Ophthalomology

CLINICO-MICROBIOLOGICAL PROFILE OF DACRYOCYSTITIS AT TERTIARY CARE CENTER OF UTTARAKHAND, NORTH INDIA

| Dr. Shanti Pandey | Associate Professor, Department of Ophthalmology, Government Medical College Haldwani, Nainital, Uttarakhand India,263139 |
|----------------------|---|
| Dr. Astha Rawat* | PG JR 3, Department of Ophthalmology, Government Medical College Haldwani, Nainital, Uttarakhand India,263139 *Corresponding Author |
| Dr. Vinita Rawat | Associate Professor, Department of Microbiology, Government Medical College Haldwani, Nainital, Uttarakhand India,263139, |
| Dr Vimlesh Sharma | Associate Professor, Department of Ophthalmology, Government Medical College Haldwani, Nainital, Uttarakhand India,263139 |
| Dr. G S Titiyal | Professor, Department of Ophthalmology, Government Medical College Haldwani, Nainital, Uttarakhand India,263139 |
| Dr. Nitin Mehrotra | Assistant Professor, Department of Ophthalmology, Government Medical College Haldwani, Nainital, Uttarakhand India,263139 |

ABSTRACT Background: Dacryocystitis is infection and inflammation of lacrimal sac. It is an important cause of ocular morbidity in India. This study is to see the demographic factors like age, sex, occupation and social status and to see the microbiological pattern in dacryocystitis. **Material and Method:** It is a cross sectional study, conducted at tertiary care centre of Kumaon region, Haldwani, Uttarakhand, North India from 1 January 2020 to 30 September 2021. Samples from the content of lacrimal sac are collected from these patients and sent to microbiology department for immediate processing. **Results:** A total of 81 eyes of 70 patients were studied. Incidence of Dacryocystitis was found more in females than in males, the mean age of presentation being 56.26±12.30 years overall. Culture positive infection was obtained from 67 (82.7%) eyes and no growth was observed from14(17.2%) eyes. Most of the samples yielded Gram positive bacteria (67.9%) predominantly coagulase negative Staphylococcus species among gram positive and Pseudomonas, Klebsiella and Citrobacter among gram negative organisms.

KEYWORDS: Dacryocystitis, coagulase negative Staphylococcus, Culture positive infection, Haldwani

Introduction

Dacryocystitis is infection and inflammation of lacrimal sac1. The disease occurs as a isolated incident (acute) or as an ongoing form (chronic)2. Distal obstruction of nasolacrimal duct converts the lacrimal sac into a stagnant pool, which easily becomes infected leading to dacryocystitis3 making it an important cause of ocular morbidity in India4.Whatever may be the cause, stasis provides a fertile media for the bacterial growth5. Patient with dacrocystitis may present with different symptoms, in acute cases, patient can present with swelling, redness and tenderness at lacrimal region and in chronic cases patient may remain asymptomatic or may have watering, discharge from the eye and swelling at lacrimal region6.Chronic Dacryocystitis is commonly encountered by an Ophthalmologist accounting for 87.1% of Epiphora(watering), which causes social embarrassment due to chronic watering from eyes. It commonly affects females over 40 years of age with peak incidence in 60-70 vears.

Material and method

It is a cross sectional study of dacryocystitis patient attending eye OPD of department of Ophthalmology Dr Susheela Tiwari Memorial Govt. Hospital, Haldwani, Uttarakhand from 1 January 2020 to 30 September 2021. Ethical clearance was obtained from Institutional Ethics Committee, Government Medical College, Haldwani, Uttarakhand. The study was conducted on patients of all age groups, occupations and socio -economic status. Detailed clinical history and complete Ophthalmological examination was done. After clinical diagnosis of dacryocystitis was made, specimens were collected using sterile cotton swabs under strict aseptic condition. It was sent promptly to the microbiology laboratory for immediate processing. The collected samples were plated on 5% sheep blood agar, chocolate agar, mac-conkey agar and incubated at 37°C for 24-48 hours.

Any growth on the plates was identified with the help of colony characteristics, gram- staining and standard microbiological techniques.

