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(中英对照)

眼前节疾病图谱

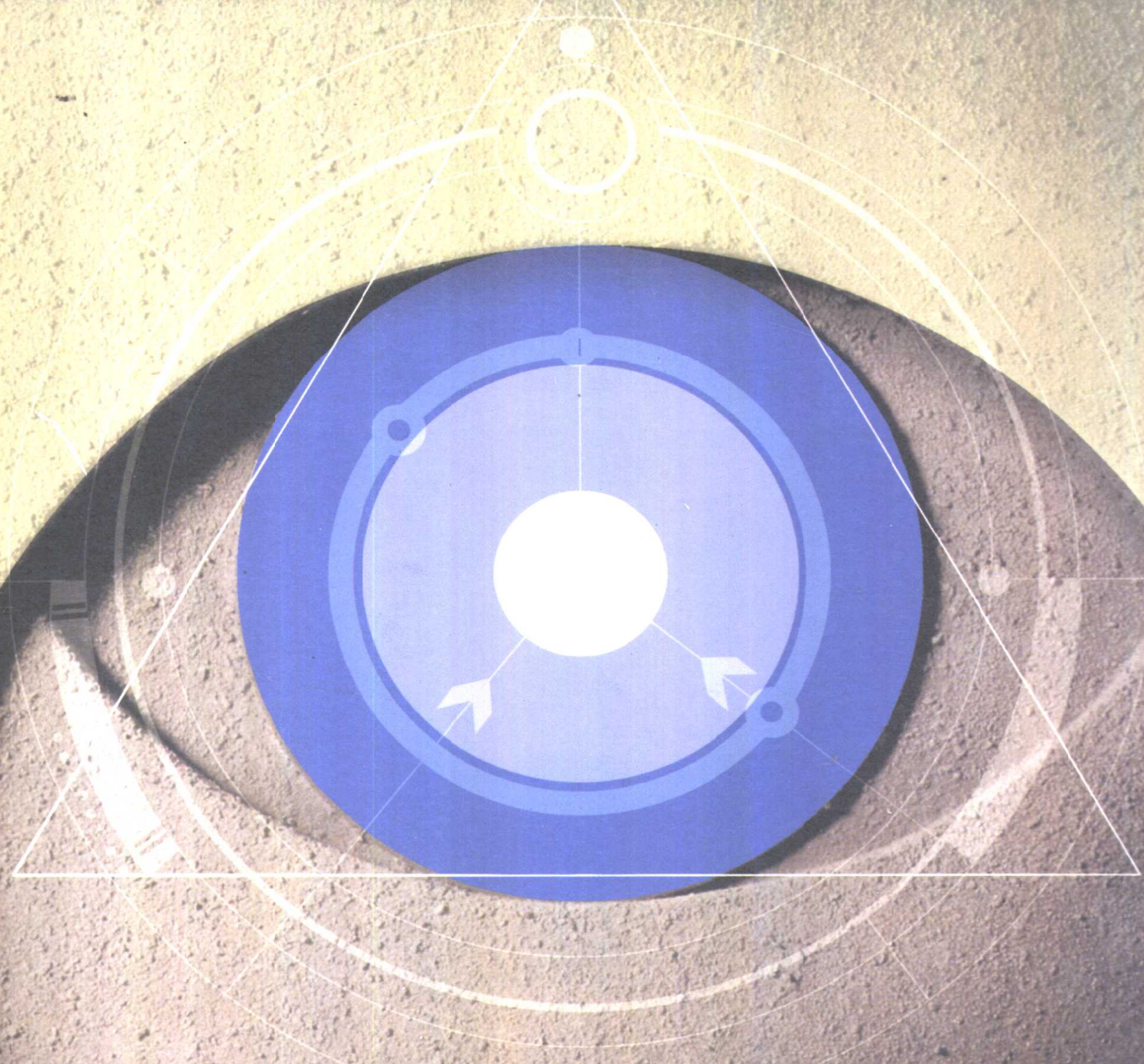
COLOR ATLAS

OF ANTERIOR SEGMENT EYE DISEASES

(Chinese-English)

