



Awareness of Stye

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ABSTRACT

The aim of study is to create awareness of stye among the age group of 30 to 50 years. It is a questionnaire type study focus on causes, signs and symptoms and prevention of stye among the people of age group between 30 to 50 years. Stye is an infection of the sebaceous glands of Zeis at the base of the eyelashes, or an infection of the apocrine sweat glands. It is a red, painful lump near the edge of the eyelid that may look like a boil or a pimple. Stye usually forms on the outside of the eyelid. But sometimes it can form on the inner part of the eyelid. In most cases, a stye will begin to disappear on its own in a couple days. The reason is to find out about the prevalence and create awareness about stye as it is most common infection.

Keywords: Hordeolum, causes, treatment, prevention.

INTRODUCTION

Many of the bacteria that can invade the human body are also capable of attacking the surface or interior of the eye. Stye is one of the most common eye infection forms at the base of an eyelash¹. The medical name for a stye is hordeolum (or hordeola if there are more than one). It looks like a small yellow pus-filled spot². Staphylococcal bacteria are the usual cause of stye. These bacteria normally live harmlessly on the skin, but they can cause infection if the skin is damaged. Touching mucus from the nose and then rubbing the eye is one way of moving staphylococcal bacteria to the eyelid³. Resembling a pimple on the eyelid, a stye can grow on the inside or outside of the lid.

The first signs of stye are pain, redness, swelling and tenderness⁴. Typically it don't cause vision problems.

Most styes heal on their own within a few days. It is healed by applying hot compresses for 10 to 15 minutes, three or four times a day, over the course of several days. In most cases, the stye will then rupture, drain and heal without further intervention⁵.

It may also cause frequent watering in the affected eye, increased light sensitivity and a feeling like something is in the eye (eye doctors call this a "foreign body sensation")⁶.

There are two types of stye. External stye (external hordeolum). This is the common stye. It appears along the edge of the eyelid due to infection in the root (follicle) of an eyelash. It may start off as a small red lump but, as it develops into a collection of pus (a little abscess), it looks like a yellow pus-filled spot. Internal stye (internal hordeolum). These are also called meibomian styes. They happen when a type of gland in the eyelid (meibomian gland) becomes infected. This type of stye is found on the inner surface of the eyelid, against the eyeball. Both

external and internal styes are not contagious, and are never a sign of cancer⁷⁻⁹

MATERIALS AND METHODS

A random sample of 50 people among the age of 30 to 50 years was selected and surveyed using a questionnaire.

The questionnaire study focused on causes, signs and symptoms, prevention and treatment of stye among the people.

The interview was performed by the author. Variations in opinions and according to awareness of stye among male and female were analysed by using paper and pen method.

Finally mean values are calculated, further results are discussed.⁹⁻¹⁰

DISCUSSION AND RESULTS

This questionnaire is based on the awareness of stye which include causes, signs and symptoms, investigation, prevention and treatment.

Knowledge about Causes

Fig (1) and Table (1) shows knowledge about causes.

This study showed that the effect of television (42%) is the most causes followed by expired cosmetics (18%), touches eyes with dirty hands (16%) and others causes (12%).

Totally 88% people were aware about the causes of stye out of (38%) males and (50%) females. Remaining (12%) of the people are not aware of the causes of stye.

Knowledge about Signs and Symptoms

This study showed that the eye pain (44%) is the most common symptoms followed by frequent watering (22%), dry eyes (10%) and others symptoms (8%). Totally 94%



people were aware about the signs and symptoms of styed out of (44%) males and (50%) females.

Remaining (6%) of the people are not aware of the signs and symptoms of styed.

Fig (2) and Table (2) shows knowledge about signs and symptoms.

Knowledge about Investigation

This study showed that styed is investigated by just at a look (54%) as the most common investigation followed by Magnifying lens (12%), other investigation (8%).

Totally of people were aware of investigation out of males (34)%, females (40%).

Remaining (26%)of the people are not aware of investigation of styed.

Fig (3) and Table (3) shows knowledge about investigation.

Knowledge about Treatment

This study showed that the hot compressor (44%) is the most common treatment followed by eye drops (36%), Minor surgery (2%) and others treatment (10%). Totally (92%) people were aware about the signs and symptoms of styed out of (42%) males and (50%) females. Remaining (8%) of the people are not aware of the treatment of styed. Fig (4) and Table (4) shows knowledge about treatment.

Knowledge about Prevention

This study showed that contaminated cosmetics (34%) is the most common prevention followed by contaminated water (32%), contaminated clothes (24%) and others (2%). Totally of people 92% were aware about the prevention of styed out of that of males (44%) and females (48%). Remaining of the people (8%) are not aware of the prevention of styed. Fig (5) and Table (5) shows knowledge about prevention.

