



Dr Adam Watson

Eye Institute

Saturday, June 10, 2017

(Room 12)

14:00 - 14:55 WS #140: Eye Hot Tips for the Busy GP

15:05 - 16:00 WS #152: Eye Hot Tips for the Busy GP (Repeated)



Eye Tips for General Practice

Dr Adam Watson
Cataract, Cornea, Oculoplastic Surgery
Eye Institute
Auckland

general advice
specific exam tips
tips on various conditions

feel free to ask questions!

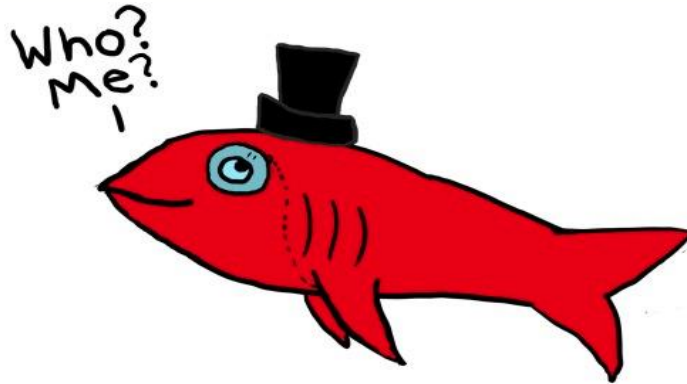
don't be pessimistic

expect that you're going to find something

listen to the history

- itch = allergy
- sudden vs. slow
- worsening symptoms
- trauma – metal on metal

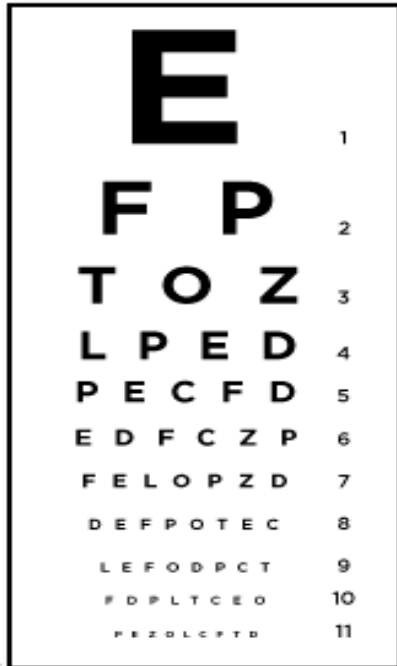
red herrings are common



Basic equipment

- vision chart + pinhole
- anaesthetic drops
- light
- cotton buds / paper clip
- fluorescein + blue light
- direct ophthalmoscope
- dilating drops
- magnifier

