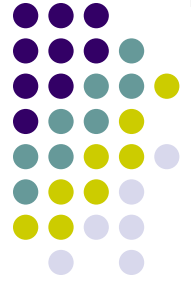
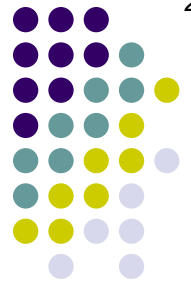


Q



- Many patients complain of their eyes ‘running water.’ By what simple clue can you tell whether they suffer from true epiphora as opposed to tearing?



# A

- Many patients complain of their eyes ‘running water.’ By what simple clue can you tell whether they suffer from true epiphora as opposed to tearing?
- Patients with true epiphora usually have a tissue or handkerchief in their hand as they sit in your exam chair



Q

- Ectropion patients often c/o epiphora. Harried and hurried residents will chalk this up to DES and prescribe ATs. What two questions could be asked to prevent this misdiagnosis?

1) "When your eyes run water..."

2) "When your eyes run water..."



# A

- Ectropion patients often c/o epiphora. Harried and hurried residents will chalk this up to DES and prescribe ATs. What two questions could be asked to prevent this misdiagnosis?

1) “When your eyes run water...*do they burn as well?*”

2) “When your eyes run water...”



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Why is this an important question?

2) “When your eyes run water...”



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- Why is this an important question?



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- The location of epiphora provides important clues to its etiology. If it arises from the medial canthus, this is strong evidence that the lids are functioning normally, and the problem is either blockage in the drainage apparatus or tear overproduction (ie, DES). However, if the epiphora arises in the lateral canthal region or the central lid, an eyelid problem is present—the tears are not being shunted nasally as they should. Such patients should have their lid function and position scrutinized—ectropion may be the culprit!