Result

48

INDIAN JOURNAL OF APPLIED RESEARCH

Table 1: Age distribution of the patients:

| Age group | Total | Percentage |
|-----------|-------|------------|
| <20 | 4 | 5.7 |
| 20-29 | 3 | 4.3 |
| 30-39 | 5 | 7.1 |
| 40-49 | 8 | 11.4 |
| 50-59 | 30 | 42.9 |
| 60-69 | 15 | 21.4 |
| 70-79 | 5 | 7.1 |
| Total | 70 | 100 |



Fig 1: Age wise distribution in dacryocystitis

In our study most common age group affected is 50-59 years (50%) followed by the age group affected is 60-69 years (18.6%). In our study the youngest case was an 11 months year old male and the oldest case was a 79 years old male.

Table 2: Distribution of the patients according to gender

| GENDER | Frequency (No.) | Percentage (%) |
|--------|-----------------|----------------|
| Female | 47 | 67 |
| Male | 23 | 33 |
| Total | 70 | 100 |

This table shows that majority of the patients in this study were females (67%) and the rest of the patients were males (33%).

Table 3: Occupation of patients

Children

total

33

23

20

| Volume - 12 | Issue - 06 | June - 2022 | PRINT ISSN No. | 2249 - 555X | DOI : 10.36106/ijar |
|-------------|------------|-------------|----------------|-------------|---------------------|
| | | | | | |

(35.71%) being affected followed by farmers (32.14%) in their study. Patel K et al $(2014)^{14}$ observed the same result. Occupation Frequency Percentage (%) Agriculture/farmer 15 21.4 Watering with discharge (41.9%) was the main presenting feature 27 38.5 Homemaker followed by watering (40.7%) and watering with swelling in lacrimal sac area(37%). Kinikar v. et al¹⁵(2021) and Patel K et al¹⁴ found similar 05 7.1 Teacher result in their study. Other 7 10 Labour 10 14.2 Microbiological study 4 Students 57

2.8

100

In our study Coagulase negative Staphylococcus epidermidis (34.5%) was the most common Gram- positive cocci followed by Staphylococcus aureus (13.5%) and Streptococcus pneumoniae (11.1%). Gram negative organisms included Pseudomonas aeruginosa (7.4%) followed by Klebsiella pneumoniae (4.9%). Our study fairly corelate with Pradeep A.V. et al which also showed Coagulase Negative Staphylococci (CONS) were the predominant isolates (15/21; 71%) followed by Staphylococcus aureus (3/21; 14%). Similar result was reported by Bharathi MJ et al9.

In our study most frequently, isolated Gram-negative organism was Pseudomonas aeruginosa (7/18; 6.4%) followed by Klebsiella (6/18; 5.5%). Similar results were found in study conducted by Ahuja et $al(2017)^{8}$