Vision



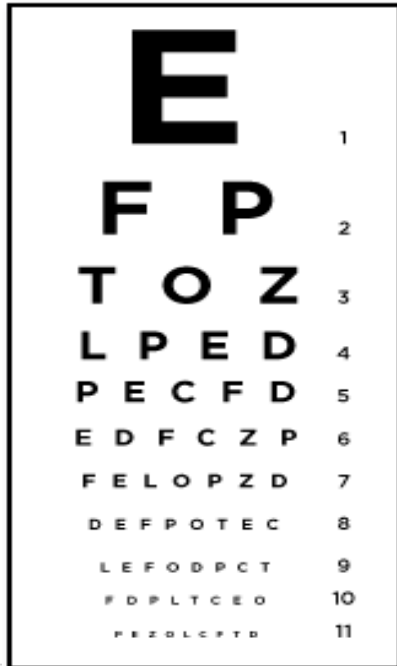
always remember to check vision

eye chart

distance

lighting

Vision



always remember to check vision

glasses if they have them

one eye at a time

pinhole if they're worse than 6/9

Vision



might peek through
the fingers



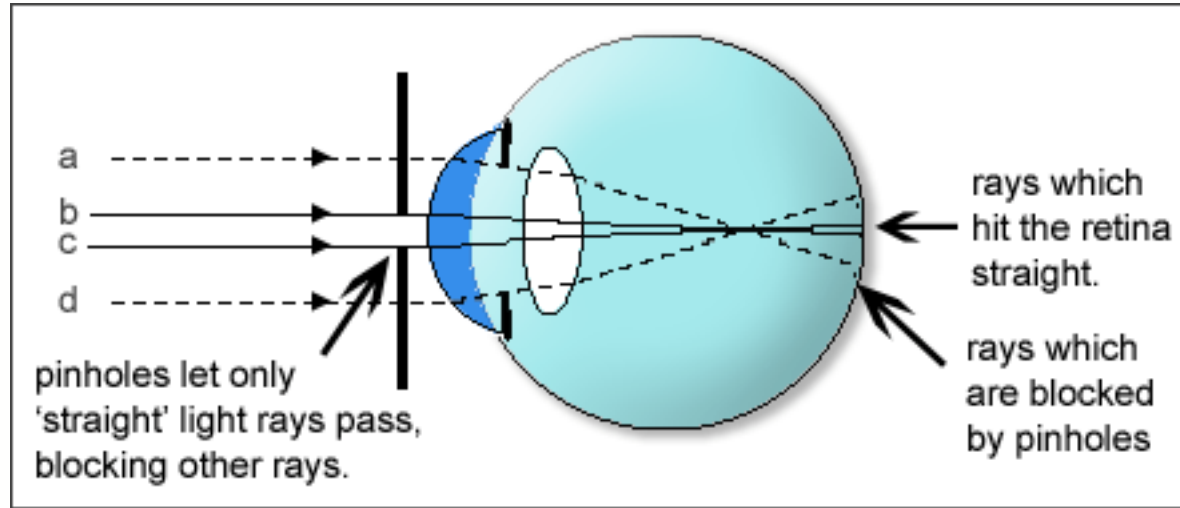
eye completely
covered

Vision



pinhole

Vision



pinhole

Vision



pinhole

Vision



pinhole

Driving vision



6/12 binocularly

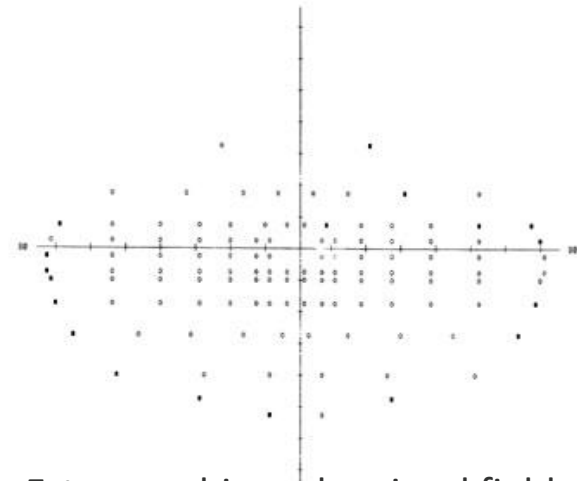
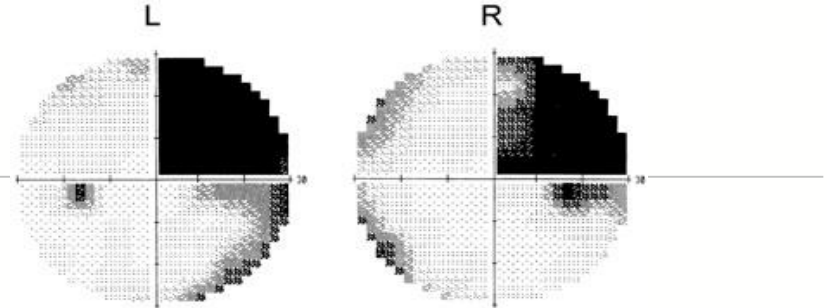
Driving vision

- binocular horizontal field of 140 degrees
- no pathological field defect within 20 degrees of fixation



Driving vision

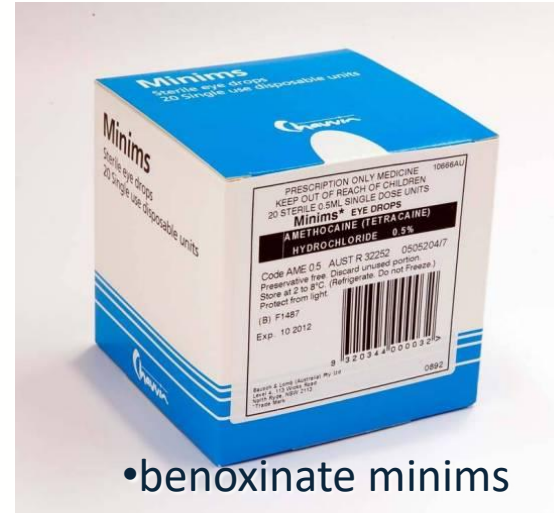
not meeting visual
standard for driving



Esterman binocular visual field

patient with discomfort?





