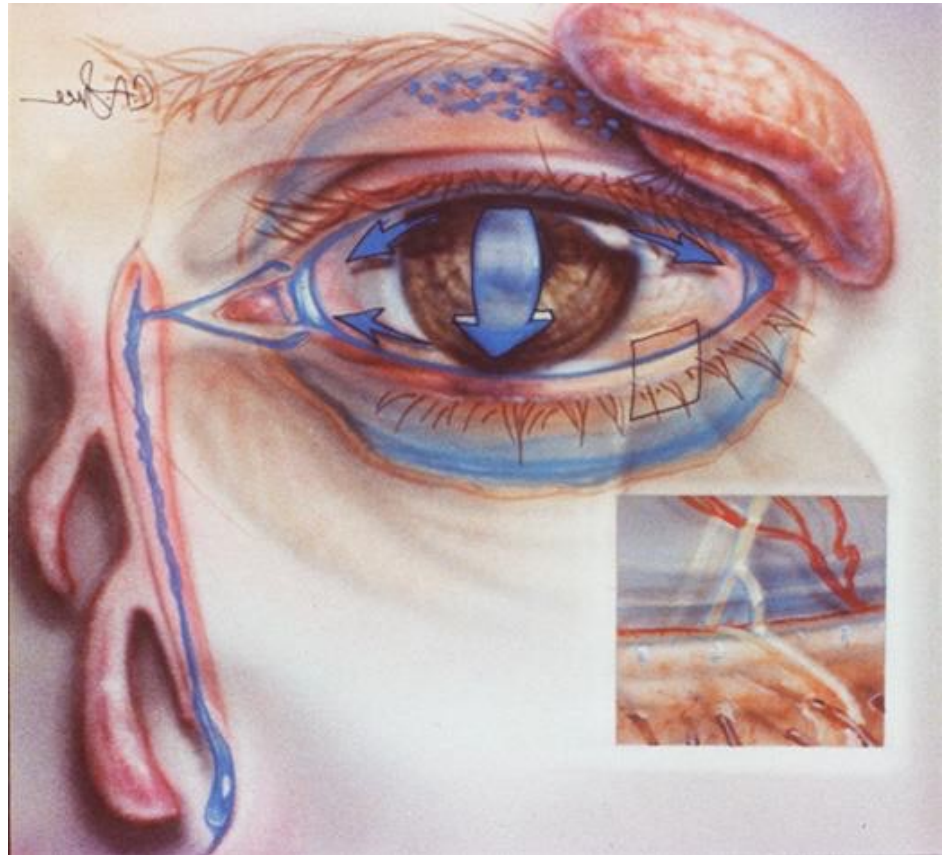


TEARING DUE TO  
BLOCKED  
DRAINAGE  
SYSTEM =  
NASOLACRIMAL  
DUCT  
OBSTRUCTION

Kimberly Cockerham, MD, FACS



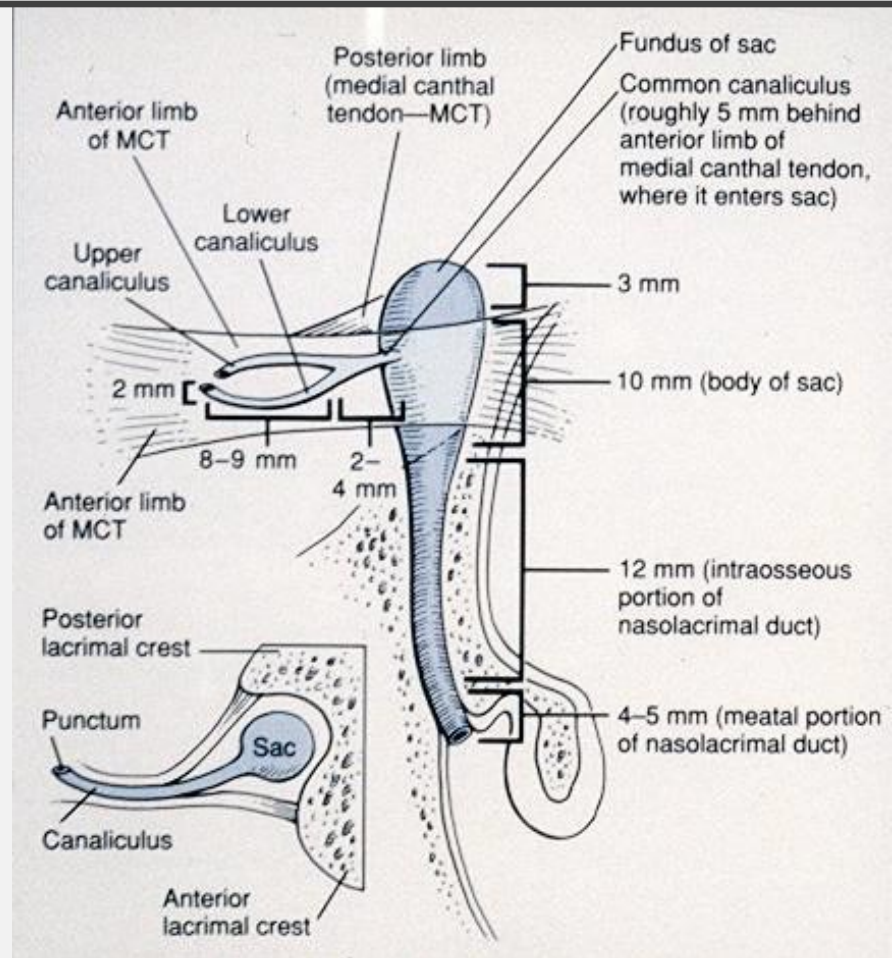
# BLOCKAGE CAN OCCUR ANYWHERE FROM THE TEAR HOLES (PUNCTA) ON THE EYELID TO THE DUCT OPENING IN THE NOSE

