



*The NHS in Newcastle, North Tyneside
and Northumberland*

**NORTH OF TYNE AND GATESHEAD GUIDELINES FOR
MANAGEMENT OF COMMON OPHTHALMOLOGICAL
CONDITIONS IN PRIMARY / COMMUNITY CARE**

September 2018

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INTRODUCTION

This guidance is intended to inform initial management of common ophthalmological conditions and has been developed as a consensus between representatives from primary and secondary care, and optometrists with reference to national guidelines, including from NICE.

Where patients present is not explicitly stated and for example patients might present to the GP, a community optometrist or to an emergency department. The guidelines do not set out to describe all the clinical symptoms associated with each condition and clinicians are expected to use their skills and knowledge to assess and manage individual patients. The guidelines are intended to guide clinical management, but every patient should be assessed and managed individually.

These guidelines are intended for all clinicians in the Newcastle, North Tyneside, Northumberland and Gateshead areas involved in managing patients with ophthalmological conditions.

How to use the guidelines

The guidelines are a set of flow charts covering a variety of ophthalmological conditions. Each of these can be printed and laminated for easy reference if preferred. When referral is indicated the appropriate clinic is stated.

The BNF and the North of Tyne Formulary should be referred to as appropriate.

Referrals

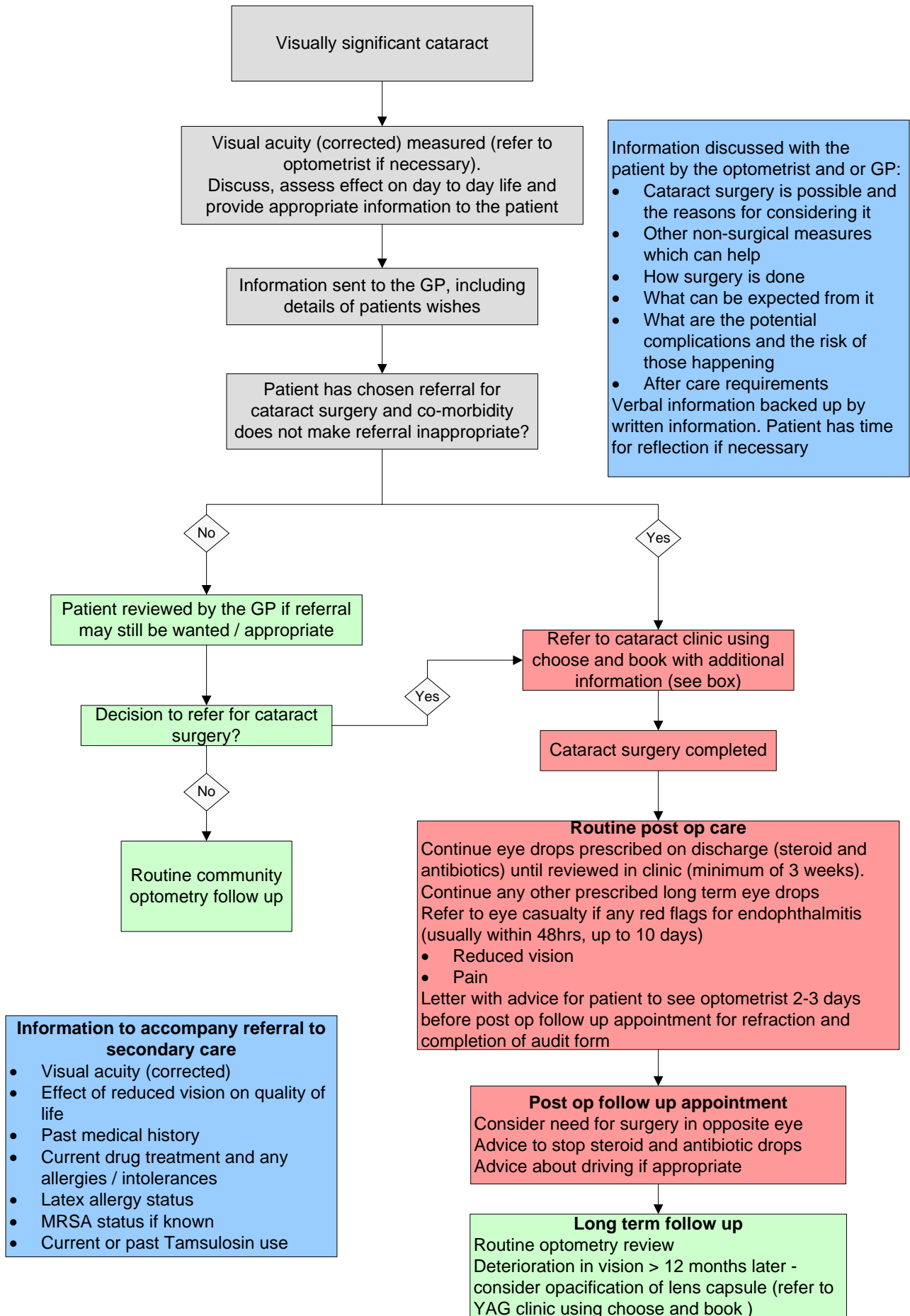
When referral to secondary care ophthalmology is recommended in the guideline, referral for patients to be seen at a local outreach clinic may be preferred. It is anticipated that clinicians in localities where such clinics are available will be aware of them, but further information can be obtained from the ophthalmology department at the RVI.

Patient information

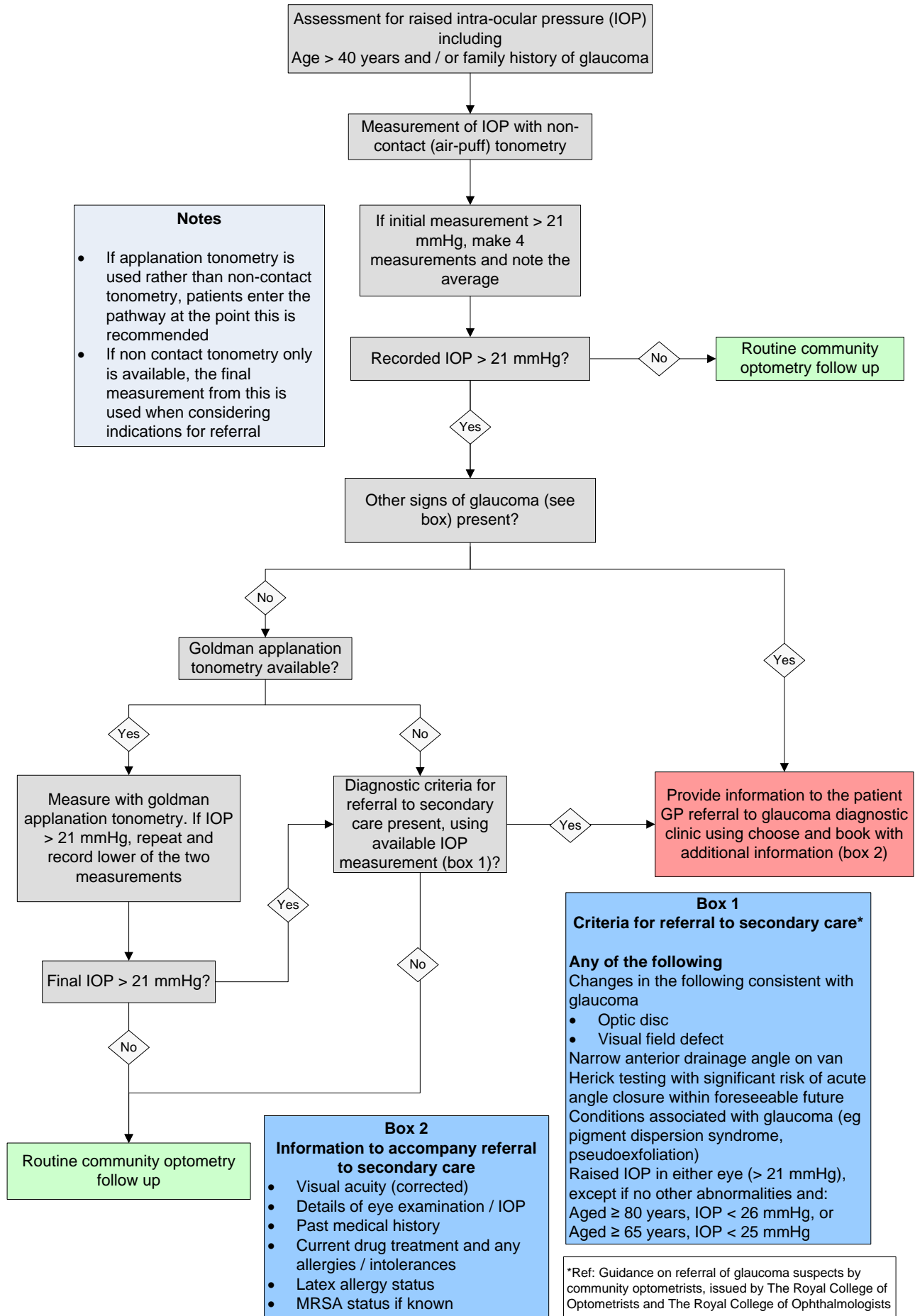
There are various sources of patient information. None are specifically endorsed, but clinicians may find that available on the Royal College of Ophthalmologists website (www.rcophth.ac.uk/page.asp?section=365§ionTitle=Information+Booklets) and from Patient UK (www.patient.co.uk/display/16777233/) helpful.

The Newcastle upon Tyne Hospitals NHS Foundation Trust ophthalmology department have also developed patient information leaflets. At the time of development of these guidelines these were undergoing review, but updated and additional leaflets will be available from the Trust website in due course (<http://www.newcastle-hospitals.org.uk/>).

