

### **Blocked Tear Ducts (dacryostenosis, dacryocystitis)**

Many babies have one or both eyes which run or “tear” heavily. It is, of course, normal for tears to flow when the baby cries, but if tears fall even when not crying, the tear duct may be blocked. Usually, this also leads to “matter” and pus forming in the eye because of drying and infection. It can even glue the eye shut each morning.

The tear duct is a tiny tube which carries tears from the inner corner of the eye to the nose cavity. When this fails to open in time for baby’s birth or becomes plugged later, the tears cannot reach the nose cavity normally and overflow onto the cheek. Even when there is swelling, redness and infections, this problem does not threaten the baby’s eyesight.

### **General Treatment**

We try to massage the tear duct to force it open. This is done by pressing firmly against the inner corner of the eye - squeezing it against the nose bone, and then rolling the finger (still pressing firmly) downward toward the nostril. The main pressure should be away from the eye, toward the nose, but far back where the nose joins the face. This should be done before every feeding. The doctor may also give you some medicine to fight infection in the eye duct.

If massage does not succeed in 6 months, we ask the eye specialists to see the baby and decide whether surgery is indicated to open up the tear ducts. They pass a tiny wire probe through the tear duct and open it directly. The vast majority of babies outgrow this tear duct obstruction without surgical intervention.

If your child is under 3 months of age, please call our office.