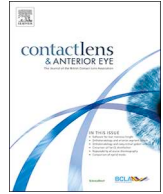




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Increased risk of ocular injury seen during lockdown due to COVID-19



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COVID-19 is a global pandemic which has affected many aspects of health care and impacted social mobility around the world. Although the main impact of this disease is in critical care, other medical specialties have been affected due to mobilisation of staff, resource availability, self-isolation and social distancing. Several reports also suggest that COVID-19 can present with ocular findings such as conjunctivitis [1].

This article reports the effect of lockdown on cases presenting to the ophthalmology emergency department (ED) at Birmingham and Midland Eye Centre over the week up to 15 April 2020. A total of 293 patients presented to ED (about 35% of the normal numbers seen in ED in a typical week). There was a rise in traumatic ocular injuries occurring at home (Total 23 during this week in comparison to 10 a week in 2019) Twelve patients had injuries during gardening, eight patients doing DIY/home improvement projects and three through exercise at home through skipping rope and resistance elastic bands injuries. The majority of these injuries resulted in corneal abrasions. However, there was one case of hyphaema, one chemical injury and one full thickness lid laceration.

Furthermore, the impact of self-isolation and shielding resulted in the delayed presentation of three patients over the age of 70 years old, who presented late with microbial keratitis, 7-14 days after symptoms had started.

Almost 8% of attendances were likely to be as a consequence of lockdown and hence we recommend that all patients take necessary precautions and wear appropriate eye protection whilst conducting any DIY and gardening at home. Further clear guidance should also be issued to raise awareness of the potential ocular injuries which can occur at home. Finally, it is important for patients to seek professional

ophthalmology advice regarding ocular symptoms in a prompt manner despite COVID-19 to avoid more serious problems.

These patients could have been seen in the many optometry practices that are still seeing emergencies and the possibility of remote consultation would allow trained staff to give appropriate advice and possible treatment without the need for in-hospital face to face consultations reducing the transmission of COVID-19 and freeing the medical staff for other work [2,3].

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