



Caring for your baby or child with sticky eyes

It is very common for newborn babies to have sticky eyes. Most of the time, it will look like a white or yellow discharge from the corner of one or both eyes, which may not be due to an infection.

- If the whites of your baby's eye remain clear of any redness, but there is a discharge, it is likely to be due to blocked tear ducts.
- Approximately 1 in 5 babies are born with tear ducts that have not fully developed, affecting one or both eyes.
- A sticky eye can be caused by a narrow or blocked tear duct, which usually open up and begin draining in the first few months of life. It can last for several months.
- If the tear duct is still blocked and continuing to cause a sticky eye by about 12 months of age, see your GP who may refer your baby to an eye specialist.
- It's not necessary to go to your local Accident & Emergency (A&E) department with sticky or watery eyes. But, if you are concerned, ask your health visitor or pharmacist.

My baby has conjunctivitis

- Babies can also suffer from conjunctivitis. Conjunctivitis in your newborn baby can be caused by a blocked tear duct or a bacterial or viral infection.
- If your baby/child is experiencing any symptoms of discharge, redness or swelling of the eye/s, the whites of your baby's eye will be pink or red.
- Please contact your midwife, health visitor, local pharmacist or GP if you think your baby has conjunctivitis.

More information on Page 2

For additional Parent Tips see www.ihv.org.uk

The information in this resource was updated on 14/06/2022.

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Signs and symptoms of conjunctivitis

- Your baby or child is likely to have red, itchy and sticky eyelids.
- Their eyes may be watering more than usual, and they may have a discharge which is more noticeable in the morning and when they wake up.
- If it is conjunctivitis, then the discharge will be yellow or green and will usually start in one eye and can spread to the other eye.

Chlamydia and gonorrhoea

- Chlamydia and gonorrhoea are sexually transmitted infections (STIs). Often people with these STIs don't notice any symptoms.
- Chlamydia and gonorrhoea can cause fertility problems, or your baby being born early if you are pregnant.
- Chlamydia and gonorrhoea can affect newborn babies and can cause conjunctivitis and lung infections, such as pneumonia. If you think you are at risk of having chlamydia and/or gonorrhoea, contact your midwife, health visitor or GP for advice on how to get tested, and for treatment for you, your baby and sexual partner. Both of these STIs can be easily treated with antibiotics, so it is important to seek advice.

Neonatal herpes

- Neonatal herpes is a herpes infection in a young baby. The younger the baby, the more vulnerable they are to the harmful effects of infection. It's caused by the herpes simplex virus, which is highly contagious and can cause cold sores and genital ulcers in adults.
- Because newborn babies have underdeveloped immune systems, they can quickly become seriously ill after catching the virus.
- Sometimes neonatal herpes will only affect the baby's eyes, mouth or skin but, in rare cases, it can be widespread and if not treated immediately, is life threatening. For more information about neonatal herpes, please visit: <https://bit.ly/3aqbj2h>
- There are other STIs which, if passed onto babies, can cause eye problems including sight loss – and, in rare cases, some STIs (such as genital herpes) that your baby could die from if not treated. Therefore, if you think you are at risk of having an STI, contact your GP or local sexual health clinic which you can find here: <https://bit.ly/3KzmEdm>

How to treat sticky eyes

- Sticky eyes usually clear up without medication, but in the meantime you should:
 - Always wash your hands before and after treatment
 - Clean your baby's eyes regularly with cooled boiled water and cotton wool
 - Use a separate cotton wool ball each time you wipe the eye, wiping from the corner by the nose outwards
 - Avoid sharing towels or flannels to avoid contamination if there is an infection
 - If the cause is a blocked tear duct, it may help if you massage the tear duct every few hours using gentle pressure on the outside of the nose, near the corner of the eye
 - If the GP thinks the discharge is caused by infection, they will prescribe a course of antibiotic eye drops or cream
- You can continue to care for your baby at home if:
 - Your baby/child has sticky or watery eyes
 - Their eyeball is healthy and white, and they are not particularly bothered by their sticky or watery eyes
- You should speak to your pharmacist or GP if:
 - Their eye becomes inflamed, angry or red, or there is yellow or green sticky, crusty discharge around the eye that keeps on coming back
 - Your baby rubs their eye a lot or seems in pain
 - Your baby does not like to open their eyes, or light seems to hurt the baby's eye
 - You think your baby might have conjunctivitis
 - The structure of the eyelid does not seem right
 - You think you might be at risk of having an STI

Further information:

- **NHS Choices** - Conjunctivitis: <https://bit.ly/3Kvsigv>
- **Healthier Together:**
 - » My baby has a sticky eye - <https://bit.ly/35PBVrz>
 - » My baby has a fever / high temperature - <https://bit.ly/3wjYLC3>
- **Tommy's:**
 - » The first few weeks of your baby's life - <https://bit.ly/3lgyZs2>
 - » Getting pregnant and sexually transmitted infections (STIs) - <https://bit.ly/34wrWH3>

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