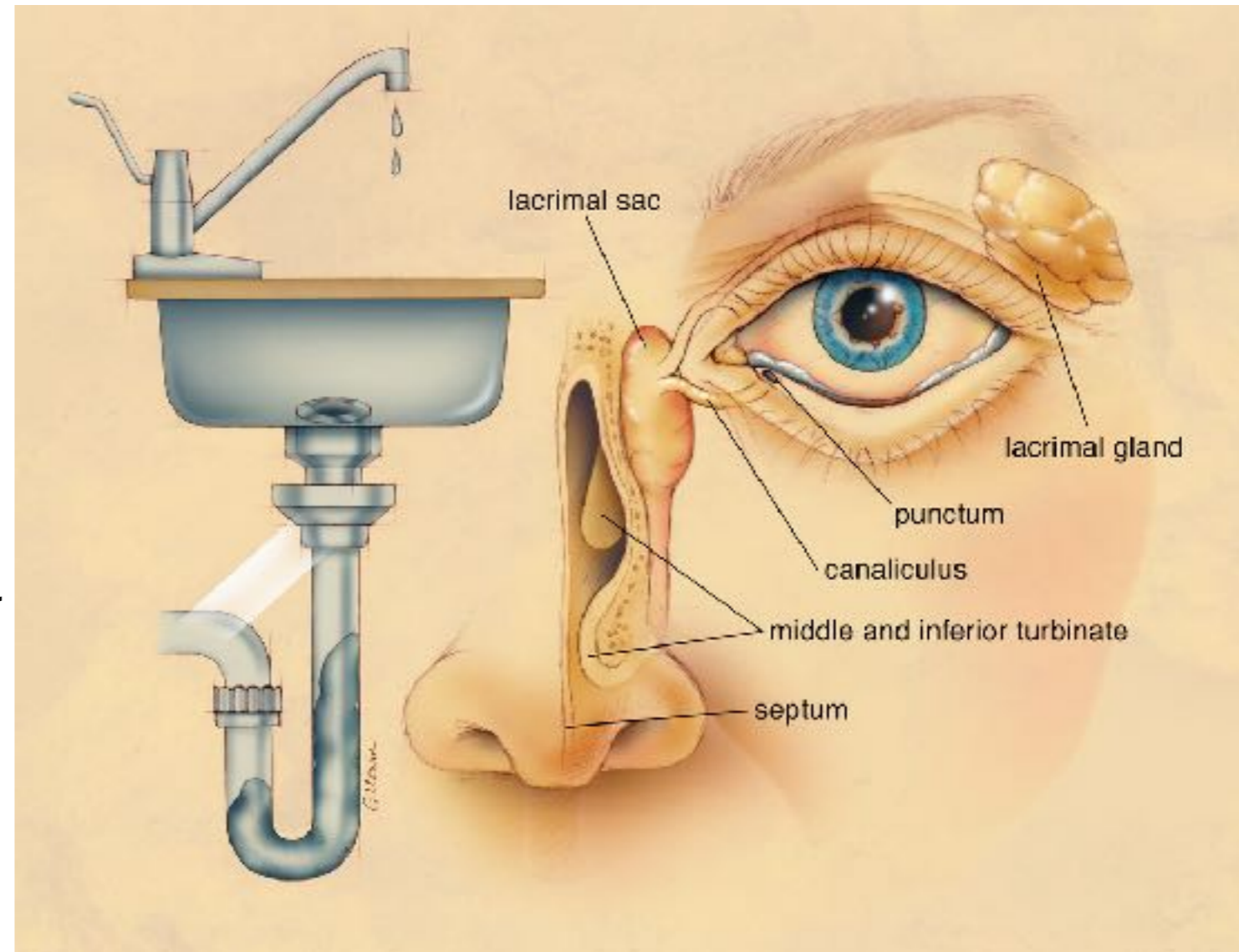
- Eyelid problems
  - Ectropion
  - Entropion
  - Trichiasis
- Ocular Allergies
- Dry eye — — —> Reflexive Tearing

# Causes of Decreased Outflow

- Eyelid malpositions
  - Ectropion and Entropion
- Punctal Stenosis
- Canalicular Stenosis
- Nasolacrimal duct obstruction

# History

- Constant vs intermittent
- Mild vs plentiful
- Exacerbating vs alleviating factors
- Sinus disease or h/o trauma
- Associated symptoms
  - Sharp pain before episodes, itching, swelling in medial canthal area



# Exam

- Starts when you walk in the room
  - (+) handkerchief sign, note glistening of eye and tear lake size
- External exam
  - Note eyelid position, +/- presence of swelling in medial canthal area, note appearance of nose
- Slit lamp exam
  - Note position of lids dynamically, exam anterior segment
- Ancillary tests
  - Dye disappearance test
  - Schirmers (with anesthesia)
  - Nasolacrimal duct probing irrigation
  - Look at nasal passage with speculum