赖盛辉 李志杰 编著

Editors: Shenghui Lai, Zhijie Li



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内容提要

本书是国内首部大型的眼前节疾病的临床摄影图谱。全书共分十章,详细记录了眼前节各种疾病的临床体征,包括眼睑与附属器、结膜病、角膜病、虹膜睫状体病及瞳孔异常、青光眼、白内障、斜视、眼眶病及眼球突出、眼外伤和眼综合征。全书中英文对照,共记录 211 种病变。彩色图片 350 张,黑白图片 3 张,其中裂隙灯图片 11 张。本书内容丰富,图片清晰,色彩鲜明,具有较高的学术价值和实用价值。书后附有中英文索引。可作为眼科医师、医学生、临床各科医生以及科研人员临床教学和继续再教育参考之用。

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前 言

眼前节疾病的诊断和治疗占据了眼科医生的大部分临床工作，特别是对眼前节疾病感兴趣的医生。本书旨在为眼前节疾病的诊断和临床教学提供图示性指导，在普通教科书和专业书籍之间架起一座桥梁，给读者提供一个基本的感性认识。

本图谱除收录了常见疾病外，还收录了一些不常见的病例。除少数惠赠的图片外，所有的图片均是编著者在近十年临床工作中所诊视过的病例并亲自拍摄。本书的出版得到了许多同行和朋友的帮助，在此表示衷心的感谢。还要特别感谢的是：林发森教授提供了图 7-7~图 7-13，图 8-8 和图 8-11；张君娴副主任医师提供了图 1-2，图 2-17 和图 4-10；刘兴宁医师提供了图 10-4~图 10-6，图 10-12~图 10-14 和图 10-18~图 10-21。我们希望本书对眼科医生、视光学工作者、医学生、临床各科医生和研究人员提高对眼前节疾病的认识及其诊治水平能提供有益的帮助。

赖盛辉 李志杰

2001 年 8 月 11 日于暨南大学

PREFACE

The diagnosis and management of anterior segment diseases occupy a large proportion of the work of every general ophthalmologist and particularly those with a special interest in anterior segment problems. This book is designed to provide an illustrated guide to the diagnosis and clinical teaching. It is intended to bridge the gap between the basic general textbooks and the detailed comprehensive works.

Illustrated in this atlas are conditions most frequently observed in practice and some cases of rare diseases. Except for a few donated photographs, all the pictures were taken by the authors during 10 year clinical work. We are extremely grateful to our many colleagues and friends who helped with the publication of this book. We would like to thank the following contributors for sending us materials: Prof. Fasen Lin (Fig. 7-7~Fig. 7-13, Fig. 8-8 and Fig. 8-11), Dr. Junxian Zhang (Fig. 1-2, Fig. 2-17 and Fig. 4-10) and Dr. Xingning Liu (Fig. 10-4~Fig. 10-6, Fig. 10-12~Fig. 10-14 and Fig. 10-18~Fig. 10-21). We hope that this book will prove more useful and helpful to ophthalmologists, optometrists, medical students, clinical physicians as well as researchers concerned with good practice in medicine and the diagnosis of anterior segment diseases.

Shenghui Lai, MD
Zhijie Li, MD & PhD

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第 1 章

眼睑与附属器

眼睑与附属器的炎症是最常见的疾病。可见各种类型的眼睑皮肤炎症，主要表现为眼睑和结膜的充血与水肿。单纯无充血的眼睑水肿可能起因于变应性反应或系统性疾病，如肾脏疾病。眼睑水肿也可伴发于其他炎症，如蜂窝组织炎或脓肿。

