

Eye and nose allergies in children

If your child often has teary eyes or runny nose, yet shows no other symptoms of the common cold, he or she may be suffering from allergies.

Children can be afflicted with all kinds of allergies, from the food that they eat and the medication that they take, to the environment that they are exposed to.

An allergy is an immune response by the body to a particular trigger. The most common triggers in our environment are house dust mites and household mould, and even pet animal fur. As the allergens are so small, children get allergies from inhaling or ingesting them.

Allergies tend to be hereditary too. If a parent has an allergy, there is a higher chance that his or her child will also have an allergy. This risk increases if both parents have allergies.

Signs and triggers

Allergy tends to be a systemic condition, which means it can trigger responses in different parts of the body, sometimes all at once. Allergies to environmental triggers most commonly present with nasal, eye and skin symptoms.

In nose allergies or allergic rhinitis, the nasal airways get irritated and inflamed when exposed to a trigger. Symptoms include blocked, runny or itchy nose, sneezing, post nasal drip that causes persistent cough, problems with smell, and mouth breathing. Children are more affected as their nasal passages are much smaller, so even a mild obstruction can affect the child's breathing.

The same hypersensitivity reaction can happen in the eye, causing redness, itching, tearing and eye discharge. Certain forms of allergic conjunctivitis tend to present in childhood rather than adulthood, while others are associated with atopic dermatitis, a type of eczema.

Generally, there are two types of chronic eye allergies:

- Vernal keratoconjunctivitis – mostly in children and early teens; commonly triggered by house dust mites; and
- Atopic keratoconjunctivitis – mostly in people with eczema; affects the eye and sometimes the eyelids

Acute allergic conjunctivitis, which is a short-term condition, occurs seasonally and symptoms vary with exposure to pollen, grass, spores – and increasingly, the haze.



Treatments

It is important to identify allergies in children early, as they can affect a child's growth and development; both physically and socially.

Nose allergies can give rise to chronic mouth breathing, which affects facial and dental development. It often presents with nasal obstruction, which affects sleep and aggravates dental issues. Disturbed sleep affects daytime activities, as do tearing, itching and eye discharge. The child may be tired and lethargic in the day and may present with behavioural issues like hyperactivity, short attention span and poor focus. These, in turn, may affect school performance. Severe allergic conjunctivitis can result in multiple corneal abrasions, impairing vision.

The best way to treat allergies is to recognise and avoid triggers. Occasionally, an allergy test may be required to help pinpoint the triggers that the child is sensitive to.

If control of symptoms is necessary, it is usually through oral medication, eye drops and nasal sprays. For acute eye allergies, treatment can be challenging as the child needs to have eye drops applied at tight intervals. If nasal symptoms are severe or persistent, other options may have to be considered, including a surgical procedure to alleviate the obstruction, or immunotherapy, which desensitises the body to the known allergen.



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