

# FORESIGHT2020



### Newsletter of GREWAL EYE INSTITUTE

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## Save your eyes this Diwali

atch out, the festival of light can bring darkness to any one of us. Yes, incidence of injuries to eyes with crackers is pretty high. Even if you have decided not to ignite fire-crackers on Diwali, still there are chances that you may get hurt.

The crackers and fireworks have been used for hundreds of years. They are fun to use but can lead to serious accidents. Every Diwali, Grewal Eye Institute has witnessed a spate of cases presenting with minor to major eye injuries. About one third injuries result in permanent damage and one fourth in permanent loss of vision or blindness. One in twenty cases may finally need removal of eye.

Remember, fireworks are not toys. They are explosives. There are mainly three types of crackers commonly available. The sparklers that give bright light like phuljhari, phirki etc, the firecrackers that create an explosion and projectiles like rockets and Atishbazee. Any one of these can damage the eyes, bombs and rockets are most notorius.

Crackers consist of black powder(Gun powder) tightly wrapped in a paper tube with a fuse to light the powder. Black powder contains charcoal, sulfur and potassium nitrate. When it explodes the paper wads or stones inside fly in all directions at a high velocity.

Sparklers are very different from firecrackers. A sparkler burns over a long period of time (up to a minute) and produces bright, brilliant, colourful and showery light. A sparkler consists of fuel, an oxidizer, a metalic powder and a binder. The colours emitted depend on the metal or combination of metals used.

Crackers lead to thermal (burns), chemical or mechani-



cal injuries. Thermal injuries occur if you are very close to the fire works. It usually involves hands or head. Chemical injuries can occur up to one meter. Mechanical injuries can occur even if you are far away. Spectators are more often injured by fireworks than the one who ignites them.

Bombs and skyrockets form two third of injuries. Half of the cases are less than fifteen years of age. Anar, chakree or phuljhari can also cause injuries.

Many a times you may not come to know what hit you. It could be a rocket, Atishbazee or components of wad or stone within the cracker. The injuries are caused either by the explosive or the packing and supportive material in cracker. Mechanical injuries are the most serious since they result from high velocity impact and rupture the eyeball. Although injuries can only be eliminated by ban on use of crackers, some precautions go a long way in reducing their chances. It will be ideal to have a public display of good firecrackers carried out by professionals.

Don't let Diwali bring darkness to you or your family members.

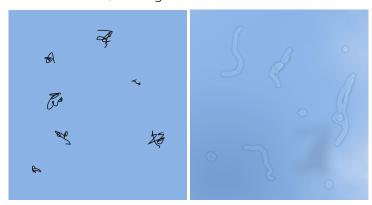


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## Why I see spots and floaters?

ost spots and floaters that you see are innocous. They are caused by bits of protein and other tissue embedded in the clear, gel-like material (vitreous) that fills the inside of the eye.

As we age, the vitreous becomes more fluid and these thread-like strands and shapes move ("float") more easily within the vitreous, which makes them more noticeable. Also, the vitreous can separate or detach from its connection to the retina, causing additional floaters.



Some floaters, especially when accompanied by flashes of light, can indicate something serious is happening inside your eye that could cause a detached retina. If you have a few little dots or threads that come and go depending on how tired you are or what kind of lighting you're in, these are normal floaters. But if you suddenly see flashes of light, clouds of floaters, swirly mists or a curtain over part of your vision, it's best to see an eye specialist (ophthalmologist). •

### Who is Glaucoma Suspect?

he term glaucoma suspect describes a person who does not currently have glaucoma, but one who might be at risk of developing glaucoma.

A glaucoma suspect has all the signs of glaucoma without actually having definite glaucomatous optic nerve damage or a visual field defect. However, a great overlap can exist between findings in people with early glaucoma and in those who are merely glaucoma suspects. This is why regular eye exams are so important, whether or not you need glasses. •

## Eye problems associated with cosmetic & makeup

efore we leap into the ways to avoid eye problems associated with eye makeup, let's take a look at the issues that come from wearing it.



**Scratched cornea.** One of the most serious injuries that can be caused by eye makeup is damage to your cornea. It is possible to scratch your cornea while applying makeup with your mascara applicator or eyeliner. If damage does occur, it could lead to a corneal abrasion, which could become seriously infected.

**Conjunctivitis.** Perhaps the most common eye problem associated with eye makeup is conjunctivitis, or pink eye.

Although most makeup contains preservatives that prevents bacterial growth, it's still possible to have bacteria grow on your makeup. This could happen if it's expired or not properly sealed.

**Allergic reactions.** Often, an allergic reaction to a specific type of eye makeup could cause redness, irritation, eye swelling, or infection. It's important to check the makeup label before you buy it, and if you have an allergic reaction make sure you look for a different product.

#### Reduce the risk associated with makeup

- Your eye makeup should be yours and yours alone. It's important not to share your eye makeup to avoid spreading bacteria, even if it's your best friend.
- Apply eyeliner on the outside of the lash line. By applying eyeliner to the outside of the lash line it will prevent any scratches to your eye or eyelids.
- At all times, make sure your eyeliner pencil is sharpened the way to avoid any painful scratches against your eyes.
- To avoid any bacterial infections make sure to always change your eye makeup every three to four months, and avoid expired products.

