Disorders of the Lacrimal Gland

- 1. Acute Dacryoadenitis
- 2. Chronic Dacryoadenitis

Acute Dacryoadenitis

Definition

• Acute inflammation of the lacrimal gland is a *rare* disorder characterized by intense inflammation and extreme tenderness to palpation.

Etiology:

- 1. The disorder is often attributable to pneumococci and staphylococci, and less frequently to streptococci.
- 2. There may be a relationship between the disorder and infectious diseases such as mumps, measles, scarlet fever, diphtheria, and influenza.

Symptoms and diagnostic considerations: Acute dacryoadenitis usually occurs *unilaterally*. The inflamed *swollen gland* is especially *tender to palpation*.

• The upper eyelid exhibits a characteristic S-curve.

Differential diagnosis:

- 1. Internal hordeolum (smaller and circumscribed).
- 2. Eyelid abscess (fluctuation).
- **3.** Orbital cellulitis (usually associated with reduced motility of the eyeball).

Treatment: This will depend on the *underlying disorder*. *Moist heat, disinfectant compresses* (Rivanol), and local *antibiotics* are helpful.

Clinical course and prognosis: Acute inflammation of the lacrimal gland is characterized by a rapid clinical course and *spontaneous healing within eight to ten days*. The prognosis is good, and complications are not usually to be expected.



Chronic Dacryoadenitis

Etiology:

- The chronic form of inflammation of the lacrimal gland may be the result of an incompletely healed *acute* dacryoadenitis.
- Diseases such as tuberculosis, sarcoidosis, leukemia, or lymphogranulomatosis can be causes of chronic dacryoadenitis.
- Bilateral chronic inflammation of the lacrimal and salivary glands is referred to as Mikulicz's syndrome.

Symptoms and diagnostic considerations:

- ✓ Usually there is no pain.
- \checkmark The symptoms are less pronounced than in the acute form.
- ✓ The S-curve deformity of the palpebral fissure resulting from swelling of the lacrimal gland is readily apparent.

Differential diagnosis:

- 1. Periostitis of the upper orbital rim (rare)
- 2. Lipodermoid (no signs of inflammation).

Treatment: This will depend on the underlying disorder.

Systemic corticosteroids may be effective in treating unspecific forms.

Prognosis: The prognosis for chronic dacryoadenitis is good when the underlying disorder can be identified.

Muqdad fuad