

Winter 2010 Newsletter

Welcome to the Eye Vet newsletter. Eye Vet is a veterinary ophthalmology referral service run by Natasha Mitchell MVB CertVOphthal MRCVS through Crescent Veterinary Clinic, Dooradoyle Road, Limerick.

This newsletter is produced quarterly, and is also available online at www.eyevet.ie

Next Newsletter...

The next newsletter will be available on-line.

## **Examination Technique**

### Recognising common conditions of the third eyelid:

### Pigmentation of the third eyelid

The leading edge of the third eyelid may or may not be pigmented. If pigmentation is not symmetrical, the non-pigmented third eyelid may appear to protrude more.



#### Horner's syndrome

The right third eyelid is protruding, along with miosis, reduced palpebral aperture and enophthalmos.



### Nictitans gland protrusion (cherry eye)

The nictitans gland at the base of the inner aspect of the third eyelid is swollen, causing eversion of the third eyelid. These glands should be surgically replaced; removal can lead to severe keratoconjunctivitis sicca in later life.



#### **Everted** cartilage

The cartilage of the third eyelid is distorted. This may also predispose to cherry eye.



#### Plasmoma

Immune-mediated thickening and hyperaemia of the third eyelid, seen most commonly in German shepherd dogs.



# Clinical Case History

A seven-year-old neutered female domestic short-haired cat presented with a one week history of weight loss and a red right eye.

## Examination

The right nictitans gland was protruding, obscuring the view of the globe. There was conjunctival hyperaemia and mild chemosis. There were several smooth non-ulcerated, non-painful cutaneous masses on the head and distal limbs, which the owner hadn't noticed before. The cat was thin and there were increased lung sounds.

## Diagnosis

Protrusion of the nictitans gland (also called cherry eye) and multiple skin nodules. The differentials included bacterial infection, viral infection (e.g. poxvirus), neoplasia or immune-mediated disease. Under general anaesthesia, biopsies were taken from the nictitans gland and two skin nodules.

Histology revealed granulomatous inflammation and multiple acid-fast cytoplasmic inclusions on Ziehl-Neilsen staining.

Therefore, the diagnosis is mycobacteria or nocardia infection. Based on the clinical signs, the most likely diagnosis was infection with the non-tuberculous mycobacteria. Culture would be required, although the organism is difficult to grow.

## Treatment

Tip

This is controversial and could be considered with a protracted course of triple antibiotic combination of fluoroquinolones, clarithromycin or azithromycin and rifampicin. The owners however elected for euthanasia.



Remember to look behind the third eyelid in cases with ocular discharge or corneal ulcers in the third eyelid region – foreign bodies can get trapped here.

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