Ophthalmic Images

Congenital Common Canalicular Lacrimal Fistula in an Asymptomatic Patient

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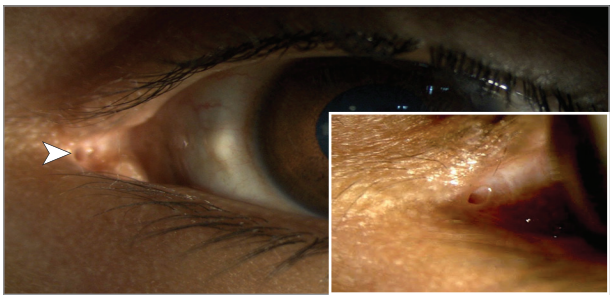

Figure. Congenital common canalicular lacrimal fistula. Slitlamp photograph shows a congenital lacrimal fistula (white arrowhead) located at the medial canthus, with communication with the common canaliculus. Inset shows the fistula, identified as a small round opening 1 mm in diameter, with smooth and regular margins.

A 24-year-old female patient presented after noticing a small hole at the inner corner of the eye that had been present since childhood. An isolated round opening with smooth and regular margins was found in the medial canthus (**Figure**). The upper and lower punctum were visible separately and were found patent on syringing and probing. The patient was asymptomatic and kept on observation.

External congenital lacrimal fistula is a rare developmental anomaly. It is an epithelium-lined tubular passage, communicating between the lacrimal sac (more commonly), common canaliculus or nasolacrimal duct, and skin surface, while few may be occult, or not communicate with the skin surface.[1-3] Fistulae are frequently unilateral and typically located in the inferomedial lower canthus.[1,2] They may occur in association with Down syndrome, VACTERL syndrome (vertebral defects, anal atresia, cardiac defects, tracheoesophageal fistula, kidney anomalies, and limb abnormalities), CHARGE syndrome (coloboma, heart defects, atresia choanae, growth retardation, genital abnormalities, and ear abnormalities), and EEC syndrome (ectrodactyly, ectodermal dysplasia, and facial clefts). Patients are largely asymptomatic but may complain of occasional or persistent epiphora.[4] Symptomatic fistulae may be managed by complete excision, adjunctive dacryocystorhinostomy, or intubation.[4]

ARTICLE INFORMATION

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