

Trachoma

Trachoma is a preventable infectious disease of the eyes caused by the *Chlamydia trachomatis* bacteria. Trachoma may present with symptoms like conjunctivitis or 'pink-eye'. The eyes may be red, sticky and sore.

If left untreated or if infections reoccur, trachoma can cause significant scarring of the inner eyelid and of the membrane that covers the eye. This scarring can lead to the eyelid turning inward and the eyelashes rubbing on the eye (trichiasis). Trichiasis can take many years to develop.

The rubbing of the eyelashes on the eye can lead to corneal damage and blindness.

Risk factors and transmission

Trachoma is widespread in pockets of rural and remote regions of Australia. Australia is the only developed country where trachoma is endemic.

Trachoma is very infectious and the infection spreads by direct or indirect transfer of eye and/or nose discharge of infected people; particularly in young children via hands, clothes, bedding or from flies that have been in contact with discharge from the eyes or nose of an infected person.

Active trachoma is most common in children and adolescents as hygiene and cleanliness can be poorer. The longer a child has the active infection or if the child has lots of reinfections, the higher the chance of scarring of the eyelids and trichiasis developing.

Other risk factors are:

- Lack of access to clean water and functional bathrooms.
- Poor facial cleanliness and hand hygiene.
- Crowded living conditions.
- Sharing of towels and pillows.
- Age; trachoma is most common between the ages of 4 to 6.
- Areas where there is a large fly population.



Signs and symptoms

- Itching and irritation of the eyes and eyelids
- Redness of the white part of the eyeball
- Swelling of the eyelids
- Discharge from the eyes
- Dislike of bright lights (photophobia)
- Excessive tears
- Pain
- Eye lashes turn into the eye (Entropion)
- Scarring and distortion of the upper eye lid
- Corneal scarring
- Blurry vision

Diagnosis

Your ophthalmologist will perform a thorough eye examination and take a detailed medical and social history.

If trachoma is suspected then they will also take a swab of the surface of the eye and send it to for laboratory testing to see if the *Chlamydia trachomatis* bacterium is present.

Treatment

A single oral dose of the antibiotic Azithromycin is the first line of treatment to kill the bacteria. Everyone living in the same household as the person who was infected must also take the antibiotics. Your ophthalmologist will advise if additional treatments are required.

Prevention

Prevention of trachoma is focused around improvement of cleanliness and hygiene practices. Simple ways to prevent trachoma and the spread of infection:

- Regular hand washing for parents and children.
- Keeping face and eyes clean.
- Avoid sharing towels and facecloths and pillows.
- Keeping faces clean can help in breaking the cycle or reinfection.



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