

CHLAMYDIA

CHLAMYDIA CONJUNCTIVITIS

- **(INCLUSION BODY CONJUNCTIVITIS)**
- Caused by chlamydia trachomatis serotype D-K.
- Usually affects sexually active individuals.
- Sources of infection is usually urethra in males and cervix in females.
- Transmission to eyes in adults is usually oral-genital sexual practices or hand to eye transmission.

CONT,

- Inadequate chlorination of water in swimming pools permits direct transfer of organisms to the eye. Hence the term “swimming pool conjunctivitis.”
- Eye symptoms present after one week following exposure to organisms.
- May be unilateral or bilateral.

CLINICAL FEATURES

- Red eyes
- Eye discharge(mucopurulent)
- Conjunctival, follicles and papillae.
- Keratitis.
- Normal visual acuity.
- preauricular lymphadenopathy

EXTRA – OCULAR INVOLVEMENT

- Otitis media
- Urethritis
- Salpingitis
- cervicitis

LAB INVESTIGATION

- Eye swab for microscopy.
- Giemsa stain shows characteristic inclusion bodies

MANAGEMENT

- Topical antibiotics effective for conjunctivitis only. Use topical and systemic
- T.E.O 1%
- Erythromycin eye ointment

SYSTEMIC TREATMENT

- Doxycycline 100mg daily for 7 – 14 days on 300mg weekly for 3 weeks.
- Tetracycline 250mg – 500mg orally for 7 – 14 days.
- Azithromycin 1g daily for 5 days.
- Avoid in pregnancy and children less than 10yrs
- Can use erythromycin in place of above drugs if woman is pregnant or if child aged below 10 years