Puncta

Canaliculus

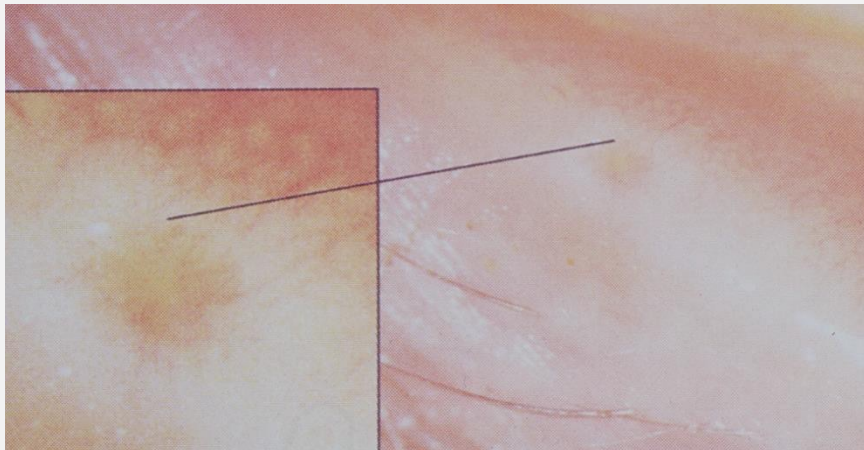
Lacrimal sac

Lacrimal duct



# BLOCKED TEAR HOLE = PUNCTAL STENOSIS

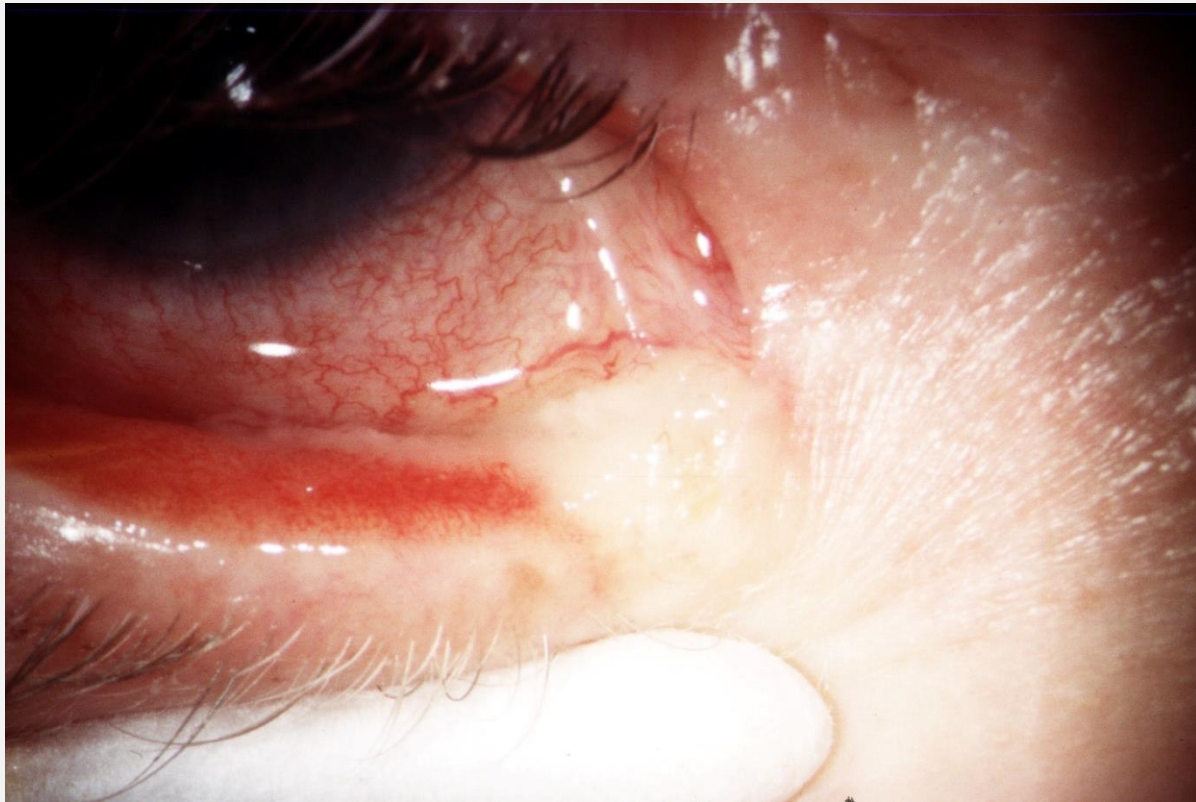
- Inflammation
- Topical drops
- Exposure



