

SUPERNUMERARY PUNCTUM ON THE CARUNCLE*

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SUPERNUMERARY puncta were noted by MacKenzie (1854), several cases of supernumerary puncta on the lid margin, the skin of the eyelid, and the conjunctival surface have been reported in the literature. Occasionally, we have also seen cases of supernumerary puncta on the lid margin. We have found only two references (Schoute, 1901; Hamburger, 1937) to supernumerary puncta on the caruncle in the available literature, and the following is the first case seen in this department.

Case Report

A female aged 55 came to the clinic on September 22, 1960, complaining of diminution of vision in the right eye which she had first noticed 18 days before.

Examination.—General physical examination revealed no abnormality.

The right eye looked wet. On the inner part of the caruncle, 2mm. outside the internal canthus, there was an oblique, oval opening 1×0.75 mm. in size. It had regular, well-defined margins with no fibrosis, adhesions, or thickening of the surrounding tissue (Fig. 1, opposite).

Regressive pterygium was present on the inner part of the bulbar conjunctiva. An almost mature senile cataract was present in the right eye, and the visual acuity was reduced to finger counting at 1 m. The fundus could not be seen. The ocular tension was 18 mm. Hg (Schiötz).

The left eye showed a regressive pterygium on the inner part of the bulbar conjunctiva. No fundus abnormality was detected. The ocular tension was 19 mm. Hg (Schiötz). The visual acuity was 6/12.

Laboratory Investigations:

- (1) Culture of conjunctival discharge yielded no growth of pyogenic organisms.
- (2) Lacrimal syringing was carried out through all three puncta.
- (3) Dacryocystography could be carried out through the supernumerary punctum (Fig. 2, opposite).

Discussion

The first explanation of the condition that came to mind was a post-inflammatory fistula, but there was no history of trouble pertaining to the lacrimal apparatus, and no thickening or fibrosis around the opening. Other

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FIG. 1.—Supernumerary lacrimal punctum on the caruncle.

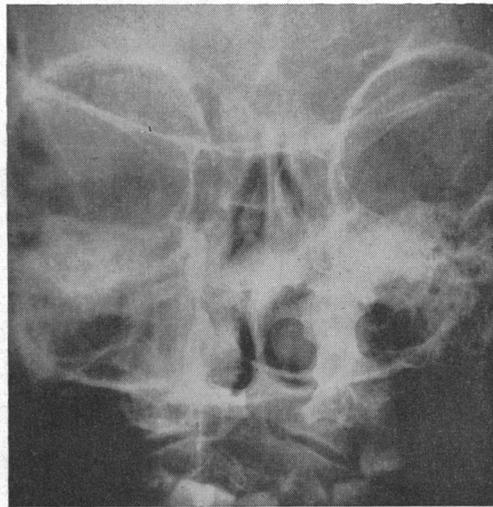


FIG. 2.—Radio-opaque substance in right lacrimal sac, naso-lacrimal duct, and inferior meatus, after dacryocystography through the supernumerary punctum.

possibilities were traumatic fistula or epithelial down-growth from the surface of the caruncle ending blindly. However, there was no history of trauma, and the latter condition was excluded by the successful lacrimal syringing and dacryocystography through the supernumerary punctum.

Hence the diagnosis was made of congenital supernumerary punctum, due to an irregular, accessory epithelial out-growth from the lacrimal sac, which opened on the lid margin before the caruncle was separated by the normal lower canaliculus.

Summary

A case is presented of supernumerary lacrimal punctum on the caruncle, a rare congenital condition.

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