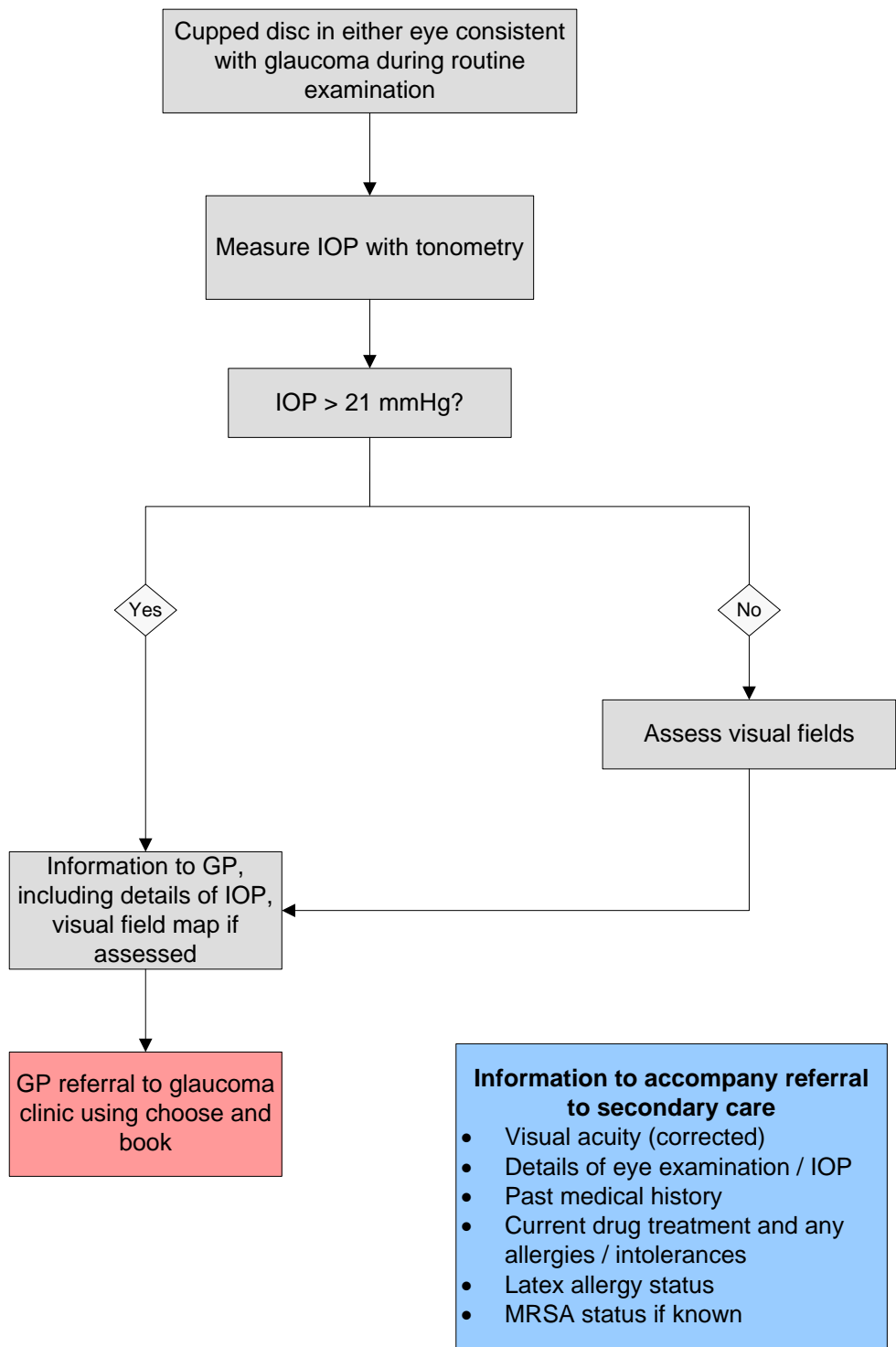
Cataract



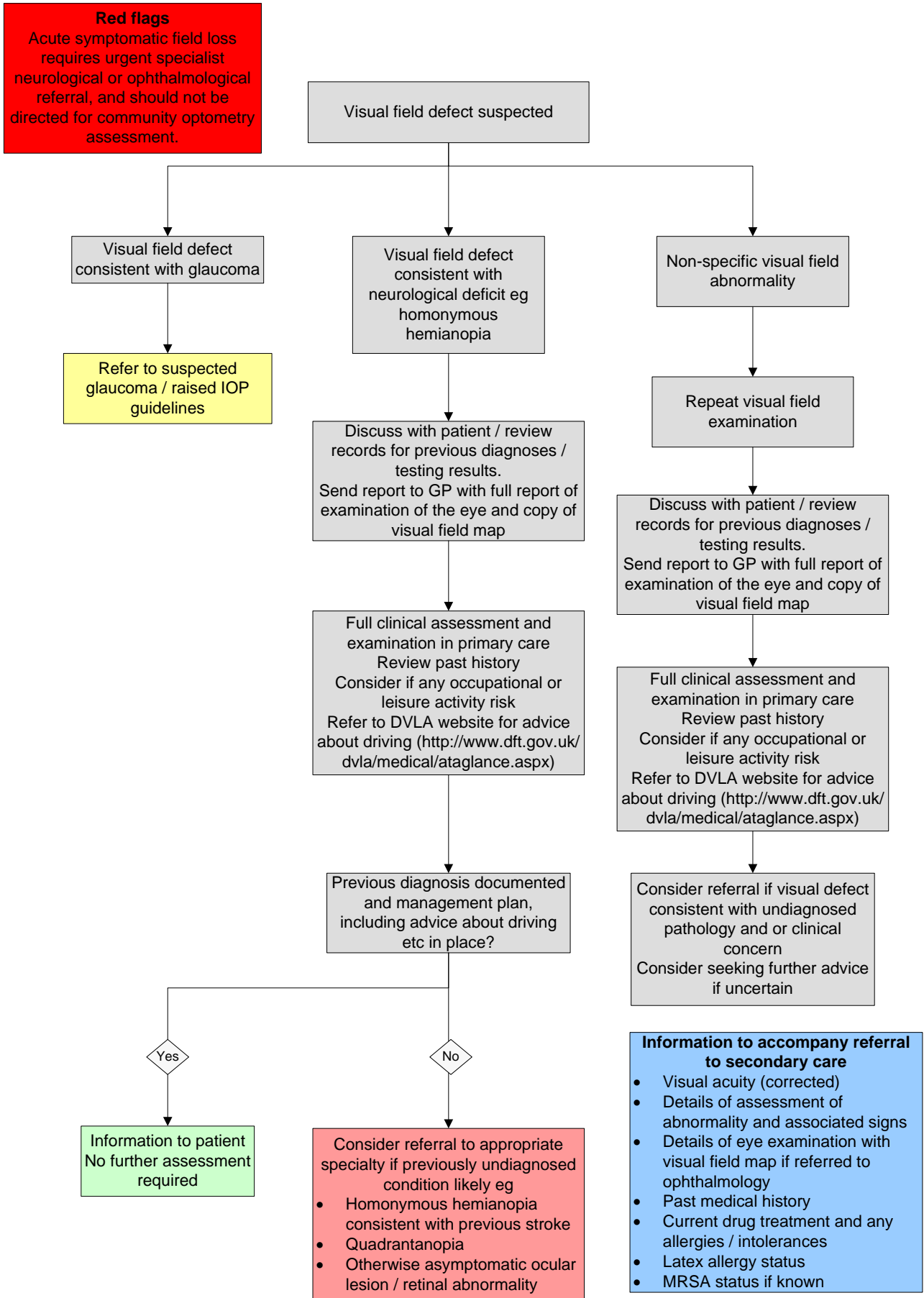
Raised intra-ocular pressure / glaucoma



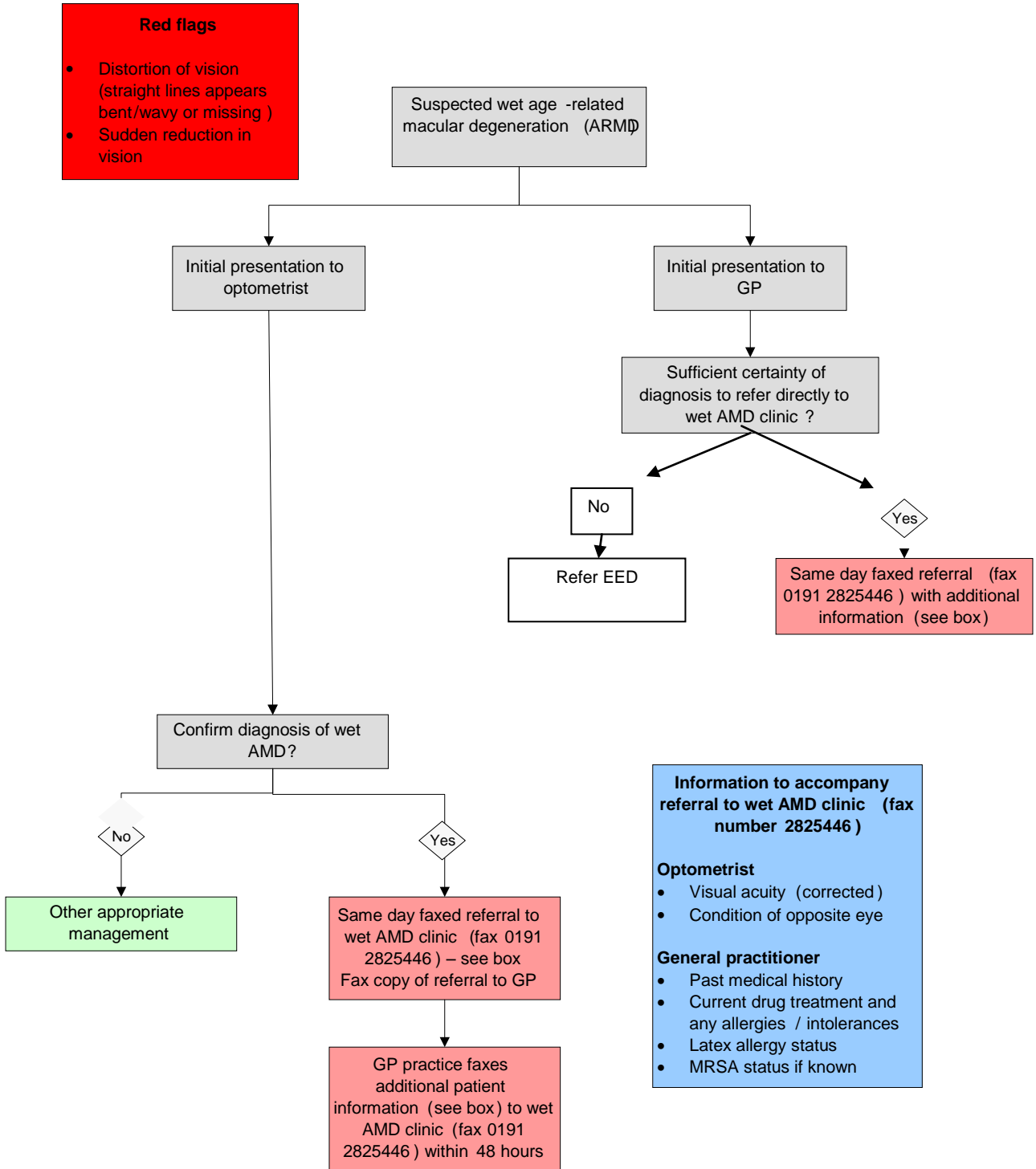
Suspected low tension glaucoma



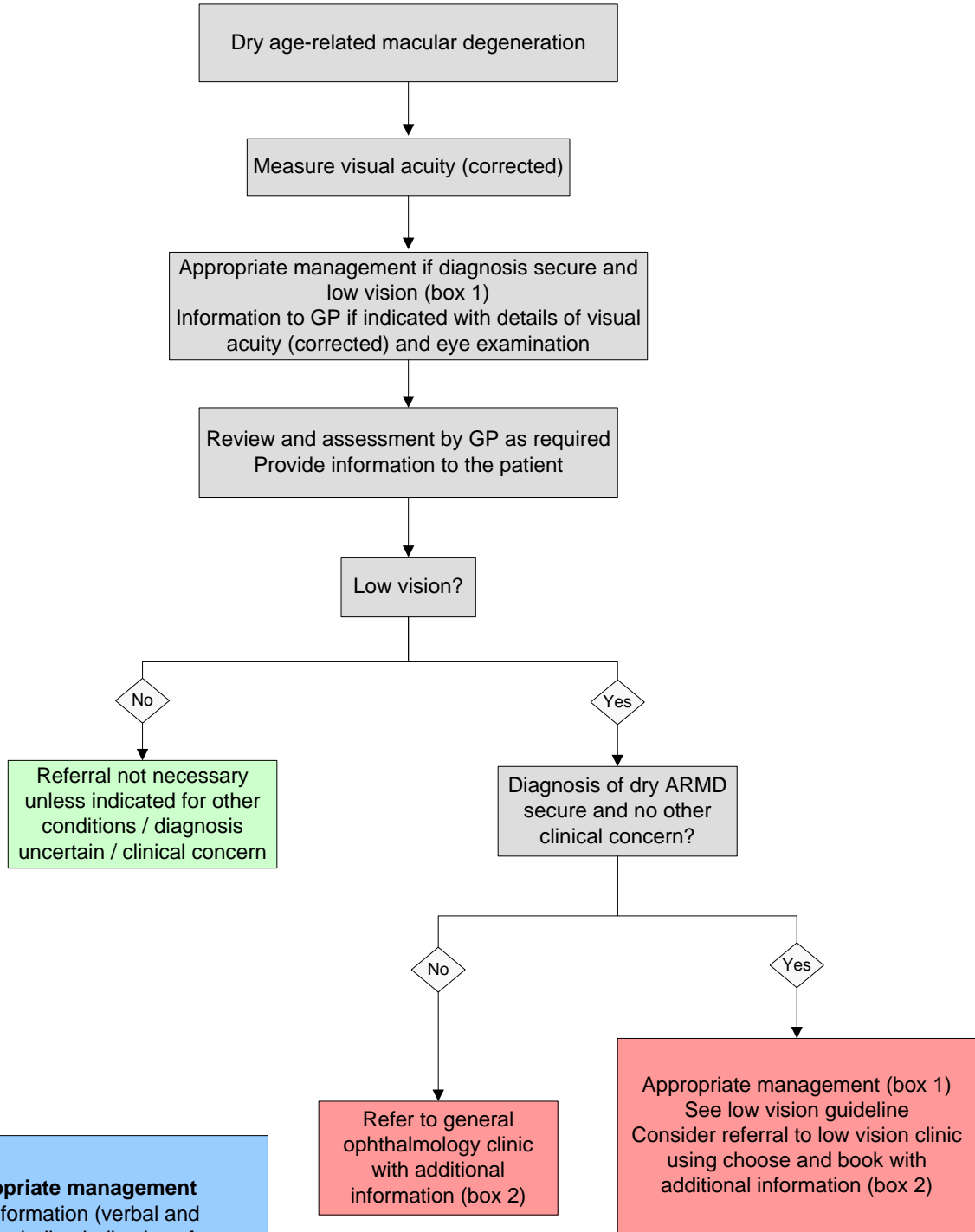
Visual field abnormalities



Wet age related macular degeneration (ARMD)



