

Conjunctivitis and COVID: The importance of early recognition by the physician[☆]



Conjuntivitis y COVID: la importancia de un reconocimiento precoz por el médico

Dear Editor,

First, we would like to express our appreciation for the comments generated by our article “Conjuntivitis hiperaguda en paciente joven” [“Hyperacute conjunctivitis in a young patient”]. We are proud to know that our work was read with such interest.

As noted by Arias-Peso et al.,¹ conjunctivitis has acquired particular importance in recent months as a possible sign of SARS-CoV-2 infection.^{2,3} Although we agree that it could be included in the differential diagnosis, in our case, we did not consider it as a possible disease, due essentially to our patient's sexual risk factors, the characteristic ocular manifestation, and the fact that the medical visit took place long before the outbreak of said virus. In addition, a detailed review of the current literature found no reports of the development of symblepharon associated with conjunctivitis in patients diagnosed with COVID-19. It did, however, find a varied clinical spectrum among cases of conjunctivitis, as the authors noted.^{2–4}

We would like to stress the importance of SARS-CoV-2 transmission through tears; this subject has been extensively explored.^{5,6} Xia et al.⁶ analysed lacrimal and conjunctival fluid secretions from patients with confirmed SARS-CoV-2 pneumonia, and found this virus in secretions from patients who also had conjunctivitis, but did not find it in patients without associated conjunctivitis. This means that ocular secretions must be assessed as a probable route of transmission.

A recent study published by our group⁷ found that 16.1% of staff in ophthalmology departments in the province of Granada (Spain) fell ill with COVID-19, versus 11.2% of all staff studied at Hospital Clínic de Barcelona [Clinical Hospital of Barcelona] (Spain), one of the leading centres in Spain for COVID-19 diagnosis and treatment.⁸ It should be noted that, at that time, Barcelona was one of the focal points of the pandemic, along with Madrid, whereas Granada was not. This further supports the possibility of SARS-CoV-2 transmission through tears, given that our staff had a higher rate of infection despite supposedly being at lower risk, as they did not spend time in the emergency department or on wards set aside for COVID-19 patients.

Currently, COVID-19 is a shared enemy of global health, requiring all staff to be alert when patients present any suspicious signs or symptoms. Physicians must realise that any patient with conjunctivitis is a ‘possible case’ of a new COVID-19 patient, especially if their conjunctivitis is accompanied by respiratory signs and symptoms or fever. As the authors point out, conjunctivitis associated with COVID-19 has no specific characteristics, and so clinicians must be alert. It cannot be forgotten that conjunctivitis is one of the main reasons for ophthalmological emergencies.⁹

Once again, we welcome the comments made and thank you for your valuable efforts to raise the visibility of this condition.

Conflicts of interest

None.

References

1. Arias-Peso B, Rendón-Fernández H. Conjuntivitis y Covid-19: la importancia de un reconocimiento precoz. *Enferm Infecc Microbiol Clin.* 2020. <http://dx.doi.org/10.1016/j.eimc.2020.07.004>.
2. Amesty MA, Alió del Barrio JL, Alió JL. COVID-19 Disease and Ophthalmology: An Update. *Ophthalmology and Therapy.* 2020;1.
3. Loffredo L, Pacella F, Pacella E, Tiscione G, Oliva A, Violi F. Conjunctivitis and COVID-19: a meta-analysis. *Journal of Medical Virology.* 2020. <http://dx.doi.org/10.1002/jmv.25938>. Epub ahead of print.
4. Navel V, Chiambaretta F, Dutheil F. Haemorrhagic conjunctivitis with pseudomembranous related to SARS-CoV-2. *Am J Ophthalmol Case Reports.* 2020;19:100735.
5. Wu P, Duan F, Luo C, et al. Characteristics of Ocular Findings of Patients with Coronavirus Disease 2019 (COVID-19) in Hubei Province, China. *JAMA Ophthalmol.* 2020;138. <http://dx.doi.org/10.1001/jamaophthalmol.2020.1291>. Epub ahead of print 1 May.
6. Xia J, Tong J, Liu M, Shen Y, Guo D. Evaluation of coronavirus in tears and conjunctival secretions of patients with SARS-CoV-2 infection. *J Med Virol.* 2020;92:589–94.
7. Lacorzana J, Ortiz-Perez S, Rubio Prats M. Incidence of COVID-19 among ophthalmology professionals. *Medicina Clínica.* 2020. <http://dx.doi.org/10.1016/j.medcli.2020.05.018>. Epub ahead of print.
8. García-Basteiro AL, Moncunill G, Tortajada M, Vidal M, Guinovart C, Jiménez A, et al. Seroprevalence of antibodies against SARS-CoV-2 among health care workers in a large Spanish reference hospital. *Nat Commun.* 2020;11:3500.
9. Domínguez-Serrano FB, Molina-Solana P, Infante-Cossío M, Sala-Turres J, Seva-Silva N, Rodríguez-de-la-Rúa-Franch E. Ophthalmological emergencies. An epidemiological study: Are resources been used properly? *Arch Soc Esp Oftalmol.* 2019;94:211–7.

Javier Lacorzana^{a,b,*}, Carlos Rocha-de-Lossada^c,
Luis Fernández-Vega-Cueto^d, Santiago Ortiz-Pérez^a

^a Departamento de Oftalmología, Hospital Virgen de las Nieves, Granada, Spain

^b Programa de Doctorado en Medicina Clínica y Salud Pública, Universidad de Granada, Granada, Spain

^c Departamento de Oftalmología, Hospital Costa del Sol, Marbella, Spain

^d Instituto Oftalmológico Fernández-Vega, Oviedo, Spain

* Corresponding author.

E-mail address: javilacor@gmail.com (J. Lacorzana).

<https://doi.org/10.1016/j.eimc.2020.11.007>

2529-993X/ © 2020 Sociedad Española de Enfermedades Infecciosas y Microbiología Clínica. Published by Elsevier España, S.L.U. All rights reserved.

DOI of original article: <https://doi.org/10.1016/j.eimc.2020.08.009>.

[☆] Please cite this article as: Lacorzana J, Rocha-de-Lossada C, Fernández-Vega-Cueto L, Ortiz-Pérez S. Conjuntivitis y COVID: la importancia de un reconocimiento precoz por el médico. *Enferm Infecc Microbiol Clin.* 2021;39:112.