REFERENCES

- Shah CP,Shantani D.A comparative bacteriological profileand antibiogram of 1. Dacryocystitis. Nepal Jr of ophalmology.2011;3(6):134-139
- Jacobs, H.G. Symptomatic epiphona. Brit. J. Ophth. 1959;43:415 Traquair HM. Chronic dacryocystitis, its causation and treatment. Arch Ophthalmol 3. 1941;26:165-80 Shah CP, Shantani D.A. Comparative bacteriological profile and antibiogram of
- 4 Dacryocystitis. Nepal Jr of Opthalmology 2011;3(6):134-139 Lacrimal drainage system. In: Kanski JJ, editor. Clinical Ophthalmology, 6th ed. New
- 5. York: Butterworth-Heinemann; 2007. p. 163-4.
- Lacrimal drainage system. In: Kanski JJ, editor. Clinical Ophthalmology, 6th ed. New York: Butterworth-Heinemann; 2007. p. 163-4. MyrenYanoff, Jay S. Duker. The lacrimal drainage system, Chapter-98, In: Ophthalmology, 2nd Edn. Mosby Publication. Pp.761-769 J Community Med. 6.
- 7. 2008
- Vivek Harkare1, Kanchan Dhote2.*, Kunal Shrimal3, Nitin Deosthale4, Priti Dhoke5, 8. Sonali Khadakkar6
- Ahuja S, Chhabra AK, Agarwal J (2017) Study of Bacterial Spectrum in Patients of 9. Chronic Dacryocystitis, at a Tertiary Care Centre in Northern India. J Community Med Health Educ 7: 536 Bharathi MJ, Ramakrishnan R, Maneksha V, Shivakumar C, Nithya V, Mittal S.
- 10
- Comparative bacteriology of acute and chronic dacryocystitis. Eye. 2008;22:953–60 R. P, R.J. GB, E.R. N, H.V. P, Shah JS.A Bacteriological Study of Dacryocystitis. J Clin of Diagn Res.2012; 6(4):652-655 11
- 12. Madhusudan, Yatni Muslikan, Nabilabh ,Adil Hussain, microbiological aetiology of acute dacryocystitis in hospital university sains Malaysia, Kelantan Malaysia, journal of acute diseases (2012)31-34 R.Sudha. A Clinical Study of tiology and Pathogenisis of Chronic Dacryocystitisin A
- 13. Tertiary Care Centre. Ophthalmol Allied Sci.20195(1):29-4
- Khatoon J, Rizvi SA, Gupta Y, Alam MS. A prospective study on epidemiology of dacryocystitis at a tertiary eye care center in Northern India. Oman J Ophthalmol 14 2021:14:169-72
- Patel K, Magdum R, Sethia S, Lune A, Pradhan A, Misra RN. A clinico-bateriological 15. study of chronic dacryocystitis. Sudanese J Ophthalmol 2014;6:1-5 Kinikar VP, Pendyala Y, Kumar KV. Clinico- Microbiological Study of Chronic
- 16 Dacryocystitis. International Journal of Health and Clinical Research. 2021;4(8):258-64

Fig: Showing occupation of patients

In this study majority of the patients are females and most of them are homemaker (38.5%) who are commonly affected. Farmers (21.4%) and labourers (14.2%) are next commonly affected followed by teachers (6.8%). The least affected are students (5.7%) whereas two patients were children below the age of 2 years (2.8%)

2

70

Table 4: Microbiological profile (culture positive and culture negative)

| S. no. | Organism | No of cases | Total | Percentage |
|--------|---|-------------|-------|------------|
| 1 | Coagulase negative staphylococcus | 28 | 55 | 34.6 |
| 2 | Methicillin resistant staphylococcus aureus | 11 | | 13.6 |
| 3 | Methicillin sensitive staphylococcus aureus | 7 | | 8.6 |
| 4 | Streptococcus | 9 | 1 | 11.1 |
| 5 | Pseudomonas | 6 | 10 | 7.4 |
| 6 | Klebsiella | 4 | | 4.9 |
| 7 | Mixed growth | 2 | 2 | 2.5 |
| 8 | No growth | 14 | 14 | 14 |
| Total | | 81 | | 100 |

Among 81 samples of 70 patients, most of the samples yielded Grampositive bacteria (n=55, 67.9%). Out of these Gram -positive culture coagulase negative Staphylococcus were seen in 28 samples (50.9%). Staphylococcus aureus were grown in 18 samples (32.7%) and Streptococcus was seen in 09(16.4%) sample. Pseudomonas and Klebsiella was seen in 6(7.4%) and 4(4.9%) samples, respectively. Out of 81 samples only 2 sample (2.5%) showed mixed growth of Methicillin sensitive Staphylococcus aureus and Citrobacter and 14(14%) samples showed no growth.

Discussion

According to this study dacryocystitis incidence is more common in females. Harkare V et al' and Ahuja et al⁸, noted similar female predominance in their study. Majority of females are housewives.

The most common age group affected in this study was 50-59 years. Which correlated well with the result of the study conducted by Bharathi MJ et al⁹ and R. Prakash et al¹⁰

Coming to laterality, the right side(50%) is relatively more commonly affected than left side(34.2%) and involvement of both eyes was 15.7%. This corelates well with the studies done by Madhusudan et al 11 R.Sudha¹² and Khatoon J et al¹³

The rate of infection is more common among males who belong to the agricultural sector (22%) and daily wage labourers (10%) because of occupational exposure and poor socio-economic condition. Surendra P. Wadgaonkar et al (2016), found majority of the wage laborers

49