Dry age related macular degeneration (ARMD)



Box 1

Appropriate management

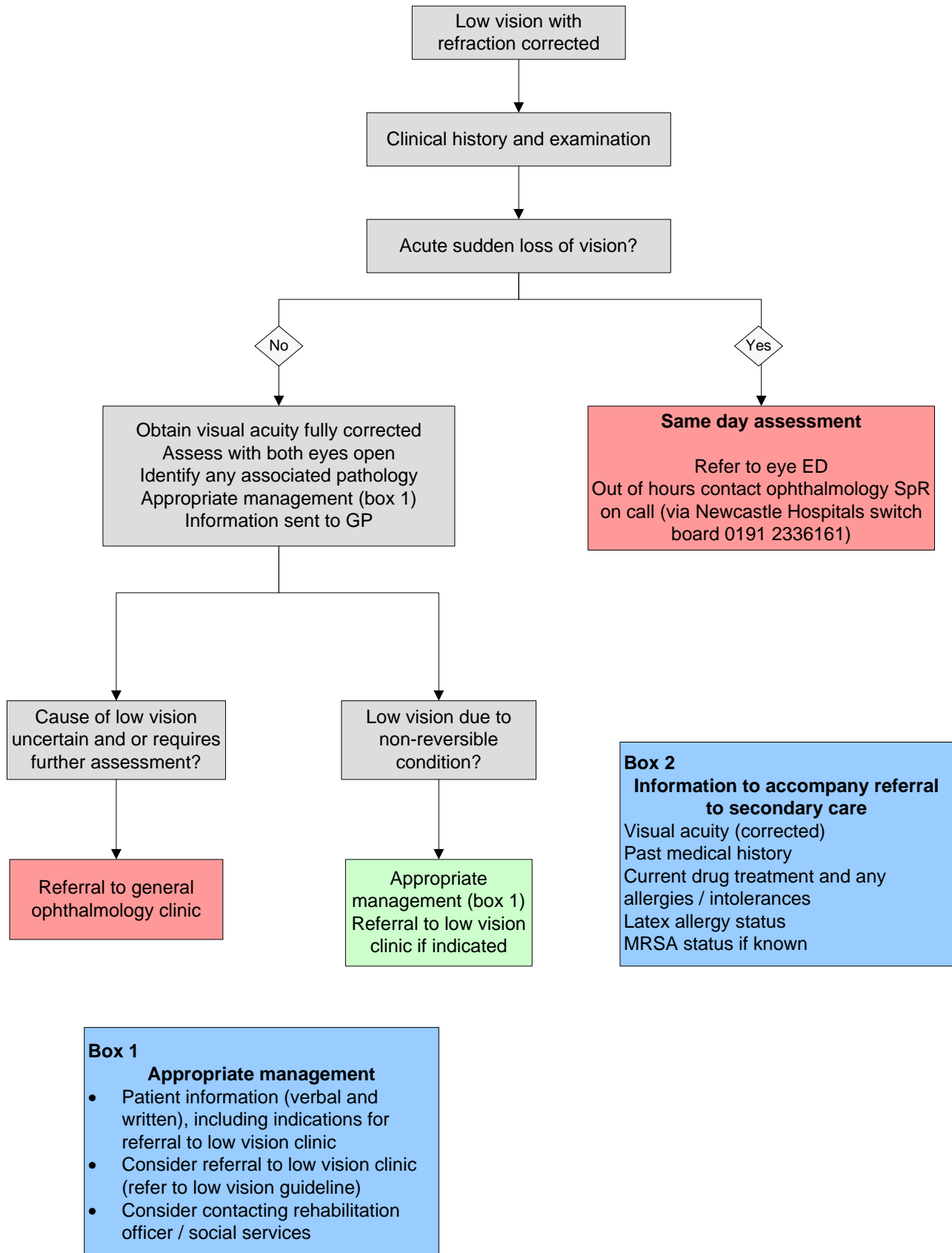
- Patient information (verbal and written), including indications for referral to low vision clinic
- Consider referral to low vision clinic (refer to low vision guideline)
- Consider contacting rehabilitation officer / social services

