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What is a blocked tear duct?

Tears from the eye normally drain into the nose through the tear duct. If this duct is blocked, the tears spill over on the cheeks, even when a baby is not crying. This happens often in very young babies. Most of the time, only one tear duct is blocked at a time.

Your child may have a blocked tear duct when:

- One eye is always watery.
- Tears run down the face even when your baby does not cry.
- When crying, the nostril on the blocked side is still dry.
- The problem starts before your child is 1 month old.

Although the blockage was present at birth, your baby may not have symptoms right away. This is because in some babies, tear production is sometimes delayed until 3 or 4 weeks of age.

How long does it last?

This is a common condition, affecting 6% of newborns. Both sides are blocked 30% of the time. Over 90% of blocked tear ducts open up without treatment by the time a child is 1 year old. If the blockage continues after age 1 year, an ophthalmologist (eye specialist) can open it with a probe.

How can I take care of my child?

Massaging the lacrimal sac (where tears collect) may be recommended by your healthcare provider. The lacrimal sac is in the inner, lower corner of the eye. Your provider can teach you the correct technique. Massage the lacrimal sac upward twice a day to empty it of old fluids and prevent infection. Start at the inner corner of the eye and gently press upward, using a cotton swab. A small amount of clear fluid should come out. Always wash your hands carefully before doing this.

Because of poor drainage, eyes with blocked tear ducts become easily infected. The infected eye produces a yellow discharge. If the eye becomes infected, it is very important to begin antibiotic eye drops and to stop the massage.