RX = punctopexy



## PUNCTAL INFILTRATION



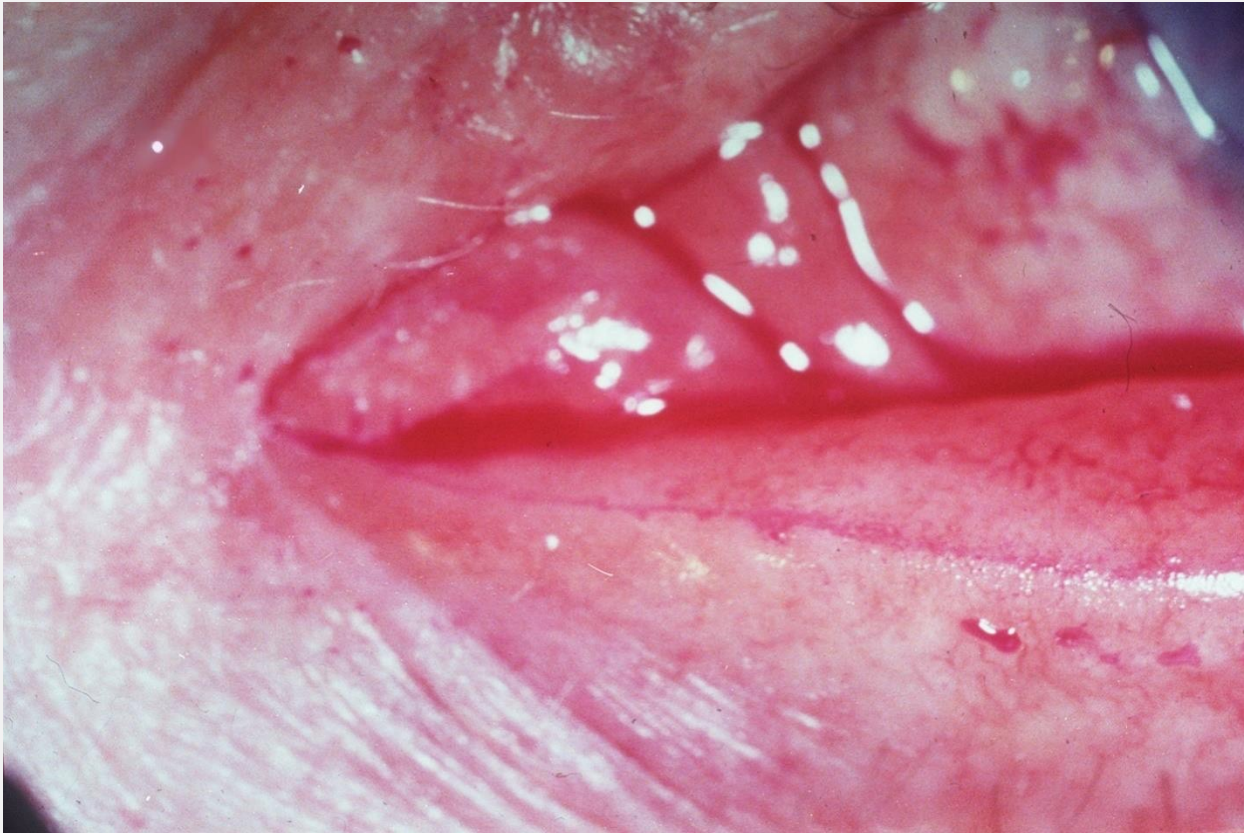
RX = Excision and Reconstruction

# CANALICULAR ABNORMALITY

- Infection (canaliculitis)
- Trauma
- Chemotherapy
- Topical medications (glaucoma drops)



## CANALICULITIS



*Actinomyces*: three snip followed by topical Pen G

# NASOLACRIMAL DUCT OBSTRUCTION

- Infection
- Inflammation