Box 2

Information to accompany referral to secondary care

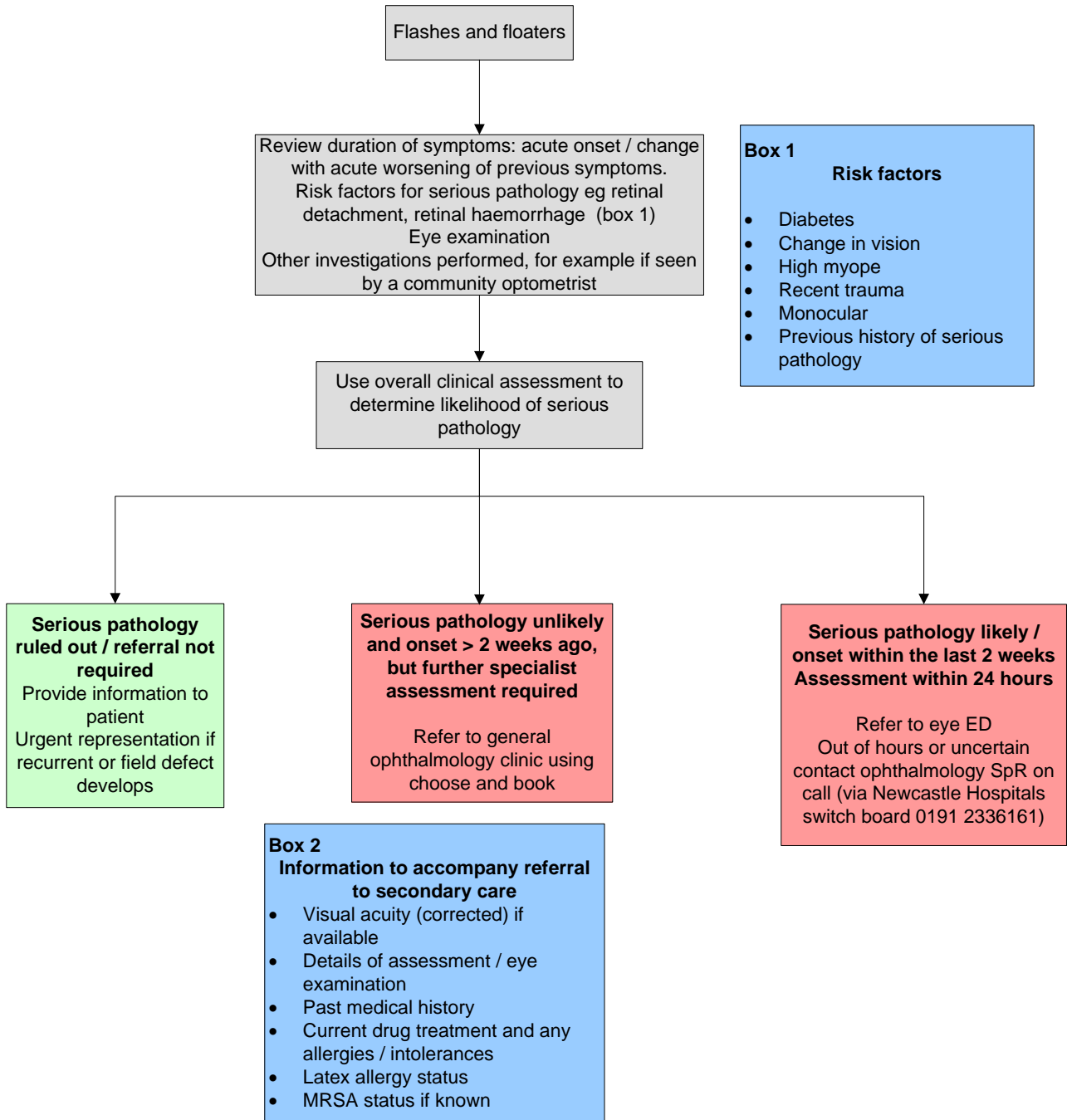
Visual acuity (corrected)
 Past medical history
 Current drug treatment and any allergies / intolerances
 Latex allergy status
 MRSA status if known

Low vision



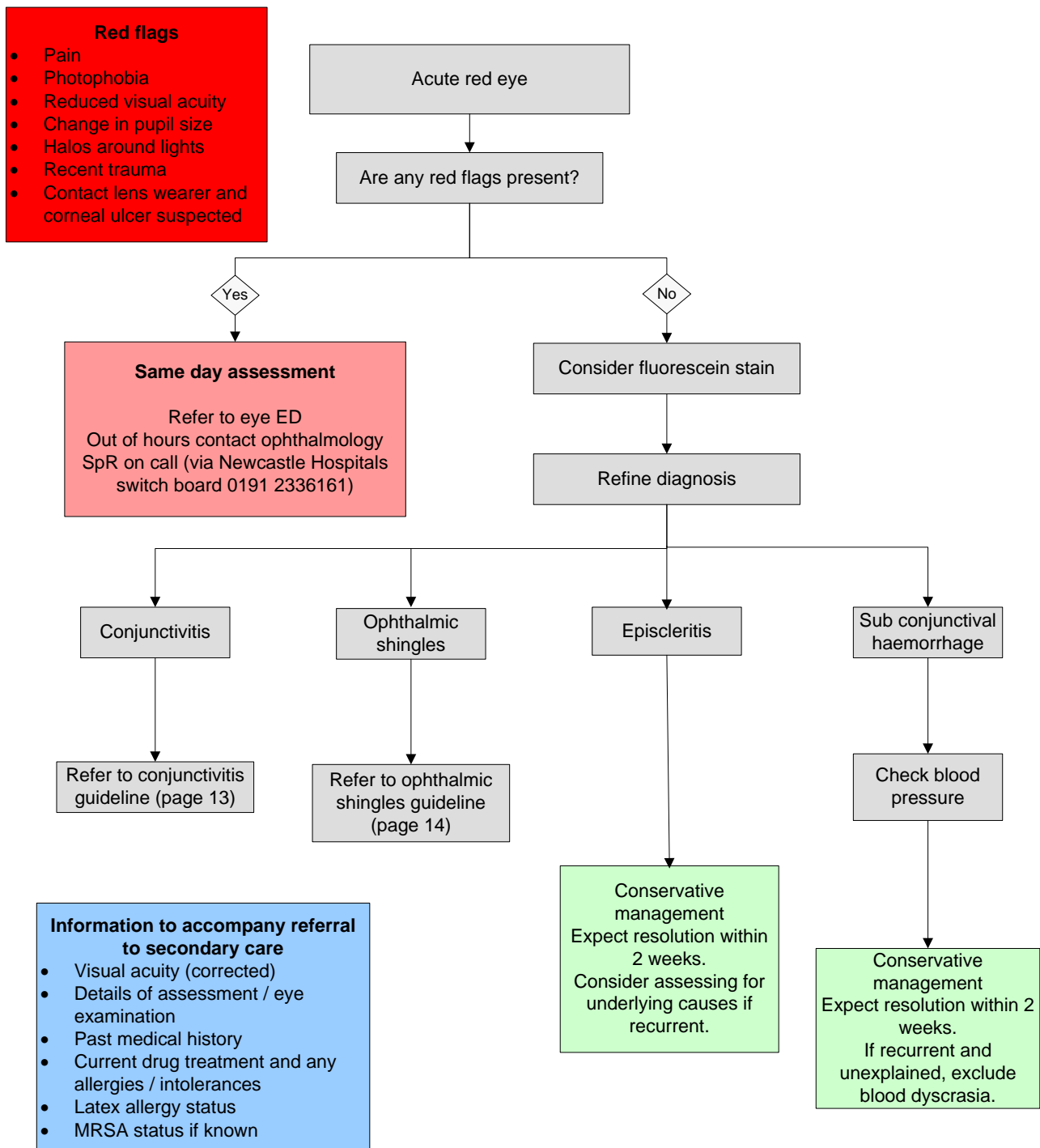
This pathway is largely for patients with low vision with no reversible cause. However, it includes recommendations for further assessment if the underlying cause of low vision is undiagnosed.

