



Vernal and atopic keratoconjunctivitis

The medical terms are...

Vernal keratoconjunctivitis (pronounced ver-nall ker-a-toe con-junk-tiv-eye-tiss and shortened to VKC) and atopic keratoconjunctivitis (pronounced ay-top-ick con-junk-tiv-eye-tiss and shortened to AKC).

But it's often called...

Ocular allergy or allergic eye disease.

VKC and AKC are uncommon conditions and can cause soreness, itching and redness of the eyes and eyelids. AKC and VKC are a bit like eczema affecting the surface membrane of your eye instead of the skin. Like eczema, it can affect you for some time (months to years) but most young people grow out of having it.

How you see the world:

Allergy of the eyes can sometimes cause you to have blurry vision.

Other symptoms can include:

- itchy or sore eyes.
- red eyes.
- sensitivity to light.
- sticky or watery eyes.

- puffy eyes.

What causes it?

If you or your family have allergic diseases such as eczema or asthma you are more likely to get ocular allergy. Everyone has an immune system which helps to fight off germs that could cause infections. Allergic diseases happen when the immune system reacts to harmless substances like dust or pollen. In some people, it affects their breathing (asthma), their skin (eczema) and, less commonly, their eyes. It is not always possible to discover what is causing your allergy.

How can the doctor tell?

The doctor will usually suspect an allergy as soon as you say your eyes are itchy and they can use a machine called a slit lamp (see picture on next page), to take a closer look at your eyes. The slit lamp will show them if your eyes and eyelids are red. It will also help them to spot if there are tiny bumps called papillae on the inside of your lid or around the dark part of your eye.



Examining the eyes with a slit lamp

Facts:

- allergy of the eyes can be treated, but cannot be cured.
- allergy can run in families.
- most young people eventually grow out of eye allergies.

Getting it sorted:

The doctor will give you anti-allergy eye drops to protect your eyes and make them feel better. These drops need to be used

regularly throughout the day. Do not stop using them until the doctor tells you to, even if your eyes feel better, as this could make the problem return or cause damage to your eyes.

If there is eczema on the skin of your eyelid, your doctor may tell you to use cream or ointment. This will help treat it but it is very important not to rub or scratch your eyes as this can make them worse. Sometimes the edges of your eyelids can be very sore (this is called blepharitis). This will need some more treatment, as explained in the blepharitis leaflet we have available.

Please ask your doctor if you would like a copy.

When the going gets tough

If your eyes are very irritated or the window of your eye (cornea) is damaged, your sight might be affected. If this is the case, you may be given stronger drops such as steroids which will need to be used very often throughout the day. Steroids will usually make your eyes better quickly but they can have side effects, so it is important that these drops are used exactly as the doctor tells you and that you come to your appointments in the clinic.

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Moorfields Direct telephone helpline

Phone: 020 7566 2345

Monday-Friday, 8.30am-9pm

Saturday, 9am-5pm

Information and advice on eye conditions and treatments from experienced ophthalmic-trained nurses.

Patient advice and liaison service (PALS)

Phone: 020 7566 2324/ 020 7566 2325

Email: moorfields.pals@nhs.net



Moorfields' PALS team provides confidential advice and support to help you with any concerns you may have about the care we provide, guiding you through the different services available at Moorfields. The PALS team can also advise you on how to make a complaint.

Your right to treatment within 18 weeks

Under the NHS constitution, all patients have the right to begin consultant-led treatment within 18 weeks of being referred by their GP. Moorfields is committed to fulfilling this right, but if you feel that we have failed to do so, please contact our patient advice and liaison service (PALS) who will be able to advise you further (see above). For more information about your rights under the NHS constitution, visit www.nhs.uk/choiceinthenhs