  - Wegner's
  - Sarcoidosis
  - Steven's Johnson
  - Herpes
- Intranasal abnormality

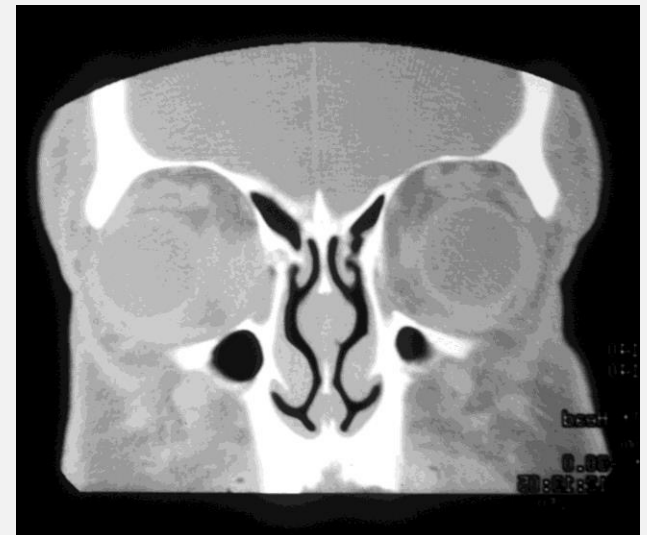
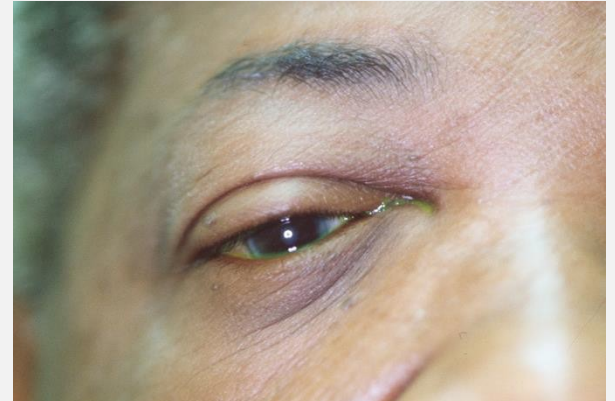


Dacryocystitis



## LACRIMAL SAC MASS

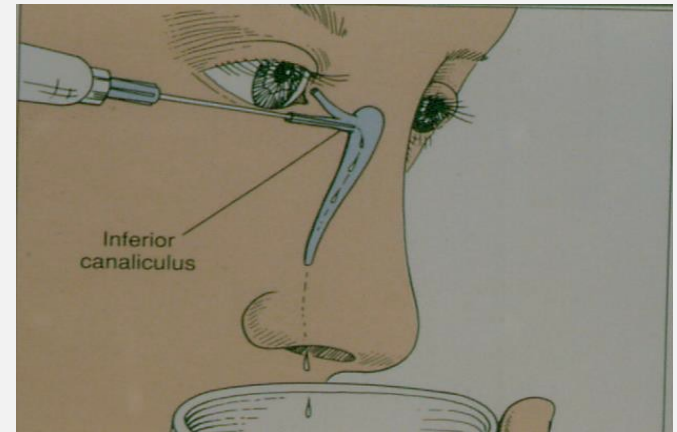
- Inflammation
  - Sarcoidosis
  - Non-specific inflammation
- Neoplasia
  - Squamous cell carcinoma
  - Lymphoma