Flashes and floaters

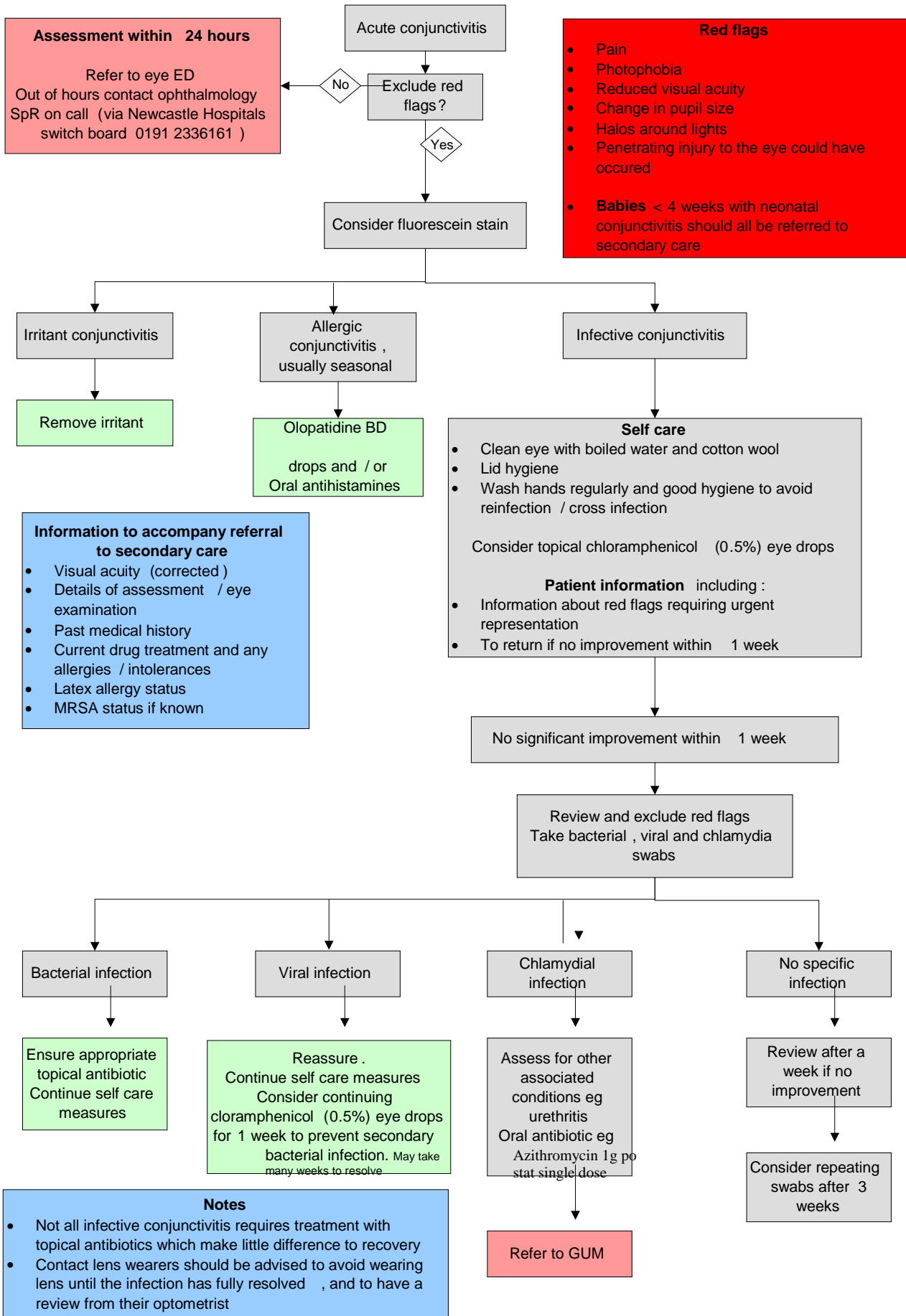


Acute red eye

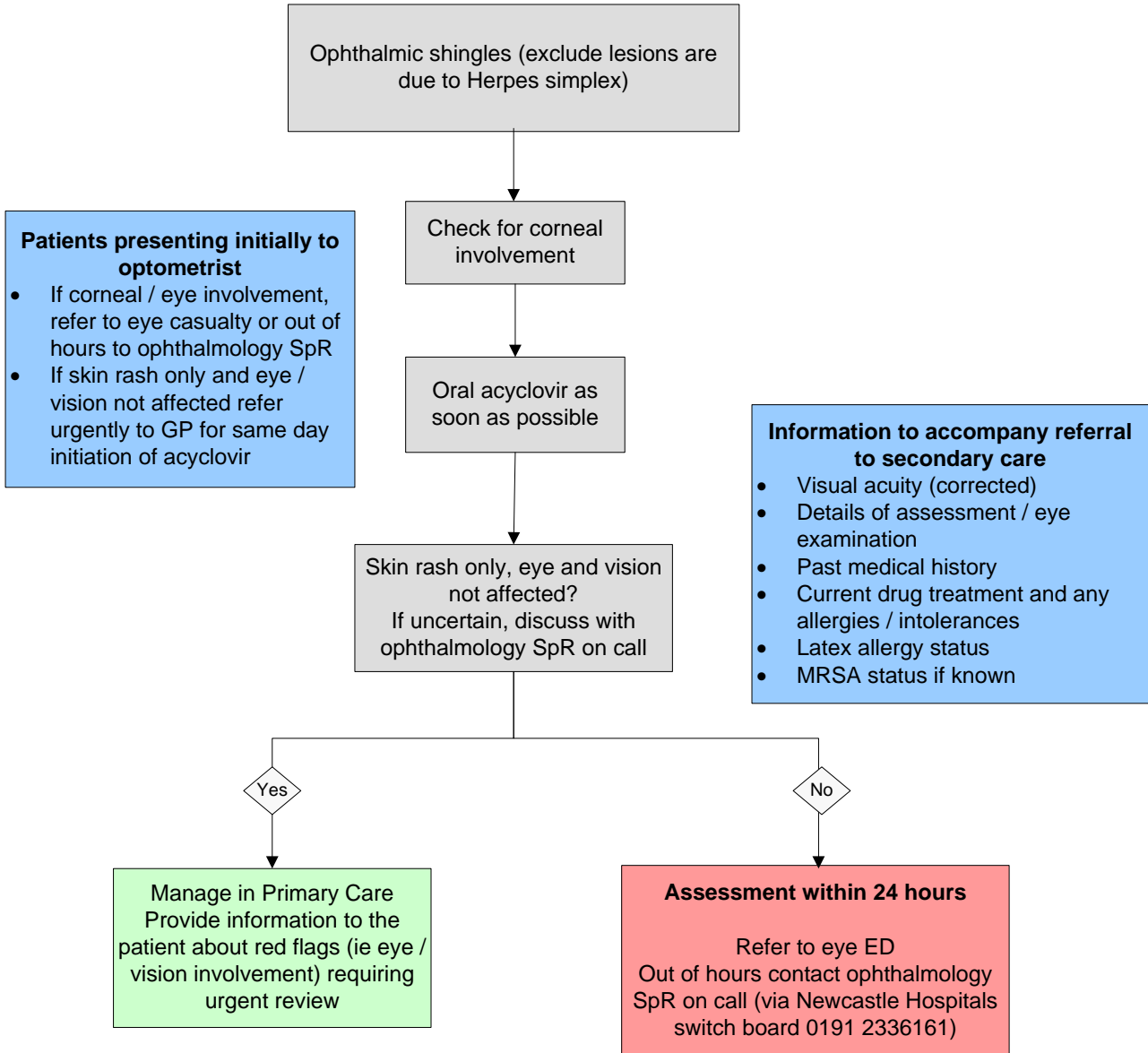
There are many causes of a red eye and conditions other than those included in the guideline below, may cause a red eye as a secondary effect eg lid malposition, foreign body. Each patient should be assessed individually and the following used as appropriate.