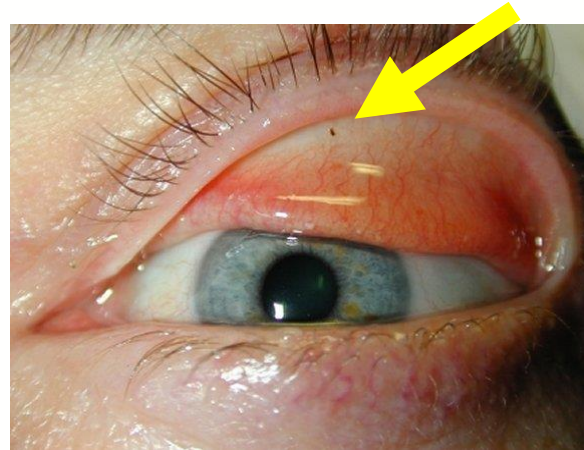
- benoxinate minims
- amethocaine minims

local anaesthetic drops



magnification

flipping the
upper eyelid



Intraocular pressure - acute glaucoma?



direct palpation

the direct ophthalmoscope



direct ophthalmoscope uses

light

blue filter

red reflex

Hirschberg test

discs / fundi

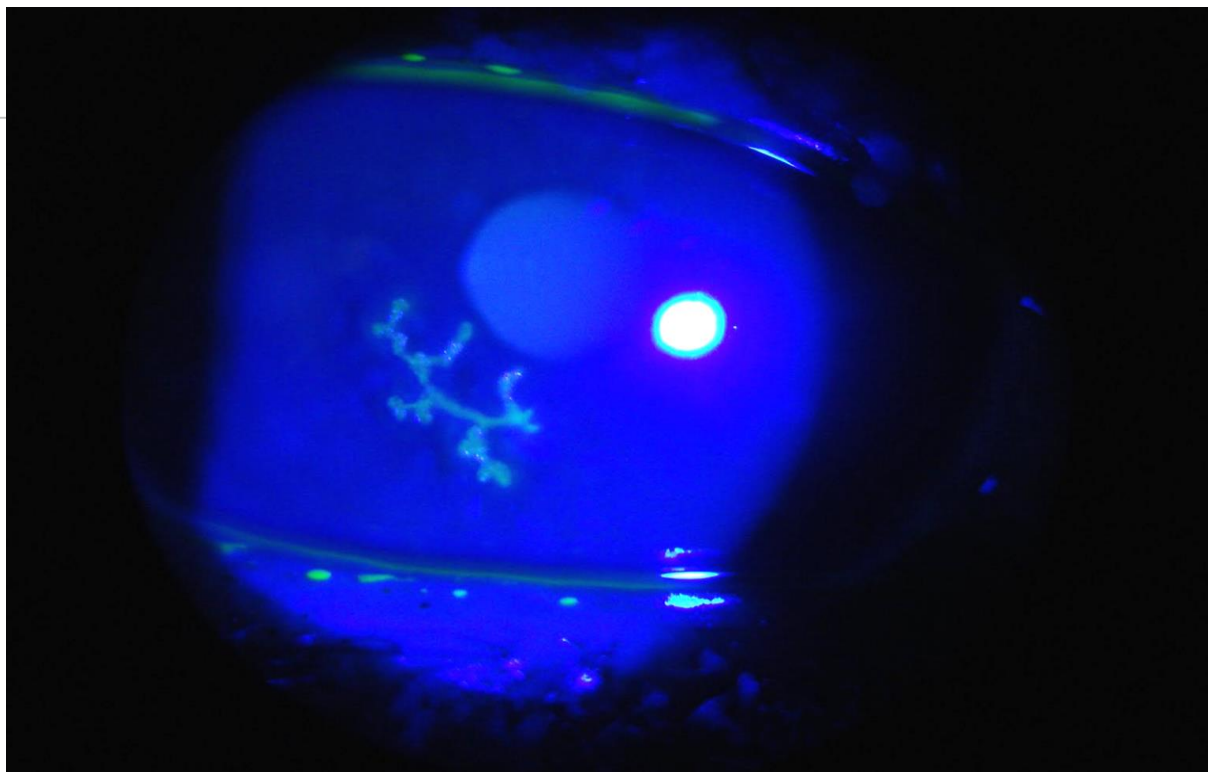




checking pupils and response to light

relative afferent pupil defect (RAPD)