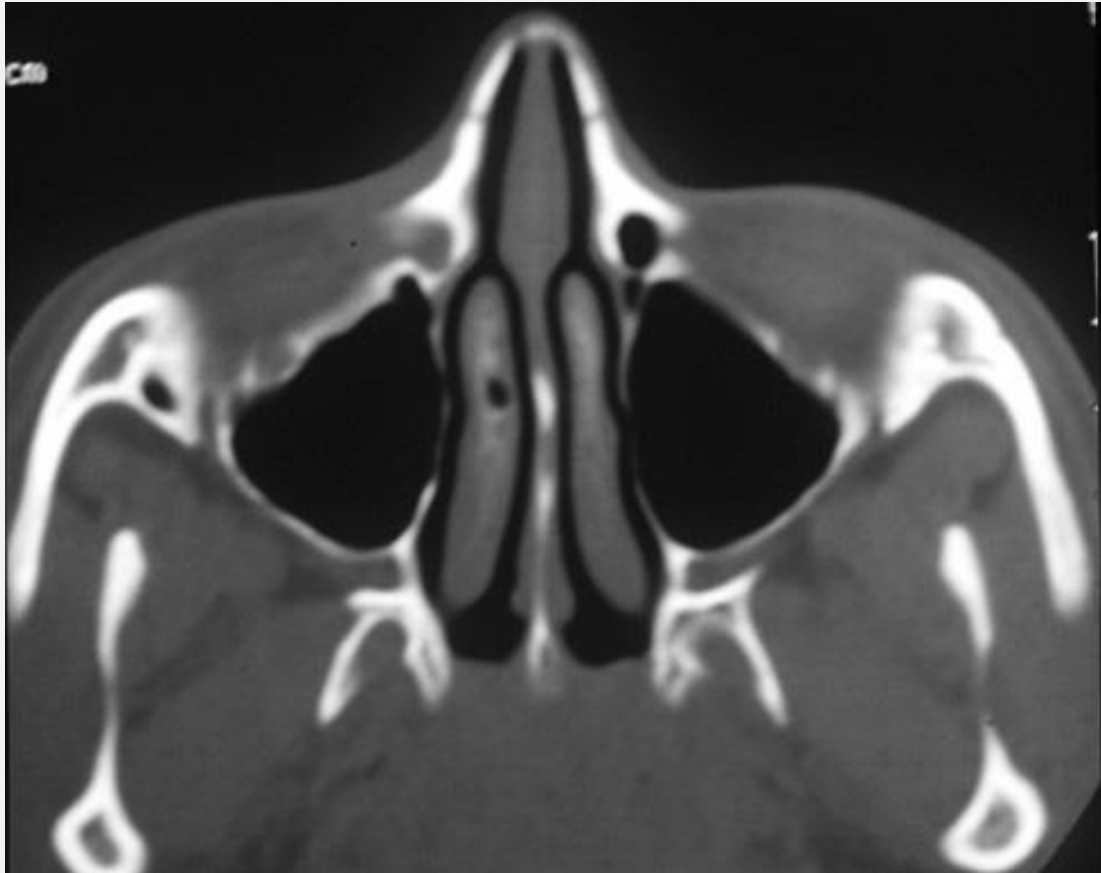


# EVALUATION OF THE WET EYE = BLOCKED TEAR HOLE, TEAR TUBES OR TEAR SAC

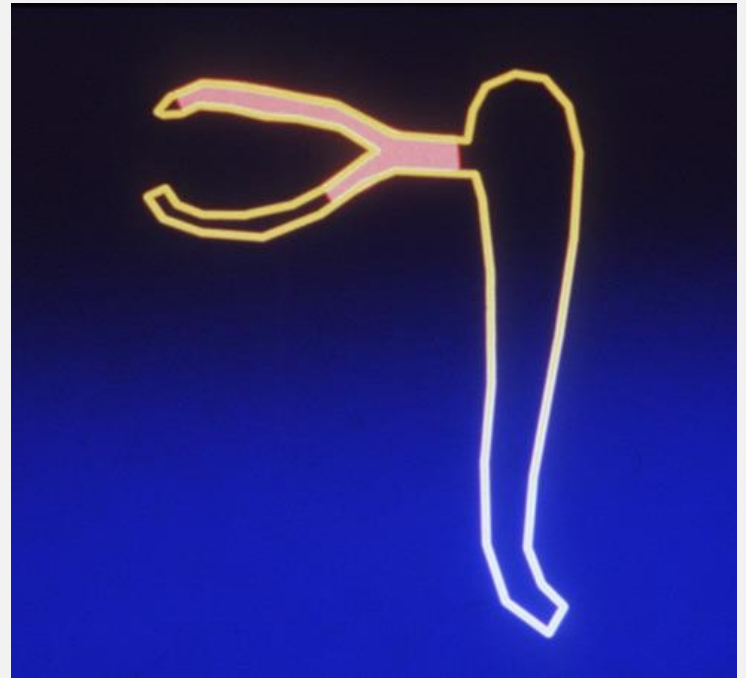
- Irrigation
  - Flows freely to mouth or nose
  - System not structurally blocked
  - Functional block still possible



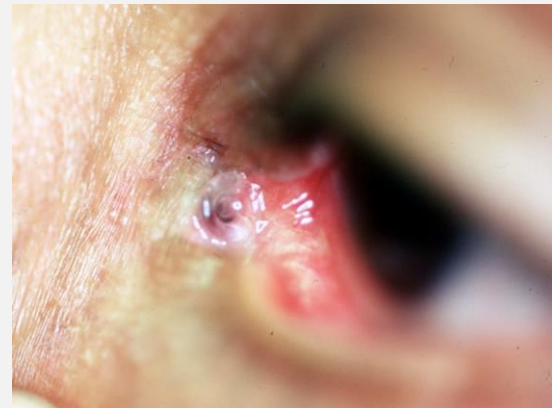