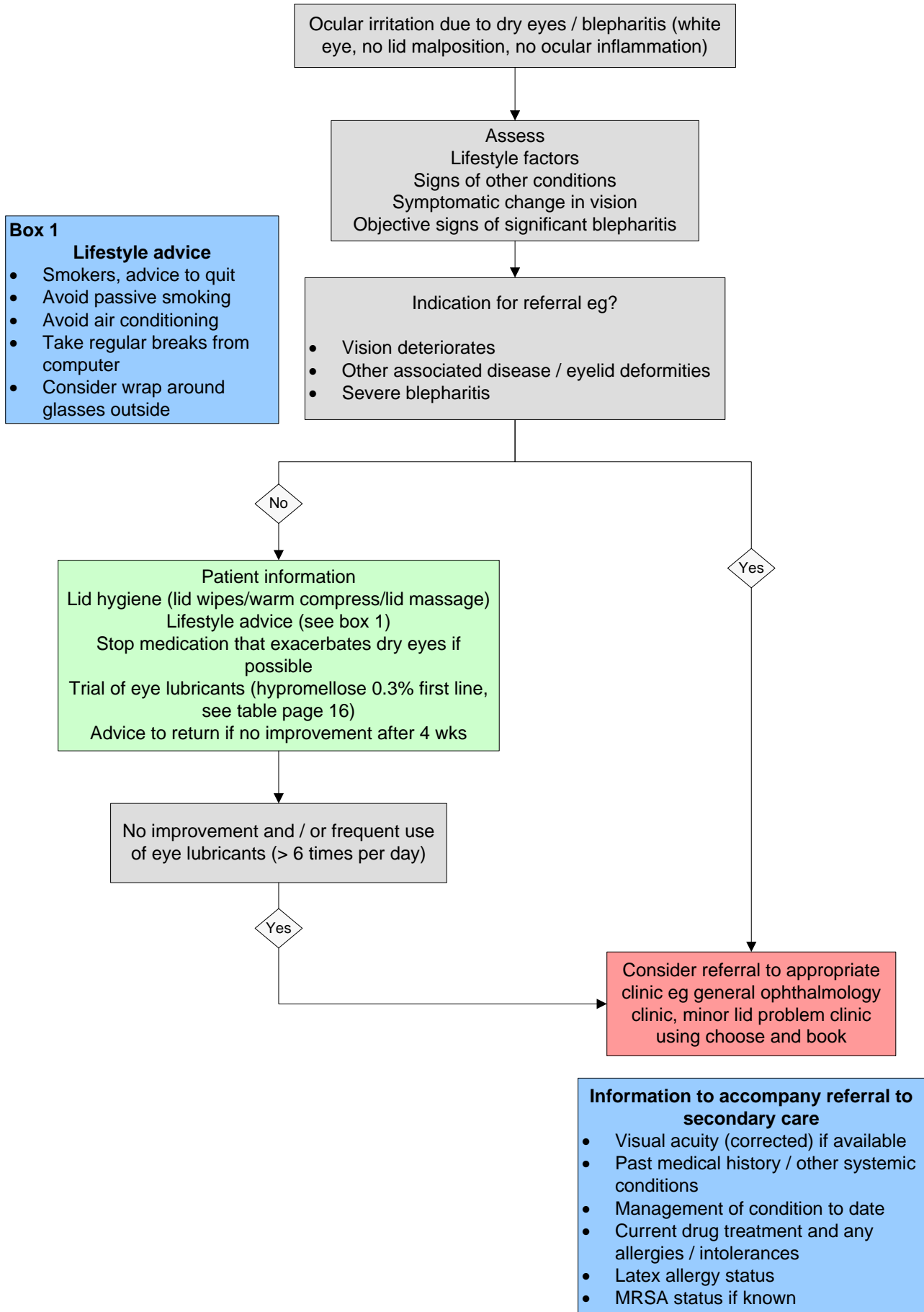
Conjunctivitis



Ophthalmic shingles



Dry eyes / blepharitis



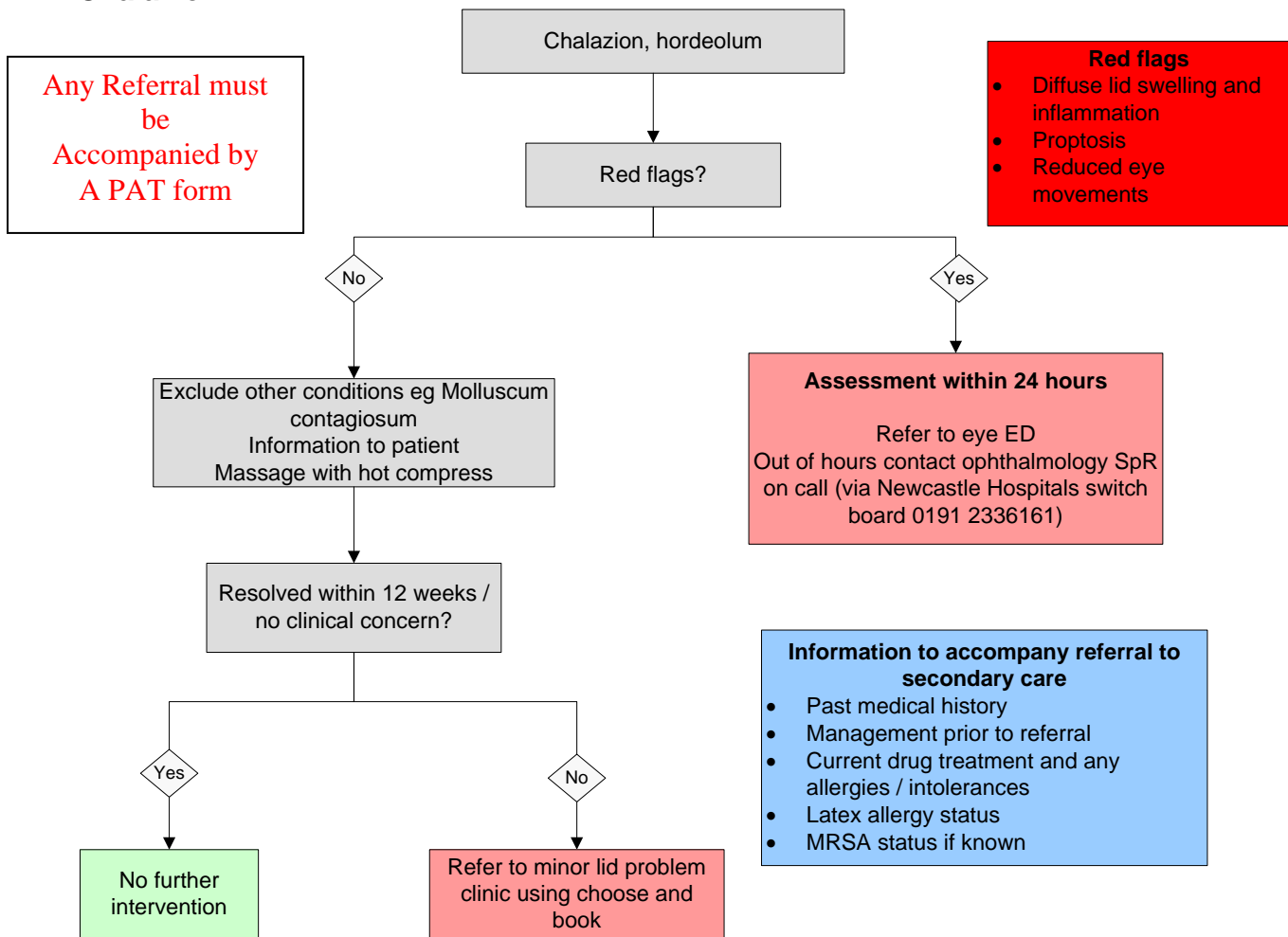
Topical Lubricants – North of Tyne Formulary¹

| Agent | Drug tariff/list price December 2011 | Comments |
|---|--|---|
| First line choice | | |
| Hypromellose 0.3% (10ml) | £1.42 | First line choice North of Tyne APC Formulary |
| Hypromellose preservative free 0.3% | PF Drops - Tear-Lac® 10ml bottle = £5.75, | For use when application is required more than 6 times per day. |
| Alternative choices | | |
| Sodium Hyaluronate 0.4% Unit dose Vials | Clinitas® (30) £5.70 | |
| Sodium Hyaluronate 0.4% Preservative Free | Clinitas Multi® £6.99 | |
| Sodium Hyaluronate 0.1% | Hy-Opti 0.1%® £8.50 | |
| Sodium Hyaluronate 0.2% | Hy-Opti 0.2%® £9.50 | |
| Retinol 250units /g with liquid paraffin 5g | Vitapos® £2.75 | Eye ointments containing paraffin may be uncomfortable and blur vision, so should only be used at night, and never with contact lenses. |
| Liquid paraffin | Xailin Night® £2.49 (3.5g) | Eye ointments containing paraffin may be uncomfortable and blur vision, so should only be used at night, and never with contact lenses. Caution contains wool alcohol |
| Carbomer 980 | £2.80 (10g) | Alternative choice for use 3-4 times per day |
| Carbomer 980 single dose units (30s) | £5.42 | For use when application is required more than 6 times per day. Prescribe licensed formulation - available as single dose units only. |
| Carmellose sodium (30s) | £3.00 (1%) £4.80 (0.5%) | For use when application is required more than 6 times per day. Prescribe licensed formulation - available as single dose units only. |
| Sodium Chloride 5% Drops | £25.25 | |
| Sodium Chloride 5% Drops PF | £25.20 | |
| Sodium Chloride 5% Ointment | £22.50 | |
| Sodium chloride 0.9% minims | £7.14 (20s) | Short acting and suitable as 'comfort drops' or for use with contact lenses |
| Systane | £4.66 (10ml) | Liquid formulation which turns into a gel on contact with eyes providing fast and long |

| | | |
|-------------------------|-------------|--|
| | | lasting relief. The multidose bottle may be used for up to six months after opening in primary care. In contact lens wearers, Systane should be applied before inserting lenses and after removal to extend comfortable wearing times. |
| Systane pres free vials | £4.66 (28s) | For use when preserved formulation has caused irritation. |

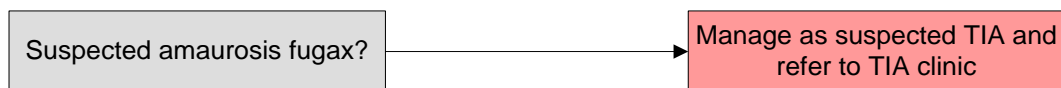
This information was provided by Andrew Green, Senior Lead Clinical Pharmacist

