Periorbital Cellulitis







Parent Information Leaflet

Advice intended for parents/carers taking their child home after seeing a hospital based healthcare professional

Periorbital cellulitis is an infection of the eyelid or skin around the eye. It is almost always one sided and sometimes follows a cut or graze to the skin.

Symptoms

- Swollen eyelids Eye area can be red, tender and warm to touch Fever may be present
- Your child may be unable to open the eye fully



If your child has any of the following:

- A temperature less than 36°C or temperature 38°C or more if baby is less than 3 months
- Breathing very fast or breathing that stops or pauses
- Working hard to breathe, drawing in of the muscles below the rib, unable to talk or noisy breathing (grunting)
- Becomes pale, blue, mottled and/or unusually cold to touch
- Difficult to wake up, very sleepy or confused
- Weak, high-pitched, continuous cry or extremely agitated
- Has a fit (seizure)
- Develops a rash that does not disappear with pressure and seems unwell (see the 'Glass Test')

You need urgent help.

Go to the nearest Hospital Emergency (A&E) Department or phone 999



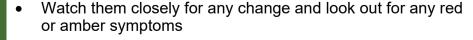
If your child has any of the following:

- A temperature 39°C or above in babies 3-6 months
- Temperature of 38°C or above for more than 5 days or shivering with fever (rigors)
- Breathing a bit faster than normal or working a bit harder to breathe
- Swelling of a limb or joint
- Too painful for your child to stand
- Complaining of severe pain that is not improving with painkillers
- Dry skin, lips, tongue or looking pale
- Not had a wee or wet nappy in last 12 hours
- Sleepy or not responding normally
- Crying and unsettled
- Poor feeding (babies) or not drinking (children)
- Getting worse or you are worried about them

You need to contact a doctor or nurse today.

Please ring your GP surgery or contact NHS 111 - dial 111 or for children aged 5 years and above visit 111.nhs.uk







Continue providing your child's care at home.

If you are still concerned about your child, contact NHS 111 – dial 111 or for children aged 5 years and above visit

111.nhs.uk



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Causes

Periorbital cellulitis can follow a minor injury to the eye

It can also occur following another infection, such as a cough or cold, where the infection spreads to the eye or following sinusitis.

Treatment

Periorbital cellulitis usually responds well to antibiotics. Treatment with intravenous antibiotics (given into a vein) is usually only needed for more severe cases or those that have not responded to antibiotics given by mouth.

Some children who need intravenous antibiotics are admitted to hospital initially whilst others can be looked after at home. These children would come into hospital once a day for someone to look at them and for their antibiotics to be given.

The decision on when to change from intravenous to oral antibiotics (tablets or liquid) will be made by the medical team caring for your child. This will depend on how quickly your child responds to treatment (improvement in fever, pain and sometimes their blood tests) and whether your child has other health conditions. Antibiotics are usually given for a total of 10 days. You can give regular pain relief (Paracetamol or Ibuprofen) until any discomfort has improved.

Complications

Most children recover without any complications. However, periorbital cellulitis can occasionally progress to orbital cellulitis. This is where the infection involves the deeper tissues around the eye and the eyeball itself. This is a serious infection, which can cause lasting problems and needs immediate care.

If you are concerned that your child's condition is getting worse, you should contact your discharging ward.

Thing to look out for include:

- The swelling becoming worse, not better
- Pain when moving the eye
- If the eye appears to stick out or bulge
- Worsening of fever
- Fast heart beat
- Fast, irregular or difficult breathing
- Changes in behaviour, such as confusion or disorientation

Call 999 for an ambulance if you have serious concerns for your child.

Prevention

It is not always possible to prevent this infection. However, it is important to have your child fully vaccinated, as two of the bacteria known to cause this infection are covered within your child's current vaccination schedule.

Keep any minor injuries surrounding the eye clean and dry. Remember good hand hygiene before and after cleaning around the eye.