各种类型的皮肤病也可发生于眼睑和附属器，如特应性皮炎、脂溢性皮炎、带状疱疹性眼病和眼部天疱疮。

对全身使用药物的过敏反应可导致严重的双侧性眼睑角膜结膜炎症；对局部使用药物的过敏可导致局部疾病。

各种类型的皮脂腺囊肿、乳头瘤和痣可累及上或下眼睑。黄色瘤是一种橘黄色轻度隆起的眼睑皮肤的良性肿瘤，通常位于上或下眼睑，多伴发于糖尿病和高胆固醇血症。

睑缘毛囊根部的感染被称为麦粒肿，有时与感染性霰粒肿相混淆。霰粒肿起因于 Meibomian 腺腺管阻塞，当伴随继发性感染时，称为感染性霰粒肿。

儿童的眼睑血管瘤可能与 Sturge-Weber 综合征有关。然而，相当多的病例仅仅是一种先天性异常，并不伴发综合征。

各种形式的眼睑皮肤癌症比较常见，某些形式如本章图所示，图中还列举了通过手术治疗的例子。

老年人可发生老年性痉挛性睑外翻。下睑也可因疾病或外伤（烧伤）所致的瘢痕组织造成瘢痕性睑外翻。

另一方面，也可发生眼睑内翻，称为睑内翻，常见原因为老年性眼睑痉挛。当眼睑向内翻转睫毛触及角膜时，有时需要手术矫正。

上睑下垂需要鉴别诊断。如果在出生时就已存在，称为先天性上睑下垂。上睑下垂也可能起因于睑板的炎症或重症肌无力。各种形式（包括先天性和获得性）上睑下垂的诊断主要根据病史和临床表现。

Chapter 1 Eyelids and Appendix

The most common lesions affecting the lids and adnexa are usually the result of an inflammatory process. Various types of blepharodermatitis may be present, producing redness and swelling of the lids and conjunctiva. Swelling of the lids alone, without redness, may be the result of a local allergic reaction or following a systemic disease, e.g., kidney disease, producing edema of the lower lids. Swelling of the lids also could accompany an inflammation such as cellulitis or abscess.

Various forms of dermatosis may involve the lids and adnexa: atopic dermatitis, seborrheic dermatitis, herpes zoster ophthalmicus and ocular pemphigus.

Drug reactions after systemic drugs may produce severe bilateral blepharokeratoconjunctivitis, or sensitivity to topical atropine may produce local eye disturbances.

Various types of sebaceous cysts, papillomas, and nevi may affect the skin on the upper or lower lids. Xanthelasma are orangish-yellow, slightly elevated benign tumors of the skin, usually located on the upper or lower eyelids and are frequently associated with diabetes or hypercholesterolemia.

An infection of the root of the hair follicles along the lid margin is called a hordeolum and is sometimes confused with an infected chalazion. A chalazion results from the obstruction of the duct of the Meibomian gland, and when accompanied by a secondary infection it is called an infected chalazion.

Hemangioma of the eyelid when present in a child may be associated with the Sturge-Weber syndrome; however, it can occur as a congenital defect without the syndrome.

Various forms of skin cancer of the lids are quite common and some of these are shown in present chapter, with examples of their surgical cure.

Senile spastic ectropion may develop in an elderly individual. Also, the lower lid may turn out because of cicatricial ectropion resulting from scar tissue caused by disease or trauma (burn). Examples of these conditions are seen in present chapter.

On the other hand, inversion of the lids, called entropion, may occur, usually on a senile spastic basis. Here the lid turns in and lashes scratch the cornea. This is also corrected surgically.

Drooping of the upper lid may present a differential diagnostic problem. If present from birth, the condition is called congenital ptosis. It might be the result of an inflammation of the tarsus, or may be associated with myasthenia gravis. Diagnosis of the various forms of ptosis, both acquired and congenital, is made from the history and clinical findings.



图 1-1 带状疱疹性眼病
Fig.1-1 Herpes zoster ophthalmicus



图 1-2 带状疱疹性眼病
Fig.1-2 Herpes zoster ophthalmicus



图 1-3 变应性眼睑炎。上睑水肿和发红
Fig.1-3 Allergic blepharodermatitis. Edema and redness of upper lid



图 1-4 变应性眼睑炎。上睑水肿和发红，伴有上睑倒睫

Fig.1-4 Allergic blepharodermatitis.Edema and redness of upper lid with trichiasis