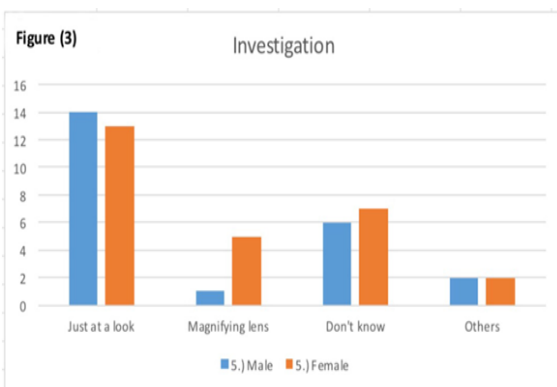
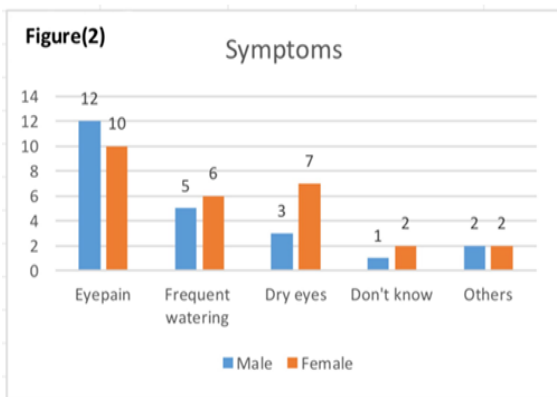
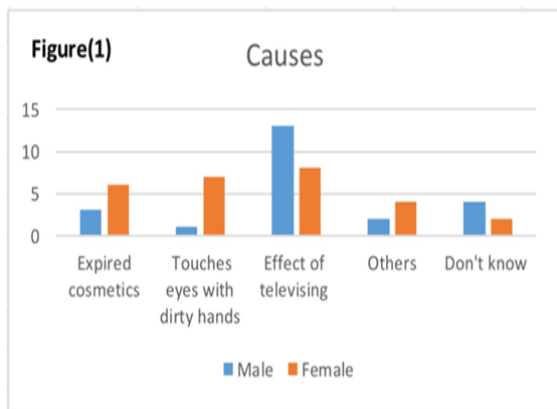


Table 1

Causes	Male	Female	Total
Expired cosmetics	3	6	9(18%)
Touches eyes with	1	7	8(16%)
Effect of television	13	8	21(42%)
Others	2	4	6(12%)
Total	19	25	44
Percentage	38%	50%	88%
Don't know	4	2	6(6%)

Table 2

Signs and	Male	Female	Total
Eye pain	12	10	22(44%)
Frequent watering	5	6	11(22%)
Dry eyes	3	7	10(20%)
Others	2	2	4(8%)
Total	22	25	47
Percentage	44%	50%	94%
Don't know	1	2	3(6%)

Table 3

Investigation	Male	Female	Total
Just at a look	14	13	27(54%)
Magnifying lens	1	5	6(12%)
Others	2	2	4(8%)
Total	17	20	37
Percentage	34%	40%	74%
Don't know	6	7	13(26%)



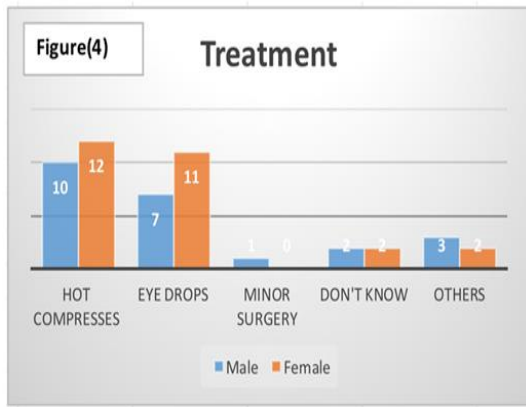


Table 4

Treatment	Male	Female	Total
Hot compressor	10	12	22(44%)
Eye drops	7	11	18(36%)
Minor surgery	1	0	1(2%)
Others	3	2	5(10%)
Total	21	25	46
Percentage	42%	50%	92%
Don't know	2	2	4(8%)

CONCLUSION

In this study totally 86% of people know about causes, signs and symptoms, investigations, prevention and treatment of stye out of this 46% are females 40% are males. Stye is the most commonest form of bacterial infection. It may also lead to some other complications if it is not treated properly.

Thus, the doctors need to educate the people about different aspects of causes, symptoms, treatment and investigation of stye so that they may protect themselves from infection.⁶⁻¹⁰

REFERENCES

- Brafman AH. Styes : a curious chain. Br J Gen Pract. 2(365), 1992 Dec.4, 537-8.
- Briner AM. Treatment of common eyelid cysts. Aust Fam Physician. 6(6), 1987 June 1, 828, 830.
- Lederman C, Miller M. Hordeola and Chalazia. Pediatr Rev. 20(8), 1999 Aug, 283-4.
- Olson MD. The common stye. J Sch health. 61(2), 1991 Feb, 95-7.
- Mueller JB, McStay CM. Ocular infection and inflammation. Emerg Med Clin North Am, 26, 2008, 57–72.
- Lindsay K, Nichols JJ, Dickersin K. Interventions for acute internal hordeolum. Cochrane Database Syst Rev, 4, 2013, CD007742.
- Watson AP, Austin DJ. Treatment of chalazions with injection of a steroid suspension. British Journal of Ophthalmology. 68(11), 1984, 833–5.
- Willcox M, Bengaly T, Lopez V, Falquet J, Lambert B, Diallo D. Traditional malian ointment for styes. Journal of Alternative and Complementary Medicine. 14(5), 2008, 461–4.
- Copeman PW. Treatment of recurrent styes. Lancet. 2(7049), 1958, 728–9.
- Hudson RL. Treatment of styes and meibomian cysts. Practical procedures. Australian Family Physician. 10(9), 1981, 714–5.

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