blue filter with fluorescein



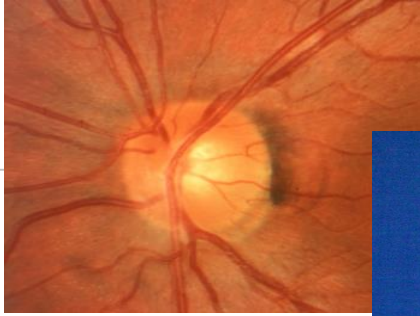
red reflex with
cortical cataract

cataract

posterior capsule opacity
after cataract surgery
paediatric exam



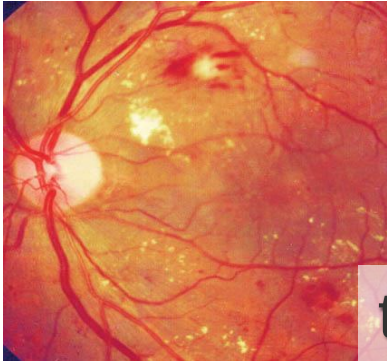
Hirschberg test –
left divergent squint



normal



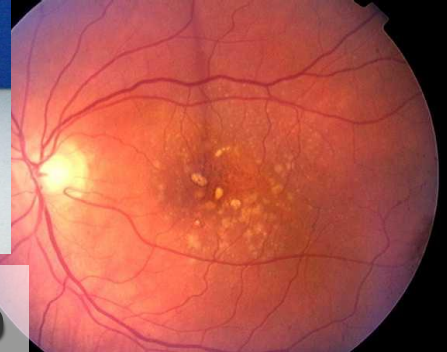
papilloedema



diabetic



tropicamide 1%



age related macular degen.

putting drops in



ointment or drops?



Side effects of glaucoma drops

- beta blockers
- prostaglandin analogues
- alpha receptor agonists
- carbonic anhydrase inhibitors



Side effects of glaucoma drops

beta blockers

- timolol**

- asthma
- low blood pressure
- bradycardia
- exercise intolerance
- falls
- diabetes



- impotence
- depression
- increase plasma lipids
- nightmares
- hair loss

Side effects of glaucoma drops

prostaglandin analogues

- latanoprost, travaprost, bimatoprost
- conjunctival hyperaemia (red eyes)
- increased ocular and periocular pigmentation
- eyelash growth
- periorbital atrophy



Side effects of glaucoma drops

prostaglandin analogues



Side effects of glaucoma drops

prostaglandin analogues



prostaglandin associated periorbitopathy

Side effects of glaucoma drops

alpha receptor agonists

- brimonidine (Alphagan)
- allergy (15-30%)
- fatigue
- somnolence



Side effects of glaucoma drops

alpha receptor agonists

- brimonidine (Alphagan)
- fatigue
- somnolence
- allergy (15-30%)



allergy

itchiness = allergy



Blepharitis / Meibomian gland dysfunction



omega 3
3000mg daily



hot eyelid soaks



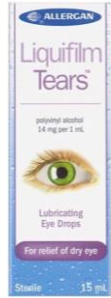
lubricants



lid scrubs

consider:
Fucithalmic 2 weeks
and Azithromycin 500mg daily 3 days
or Doxycycline 50mg daily 3 months

