



CONJUNCTIVITIS (“PINK EYE”) - FACT SHEET

DEFINITION

- Conjunctivitis, commonly called "pinkeye" is an inflammation of the membrane that lines the eyelids and extends over the whites of the eyes (sclera).

CAUSE

- Conjunctivitis can be caused by bacteria, virus, allergy or immune response, a chemical or irritant.

CHARACTERISTICS

- A. Bacterial Conjunctivitis
 - May affect one or both eyes
 - Green or yellow discharge
 - May be crusted shut when awakening
 - Red or pink, minimal itchy, painful eye
 - Minimal or no itching
 - Blurred vision that clears with blinking
 - Not contagious if medications started
 - Less common in children older than 5 years
- B. Allergic Conjunctivitis
 - Itchiness, redness and excessive tearing
 - Usually affects both eyes, but not always
 - Intense itching, burning, rubbing
 - Nasal linings often also swollen and pale
- C. Viral Conjunctivitis
 - Pink, swollen, watery eyes; minimal itch
 - Starts with one eye; may affect both
 - Sensitivity to light (“photophobia”)
 - Contagious sometimes before symptoms
 - Contagious until signs, symptoms gone
 - If caused by “adenovirus”, it comes with fever and cold and can be contagious for up to 14 days
- D. Chemical Conjunctivitis (e.g., chlorine)
 - Red, watery eyes
 - Usually within minutes to hours after swimming or shortly after contact with irritating substance
 - Not contagious

MODE OF TRANSMISSION & CONTROL

Bacterial and viral conjunctivitis may be transmitted by:

- Contact with eye discharge
- Contaminated fingers, clothing, or other articles
- Upper respiratory tract of infected persons Bacterial conjunctivitis can resolve without antibiotic treatment; it’s usually caused by the same bacteria that are normally found in throats and noses of many people and usually does not cause a problem. Most resolve in 5-6 days with or without antibiotics.

HOME MANAGEMENT

- Contact your child’s physician immediately if there is pain, swelling or severe photophobia (very sensitive to light).
- Persons suspected of having conjunctivitis may be seen by a physician for appropriate diagnosis, treatment, and follow up. But this is voluntary, and documentation of the visit for school is not required.
- Good hand washing technique before and after touching the eyes, nose and mouth. Sanitation of objects commonly touched by hands or faces (e.g., toys).
- Student may return to school when symptom free or on the recommendation of a physician. Students placed on medication are usually excluded for a period of 24 hours after starting treatment.