

Nasolacrimal Duct Obstruction in Children

This material will help you understand a nasolacrimal duct obstruction and how it is treated.

What is a nasolacrimal duct obstruction?

A nasolacrimal duct obstruction is a blockage in the tear drainage system. Tears normally drain through small openings in the corners of the eyelids into the tear sac. They then enter the nose through the nasolacrimal duct. When the ducts are blocked, tears are unable to drain. They may well up on the eye surface or overflow onto the cheeks. Some children also develop yellow-green discharge. More than 5% of infants have a nasolacrimal duct obstruction in one or both eyes.

What causes a nasolacrimal duct obstruction?

The most common location for a blocked tear duct is at the “valve of Hasner”, which remains closed after birth. Sometimes, other parts of the system can be closed instead.

How is a nasolacrimal duct obstruction diagnosed?

An eye doctor can diagnose nasolacrimal duct obstruction. Tearing and discharge that start a few weeks after birth point to a blocked tear duct.

How is a nasolacrimal duct obstruction treated?

In most cases, blocked tear ducts clear on their own or with gentle massage over the area. By one year of age, over 90% of nasolacrimal duct obstructions resolve without invasive treatment. If the ducts remain blocked, your child’s

eye doctor may recommend a procedure called tear duct probing. It is usually done in the operating room under general anesthesia.

Rarely, a tear duct obstruction can cause infection, which can be treated with an antibiotic ointment.

For more information, scan these codes with your smartphone or visit the websites listed.



<http://www.aapos.org/terms/conditions/72>

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