CLINICAL PRACTICE

Clinical Images

Eye Rock

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Figure 1. Slit lamp photograph showing a rock in the cornea.

A 45-year-old physician presented to his primary care physician after developing the sudden onset of a foreign body sensation and pain in the left eye. The patient had no decrease in visual acuity. The pain developed earlier in the day while gardening with a nylon blade lawn trimmer. He was wearing safety glasses, but not safety goggles.

During slit lamp examination, a small piece of rock was seen at the 2 o'clock position in the left eye (Figs. 1 and 2). The foreign body was lodged within the corneal stroma without full-thickness perforation. The object was removed and the patient was treated with topical antibiotic drops for 3 days and did well.

More than 30% of eye injuries occur in the home¹ and gardening is a common cause. Lawn trimmers are particularly dangerous as they operate at high velocity (6000–8500 rpm) and rock and plant debris are propelled at high speeds. Ocular foreign

Figure 2. Slit lamp photograph showing corneal foreign body.

bodies require prompt attention as they can lead to corneal abrasions and infection². In clinical situations involving a foreign body in which the patient reports visual loss or there is suspicion for corneal perforation or infection, the patient should immediately be referred to an ophthalmologist.

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