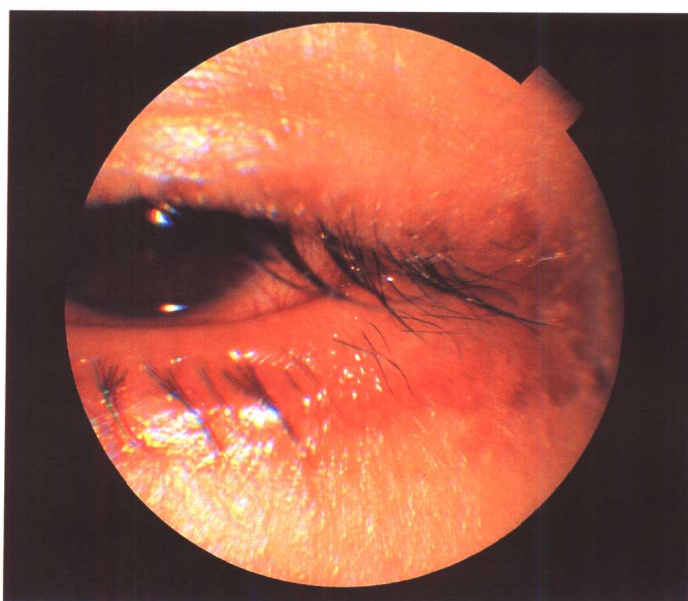


图 1-5 眼睑湿疹。眼睑充血、鳞屑和痂皮

Fig.1-5 Eczematous dermatitis of lid.Injecting,scaling and crusting of lids



图 1-6 鳞屑性眼睑炎

Fig.1-6 Squamous blepharitis

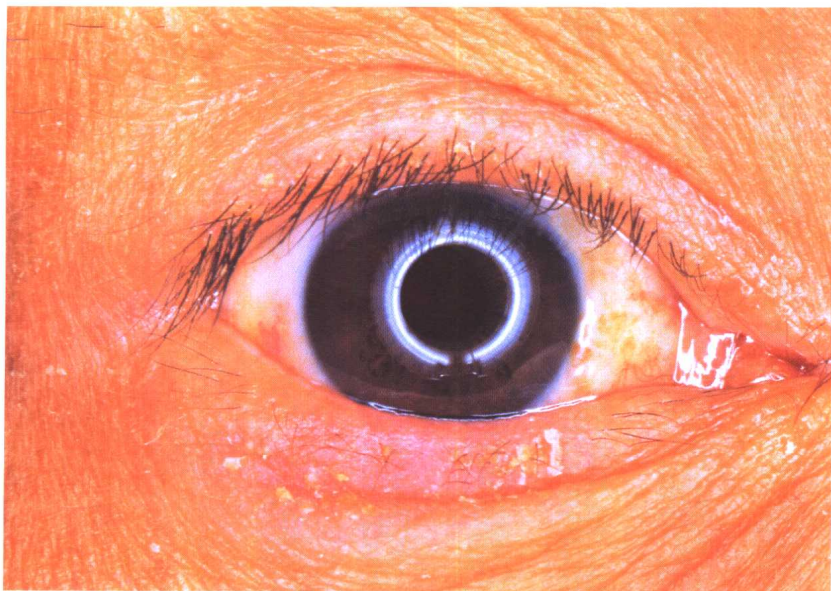


图 1-7 鳞屑性眼睑炎
Fig.1-7 Squamous blepharitis



图 1-8 双侧溃疡性睑缘炎
Fig.1-8 Bilateral ulcerous blepharitis



图 1-9 麦粒肿。上睑毛囊底部充血隆起
Fig.1-9 Hordeolum. Note the redness and elevation at base of hair follicle on upper

图 1-10 双侧麦粒肿。下睑红肿
Fig.1-10 Bilateral hordeolum. Note the redness and
elevation of lower lids



图 1-11 内麦粒肿
Fig.1-11 Internal hordeolum



图 1-12 外眦侧麦粒肿
Fig.1-12 Lateral hordeolum





图 1-13 上睑麦粒肿

Fig.1-13 Hordeolum of upper lid



图 1-14 上睑麦粒肿

Fig.1-14 Hordeolum of upper lid



图 1-15 霰粒肿。位于上睑外侧

Fig.1-15 External chalazion.Upper lid

图1-16 上睑霰粒肿
Fig.1-16 Chalazion of upper lid



图1-17 上眼睑脓肿
Fig.1-17 Abscess of upper lid



图1-18 下眼睑脓肿
Fig.1-18 Abscess of lower lid





图 1-19 泪囊区疖肿
Fig.1-19 Furuncle of dacryocyst area



图 1-20 下眼睑皮肤疖肿
Fig.1-20 Cutaneous furuncle of lower lid



图 1-21 老年性上眼睑松弛症和睑裂狭小
Fig.1-21 Senile blepharochalasis and blepharophimosis.Upper lid

图1-22 瘢痕性下睑外翻
Fig.1-22 Cicatricial ectropion.Lower lid



图1-23 瘢痕性下睑外翻
Fig.1-23 Cicatricial ectropion.Lower lid



图1-24 瘢痕性下睑内翻和结膜外翻
Fig.1-24 Cicatricial entropion of lower lid and
ectropion of conjunctiva