Chalazion

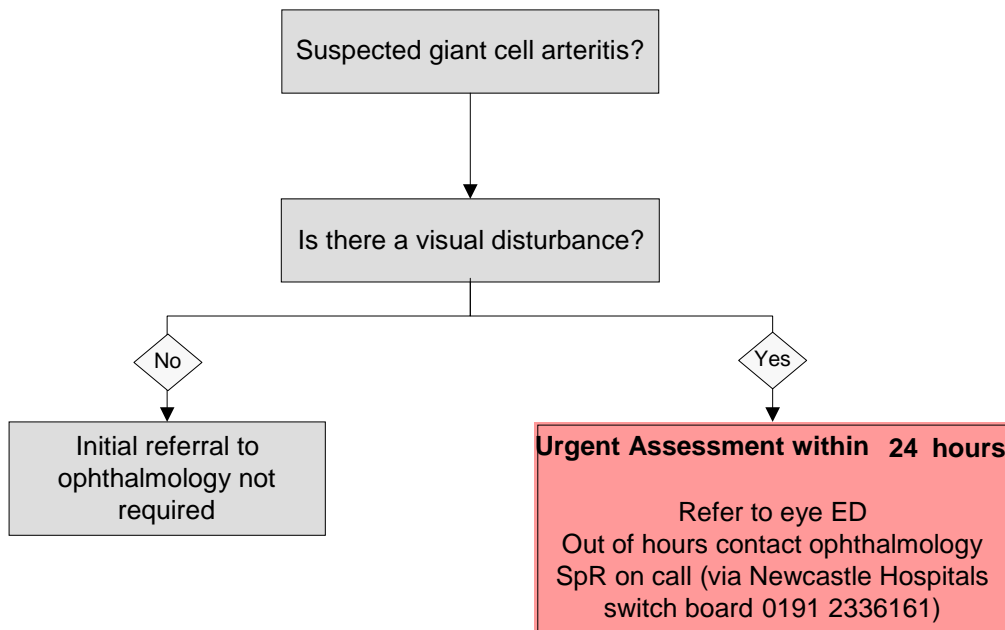


Other conditions

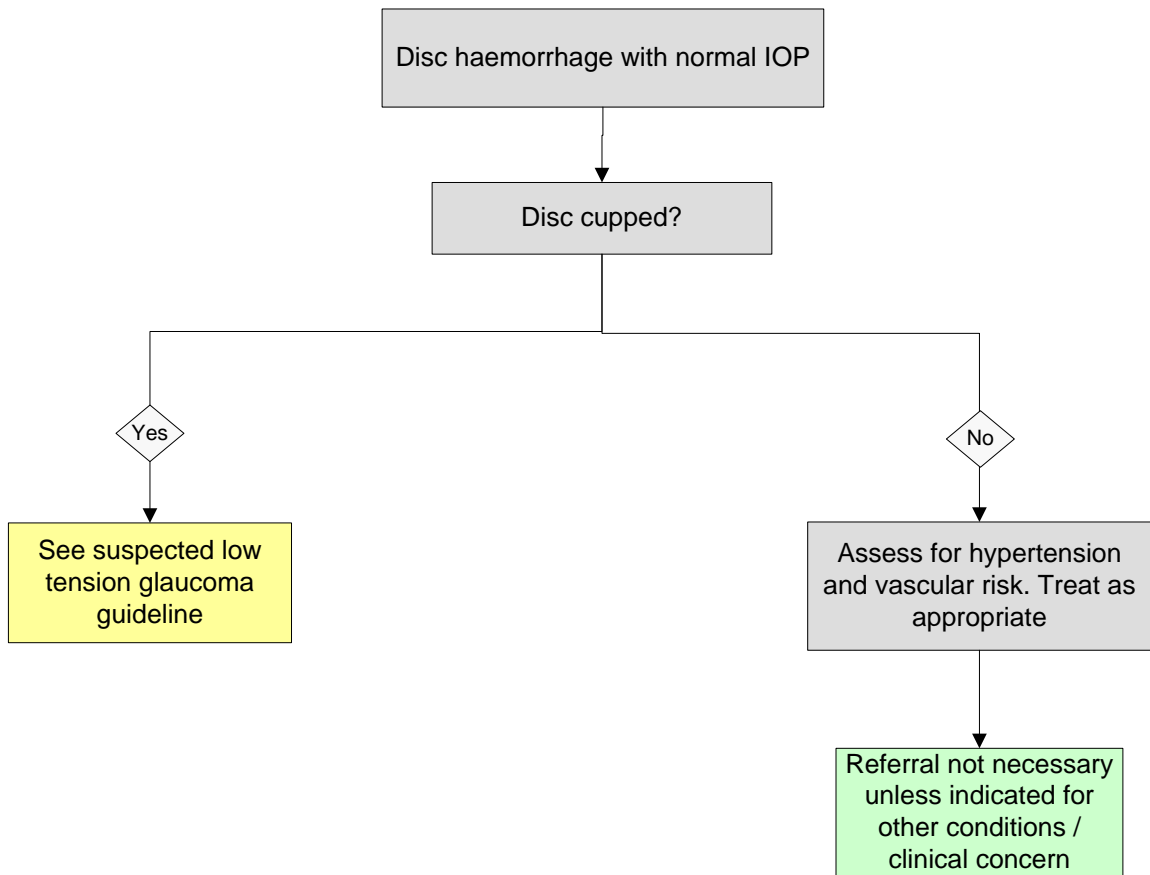
Amaurosis fugax



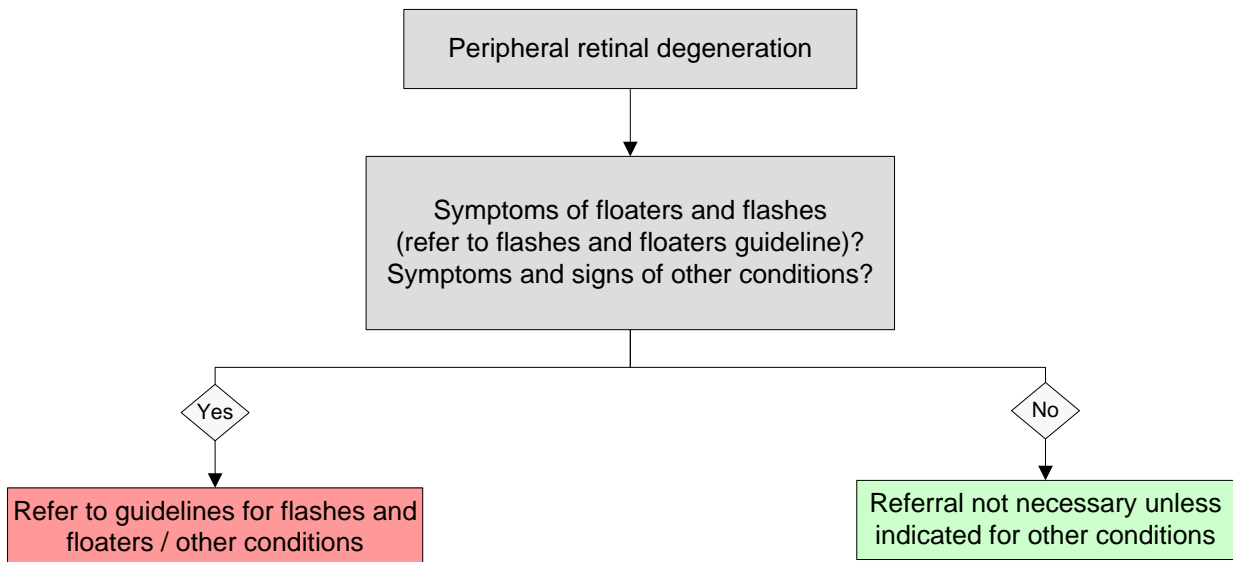
Giant cell arteritis (GCA)