Choice of lubricant drops



newer preservatives



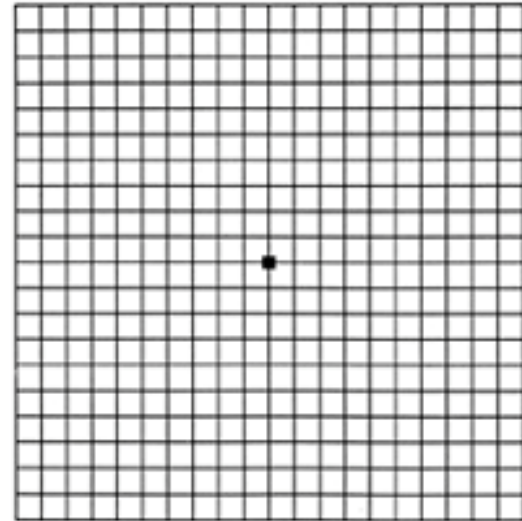
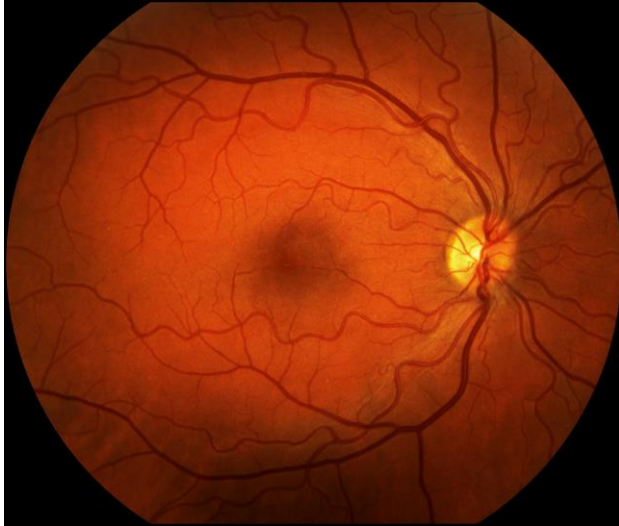
gels

more viscous

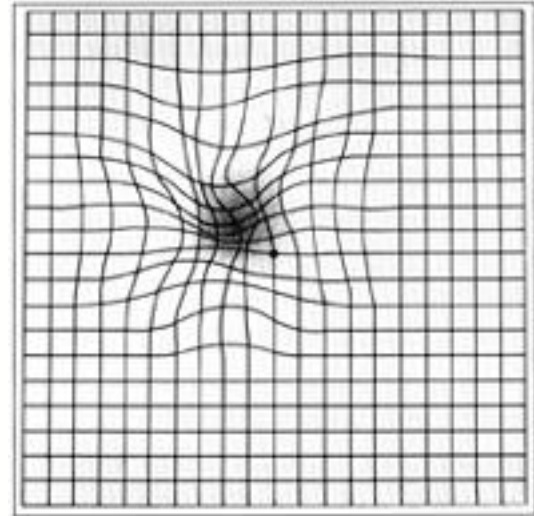


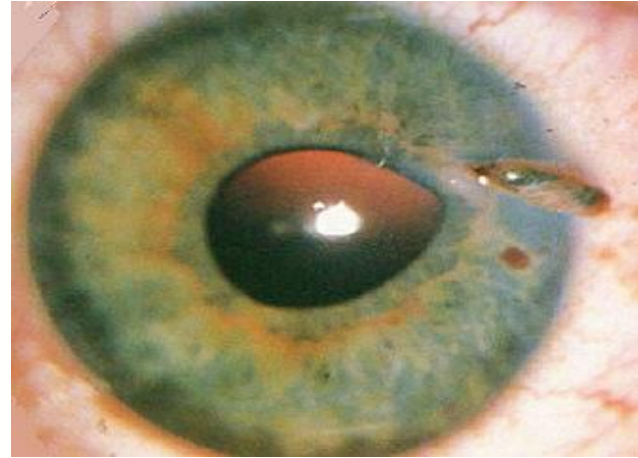
ointments

Macular degeneration – the Amsler grid



Macular degeneration – the Amsler grid





penetrating injury



always try to get a view of the eye



identifying proptosis / enophthalmos

slit lamp courses

Eye Institute
Auckland

info@eyeinstitute.co.nz



Easy Macro lens – free at Eye Institute's stand



without lens



with lens

in conclusion...

