

Sports Safety

Ocular traumas related to sports or recreational activities represent over 100,000 physician visits per year. We need to be able to recognize and treat sports injuries through thorough examination including evaluation of the extra ocular muscles, cornea, anterior chamber, and fundus.

Corneal abrasions are one of the most common sports related eye injuries. When a corneal abrasion occurs, most patients will complain of pain, sensitivity to light, foreign body sensation, and tearing. Most abrasions will heal within 2-3 days and antibiotic drops or ointments can help prevent infection during this time. Bandage contact lenses can be utilized depending on the size of the abrasion and patient complaints.

Subconjunctival hemorrhage is a painless condition that can be startling to most patients. Sometimes patients feel their eyes are full or swollen with this benign condition. Artificial tears can be used as needed for discomfort. This should resolve within two weeks.

Traumatic uveitis will cause the patient to experience eye pain, tearing, and sensitivity to light. Steroid medication will be helpful in decreasing the inflammation and cycloplegics can help with the pain.

Hypohemias can cause pain and blurred vision. We expect the blood to resolve within 1-2 weeks. Your patient should sleep with an elevated head posture and

NSAIDS should be avoided. A steroid should be used if inflammation is present and mydriatic drops can be used to help with pain. It is important to monitor these patients closely for increased intra ocular pressures after the initial trauma and after the blood has resolved to ensure no complications or other sequelae develop.

Angle recession patients need to be monitored as they are at a risk for developing angle recession glaucoma.

Retinal Tear or Detachment are rare occurrences during the initial injury, however, it is important to educate your patients on the signs and symptoms of a retinal detachment.

Orbital Floor Fractures need to be ruled out after a blunt trauma to the orbit. Restrictions during ocular motility testing need to be observed as well as reports of pain or diplopia. If suspected, a CT scan is necessary to confirm if muscle entrapment is present.

It is not only important that we can manage sports related traumas, but it is also important that we are doing everything we can to prevent the injuries from occurring. Ninety percent of the sports related eye injuries in school aged children can be avoided with protective eyewear. It is important for parents and coaches to understand that regular prescription glasses do not provide adequate protection and can sometimes cause more damage. The American Academy of Ophthalmology recommends that all participants use

protective eyewear during sports activities. As health care professionals, it is our job to educate and to encourage families to have their children use the appropriate eye wear during sports and recreational activities.



By Dr. Kara Tison

To schedule an appointment at the Kentucky Lions Eye Center, please call 502-588-0588.

Providing the Highest Level of Care for your Patients

Eye Specialists of Louisville/University of Louisville Ophthalmology has been a center of excellence for clinical eye care, treating a broad range of eye disorders from pediatric eye diseases to age-related macular degeneration. As the largest multi-specialty team of ophthalmologists in Louisville, we are at the forefront of leading-edge treatments and research in subspecialties including Retina, Uveitis, Glaucoma, Oculoplastics, Pediatrics, Cornea, Neuro-Ophthalmology and Low Vision.

Office Locations:

Kentucky Lions Eye Center
University of Louisville
301 E. Muhammad Ali Blvd.
Louisville, KY 40202
Referring Physician Line
(502) 588-0588

The Springs Medical Center
6400 Dutchmans Parkway, Suite 310
Louisville, KY 40205
Referring Physician Line
(502) 588-0588

**Old Brownsboro Crossing
Medical Plaza II
(Pediatric Only)**
9880 Angies Way, Suite 330
Louisville, KY 40241
Referring Physician Line
(502) 588-0588

Meet the Doctors



HOSSIEN ASGHARI, MD

*Cornea & Refractive
Surgery*



**CHRISTOPHER
COMPTON, MD**

*Oculofacial Plastic
& Orbital Surgery*



THONG PHAM, MD

Neuro-Ophthalmology



**DOUGLAS SIGFERD,
MD**

Retina & Vitreous



CHARLES BARR, MD

Retina & Vitreous



**HENRY KAPLAN,
MD, FACS**

*Retina, Vitreous
and Uveitis*



**APARNA
RAMASUBRAMANIAN,
MD**

*Pediatrics / Ocular
Oncology*



ANDREA SMITH, OD

Low Vision / Optometry



RAHUL BHOLA, MD

*Pediatric Ophthalmology
& Adult Strabismus*



JUDITH MOHAY, MD

Glaucoma/Cataract



HARPAL SANDHU, MD

Retina & Vitreous



JOERN SOLTAU, MD

Glaucoma/Cataract



JEREMY CLARK, MD

*Oculofacial Plastic
& Orbital Surgery*



**WILLIAM NUNERY,
MD, FACS**

*Oculofacial Plastic
& Orbital Surgery*



**PATRICK SCOTT,
OD, PhD**

Optometry



**HARRY
STEPHENSON, MD**

*Comprehensive
Ophthalmology*