Asymptomatic fundal abnormalities - disc haemorrhage with normal IOP

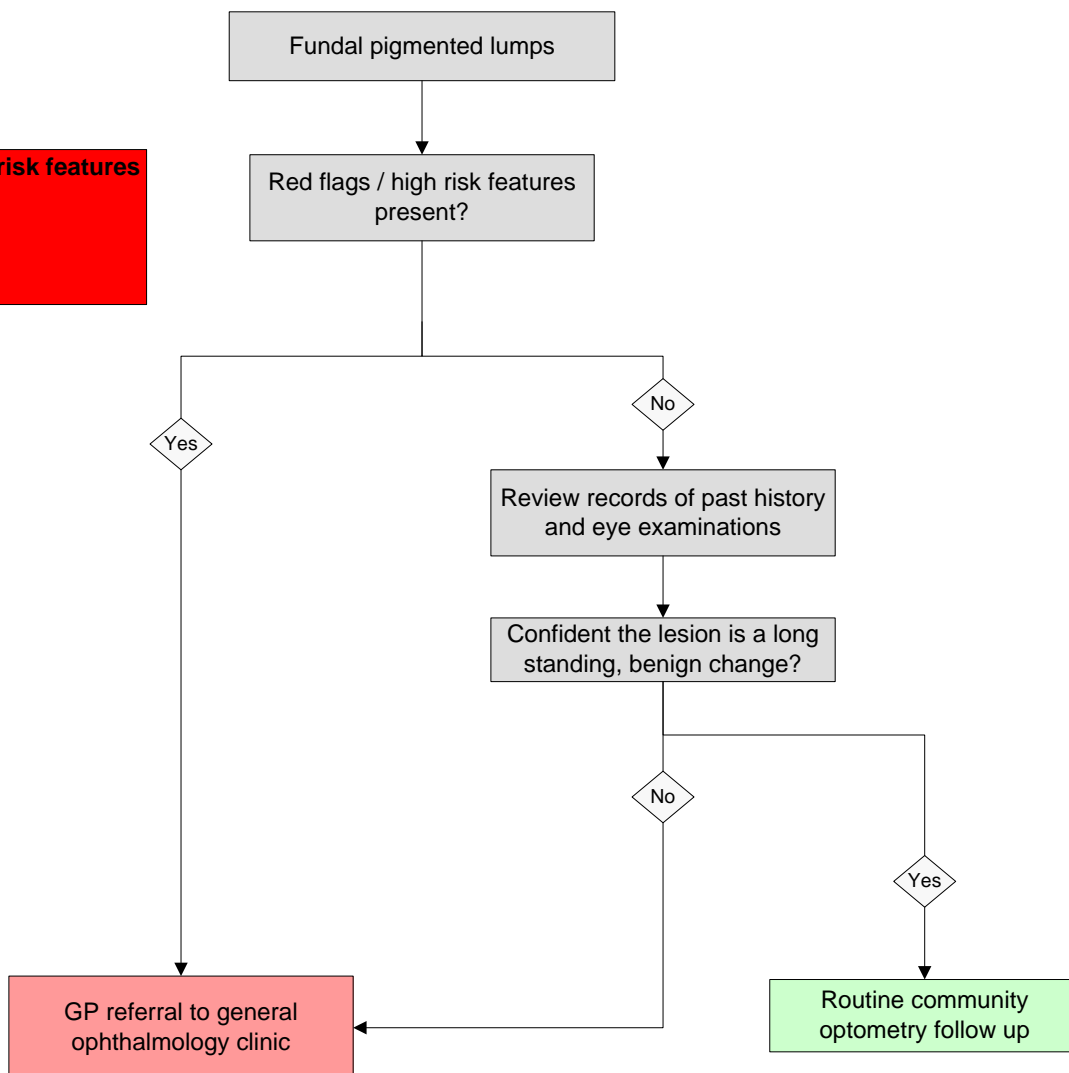


Asymptomatic fundal abnormalities - peripheral retinal degeneration



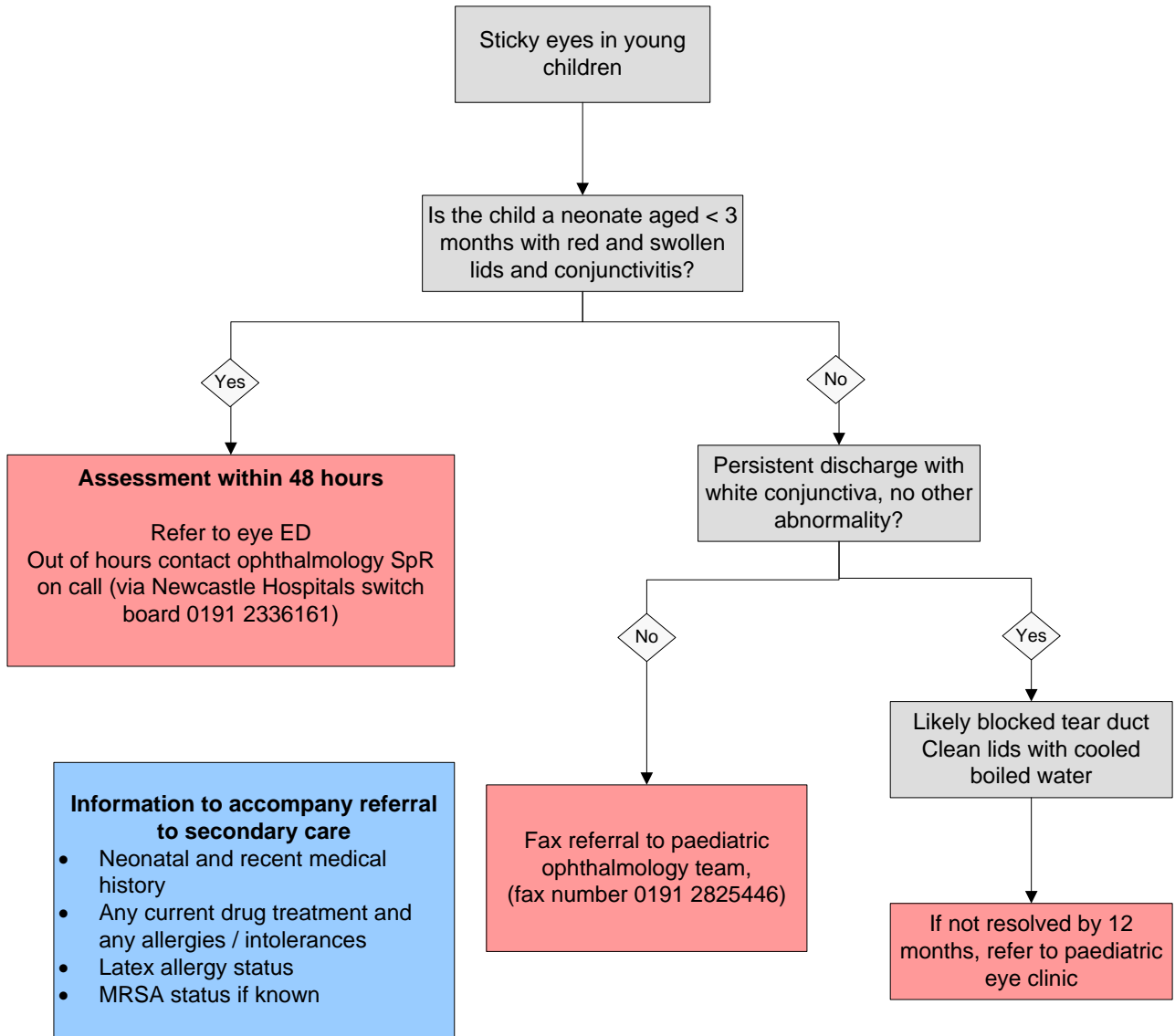
Asymptomatic fundal abnormalities – pigmented lumps

- Red flags / high risk features**
- Raised lesion
 - Large lesion
 - Low vision

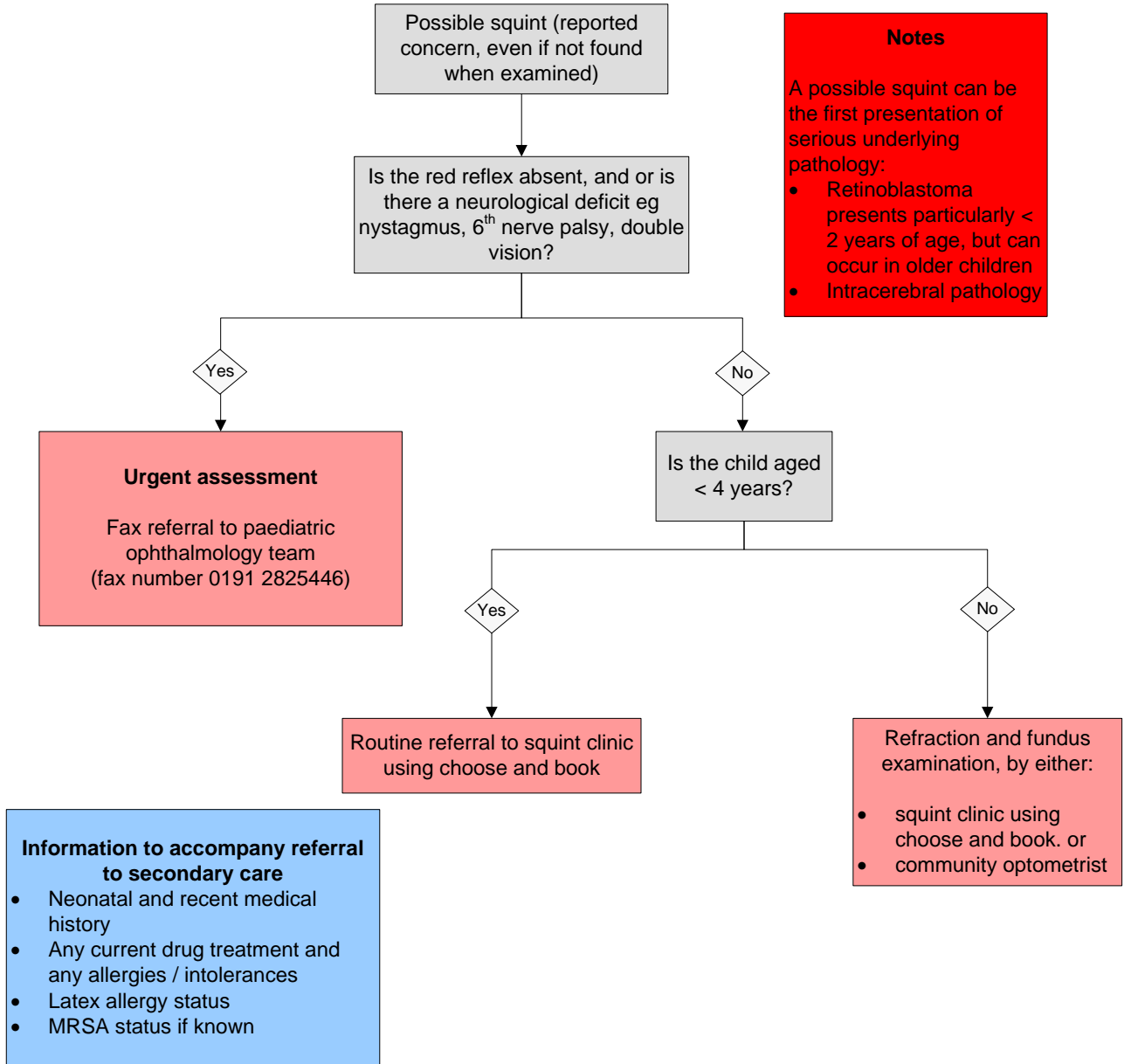


- Information to accompany referral to secondary care**
- Visual acuity (corrected) if available
 - Past medical history
 - Current drug treatment and any allergies / intolerances
 - Latex allergy status
 - MRSA status if known

Sticky eyes in young children



Squint in young children



APPENDIX

Membership of the guideline development group

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Mr K Gales, Optometrist, Newcastle upon Tyne Hospitals NHS Foundation Trust
Mr P Garvey, Optometrist, Newcastle upon Tyne Hospitals NHS Foundation Trust
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Mr P Griffiths, Consultant Ophthalmologist, Newcastle upon Tyne Hospitals NHS Foundation Trust
Dr E Harrison, GP, North Shields
Dr S Kirk, GP, Gateshead
Mr A Marshal, Optometrist
Dr J Matthews, GP, North Shields
Mr M Offord, Optometrist
Dr G Pilkington, GP, Newcastle upon Tyne
Dr H Ryan, GP, Gateshead
Dr M Scott, GP, Newcastle upon Tyne
Dr PTaylor, GP, Newcastle upon Tyne
Ms Sarah Townsend, Optometrist
Mr K Thompson, Optometrist
Dr J Weatherstone, GP, North Shields

Eye lubricant information provided by Andy Green, Specialist Pharmacist for ophthalmology, Newcastle upon Tyne Hospitals NHS Foundation Trust

Circulated and endorsed by all consultant ophthalmologists, Newcastle upon Tyne Hospitals NHS Foundation Trust

Date and date of review

August 2020