effective eye examination possible

limitations

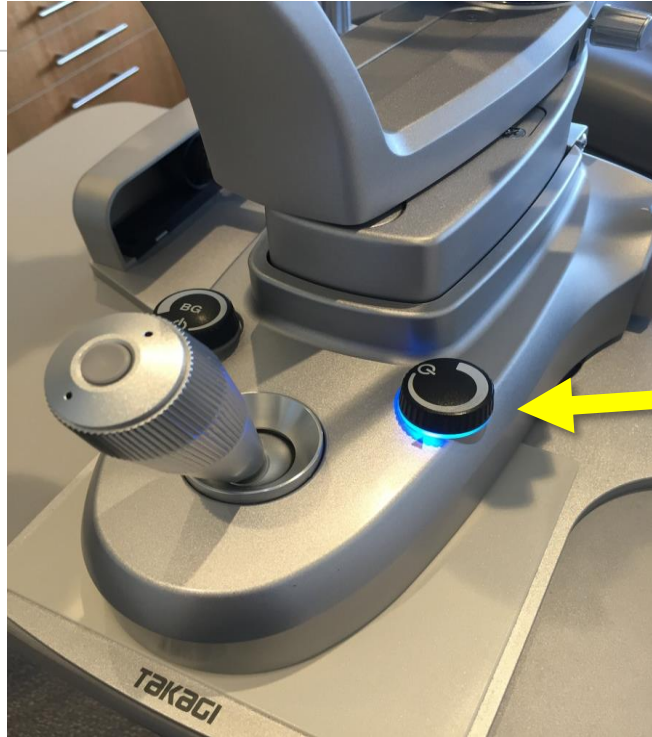
- equipment
- familiarity

THANK
YOU





using a slitlamp



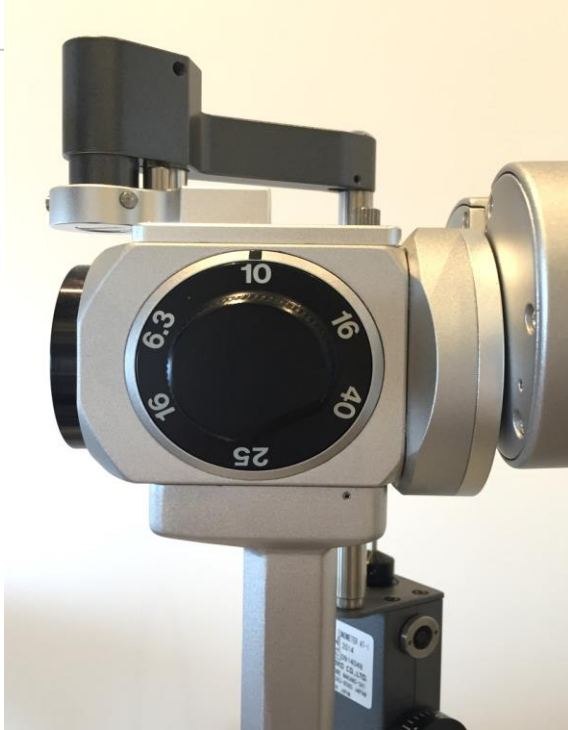
the ON switch



set the oculars
to zero

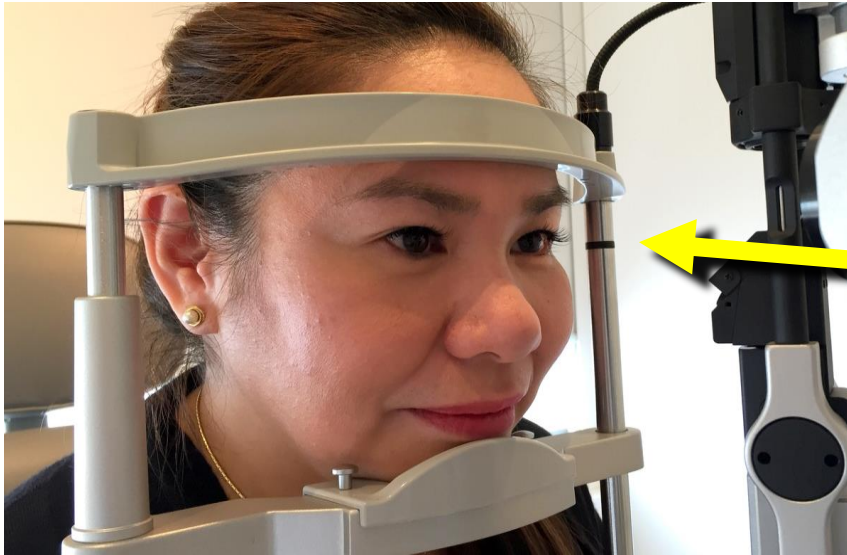


undo the locking knob

