

WHAT IS THIS MONTH'S MYSTERY CONDITION? Visit aao.org/eyenet to make your diagnosis in the comments.

LAST MONTH'S BLINK

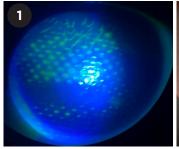
Airbag Keratitis

n 11-year-old girl arrived at the emergency department reporting pain and blurry vision in both eyes after a motor vehicle accident. She had been sitting in the front passenger seat when the airbags deployed and struck her face.

On presentation, her uncorrected near visual acuity was 20/70 in the

right eye and 20/40 in the left eye but improved to 20/30 and 20/20, respectively, after proparacaine instillation. On slit-lamp examination, both eyes had mild conjunctival injection and corneal abrasions with fluorescein uptake in a gridlike pattern distributed diffusely across the cornea (Figs. 1, 2). She was treated with erythromycin ointment four times daily and artificial tears. On follow-up two days later, her symptoms of pain and blurry vision had improved, visual acuity had improved to 20/20 in both eyes, and the corneal abrasions were resolved.

Ocular injuries associated with airbags include corneal abrasions, eyelid trauma, and hyphema.





The pattern of corneal fluorescein staining seen in our patient was likely caused by direct impact of the airbag, which is made of a woven nylon meshwork. Sodium hydroxide powder can escape through the nylon mesh when the airbag deploys, causing an ocular alkali burn. Although there were no clinical signs suggestive of alkali injury, the patient's eyes were irrigated with 1 L of normal saline, and pH was checked and noted to be neutral in both eyes.

WRITTEN BY **CAROLINE C. AWH, MD,** AND **TANNER J. FERGUSON, MD,** COLE EYE INSTITUTE, CLEVELAND
CLINIC, CLEVELAND, OHIO. PHOTO BY DR. AWH.