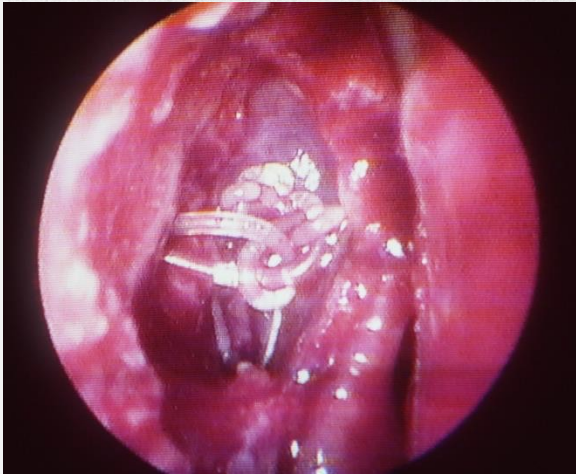
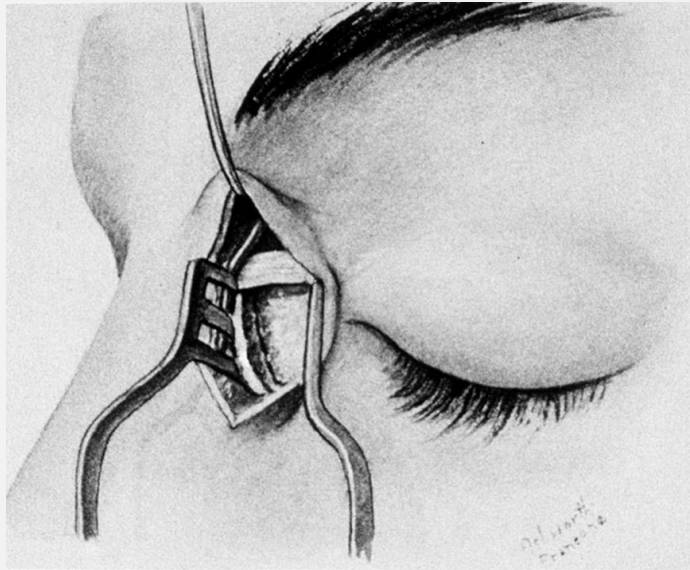
# CT SCAN IS DONE TO IDENTIFY MASSES OR UNUSUAL ANATOMY



# CANALICULAR STENOSIS



# TEAR DRAINAGE SURGERY = PROBE, DILATE, STENT OR DACRYOCYSTORHINOSTOMY (DCR)





# SYSTEMATIC APPROACH TO TEARING

- Dry
- Wet
- Other
  - Ocular Surface
  - Eyelid
  - Orbit