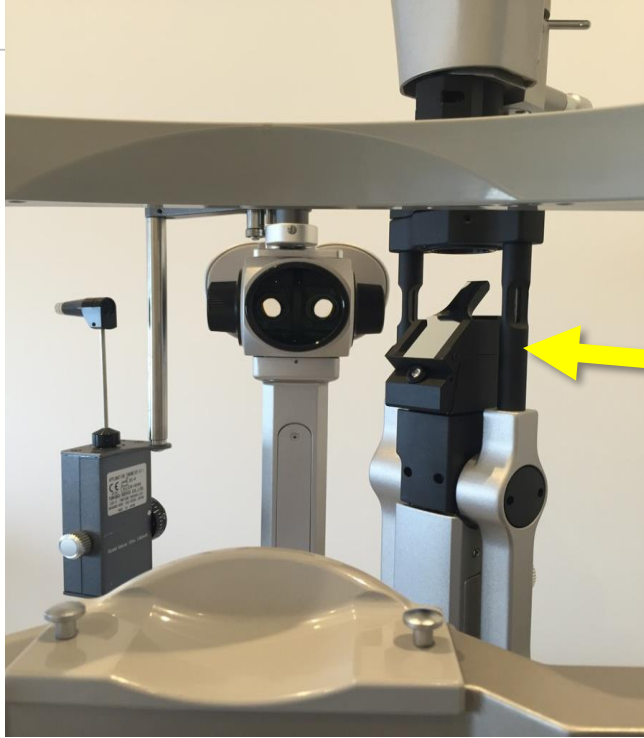


magnification wheel

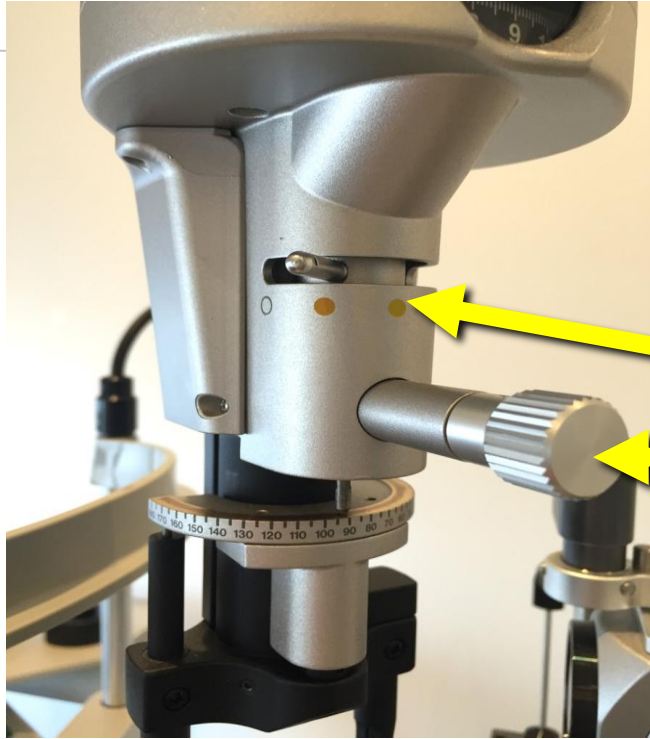
set on 6x or 10x



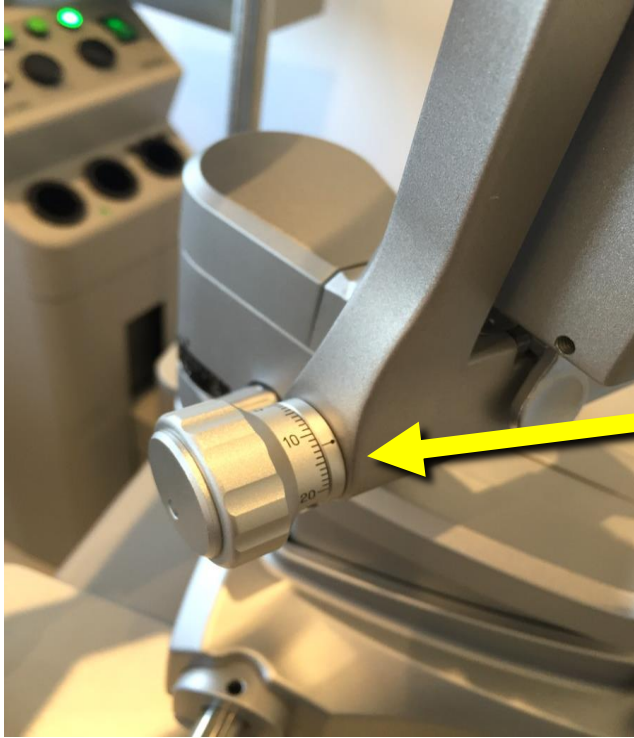
patient positioning
get head at right height



oblique illumination



filters and slit height



slit width



Nikon slitlamp