### **Contact Lens**

t is not rare to see a case with complications of Contact Lenses. Unfortunately some of them can be vision threatening. The fault may lie in eyes, contact lens, solution, storage or handling.

People with existing dry eyes, ocular allergies, repeated corneal infections, long working hours on computers and dry dusty environment are more likely to develop complications. It is better to avoid Contact Lenses in these situations.

Serious eye infections that can lead to blindness affect upto 1 out of every 500 contact lens users per year.

The soft contact lenses

have some inherent disadvantages. First, they are like a sponge. Pollen, debris, tiny bugs stick to their front surface. With every blink, the inner surface of lids rubs constantly over it leading to follicles (pimple like swellings) on the under surface of upper lids.

Second pertains to oxygen supply to cornea. Cornea is clear glass like and has no blood vessels. It gets nourishment from tear film. Contact lens affects the oxygen supply to cornea and we see many cases with unwanted blood vessels developing in the cornea.

Constant contact leads to changes in cornea known as "contact lens warpage". It creates problems in planning and performing Laser vision correction procedures.

Many people prefer contact lens over laser because of confidence of ignorance. If you are eligible for Bladefree, then laser vision correction is a safer alternative and one time expense only.

#### Contact Lens Care

- Don't use water to clean/store your soft CL as this can lead corneal infections.
- Always place lens in dry, clean lens case and fill with fresh solution every day, whether it has been used or not.
- Proper cleaning of the contact lens with clean hands is recommended.
- Never wear contact lenses in bathroom. Always use a clean dry counter.

### **ReLEx SMILE** Advantages

## SMILE is modern Vision Correction technique to *remove the spectacles*



SMILE Vision Correction is a 100% blade free approach to laser vision correction. There are no blade related risks and complications.



No excimer laser. No burning of tissues or smell of burning during SMILE. Only laser machine does it all.



Corneal surface cells are not disturbed in SMILE. There is hardly any pain or discomfort during or after the procedure.



SMILE is flapless technique. SMILE, there is absence of typical flap related complications and less risk of dry eye.



Incision in SMILE (2mm) is 10 times smaller than the Lasik (20mm). Corneal biomechanical strength is maintained after SMILE.





## Tips: In case of Fire Cracker Injury

- 1 It is very important to give proper first aid if accident happens. Do not rub the eye.
- 2 Stay calm, do not panic.
- 3 Do not delay medical attention even for seemingly mild injuries. "Mildly" damaged areas can worsen and end in serious vision loss, even blindness.
- 4 If any eye tissue is torn, rubbing might push out the eye's contents and cause more damage.
- **5** Shield the eye from pressure.
- **6** Do not attempt to rinse out the eye. This can be even more damaging than rubbing.
- Shield the eye from pressure.
- On't take Aspirin/Disprin to reduce the pain. It thins the blood and might increase bleeding.

#### It is chemical reaction, not a toy

A firework requires three key components: an oxidizer, a fuel and a chemical mixture to produce the color. The oxidizer breaks the chemical bonds in the fuel, releasing all of the energy that's stored in those bonds. To ignite all you need is a fire, just a fuse or a direct flame. BOOM!

#### **Preventions**

- Never give fireworks to children.
- Close supervision of all fireworks activities by an adult is mandatory.
- 3 Use fireworks outdoors only. Always have water handy (a garden hose and a bucket).
- 4 Never experiment or make your own fireworks.
- **6** Light only one firework at a time. Never re-light a "dud" firework (wait 15 to 20 minutes and then soak it in a bucket of water).
- 6 Never throw or point fireworks at other people.
- Never carry fireworks in your pocket.
- Never shoot fireworks in metal/glass containers. Wear cotton clothes.

#### WE ALL SERVE YOU AT GEI CEO Dr. SPS Grewal Community Oph. Dr. Avika Kanathia (Gold Medalist, Fellow: Moordfield Eye Hospital, UK) Anaesthesiologists Dr. Sukhbir Grewal (Former Assoc. Prof. Dr. SPS Grewal Cataract & PGI, Chandigarh) Lasik Clinic Dr. Mukta Goel Glaucoma Clinic Dr. Guneet Mann **Dermatologist** Dr. SD Mehta **Retina Clinic** Dr. Ajay Aurora **Optometrists** Mr. Pawan Kumar Dr. Manpreet Brar Ms. Shivali Thakur Dr. Sangeeta Roi Mr. Shekhar Barua Mr. Gagan Kapoor **General Clinic** Dr. Shuchi Goel Ms. Sujata Pathak Dr. Reema Sadhu Mr. Nitesh Pradhan Dr. Sanjay Mishra Mr. Saurav K Gupta Ms. Kusum Yadav Squint & Pediatric Dr. Amit Gupta Ms. Twinkle Chopra Ms. Shalini Cornea Clinic Dr. Mukesh Aggarwal



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