

## CONGENITAL MUCOCELE OF THE LACRIMAL SAC\*

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DELAY in canalization of the naso-lacrimal duct is by no means uncommon, and is often associated with chronic dacryocystitis.

Guerry and Kendig (1949) found 6 per cent. impatency of the duct in full-term infants, and Cassady (1948) found an imperforate membrane at birth in 84 per cent. of infants, although this usually ruptured before the onset of tears at about 3½ weeks. In a further series of full-term foetuses (Cassady, 1952), he found an instance of 73 per cent. imperforate membrane at the lower end of the naso-lacrimal duct. Encysted mucocele at birth is, however, very rare. Becker (1938) found two cases in a series of 250 infants over a period of 10 years.

### Case Report

A male infant was born on May 11, 1962, weighing 5½ lb. The delivery was normal although there was some difficulty in establishing breathing after birth, and this was thought to be associated with a swelling in the region of the right lacrimal sac. After mucus was removed with a nasal catheter, breathing commenced.

The child was seen by one of us (H.J.) on the day after birth; there was a tense, bluish subcutaneous swelling in the region of the right lacrimal sac with some telangiectasis in relation to the swelling (Figure). Pressure over the swelling did not result in its reduction. It was thought that the lesion was an encysted mucocele of the lacrimal sac, a haematocele, or a haemangioma of the sac. Expectant treatment was advised.



FIGURE.—Swelling in right lacrimal sac.

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On May 14, the child exhibited typical physiological jaundice and on the following day a discharge appeared from the affected eye. This was treated with Neomycin drops and 2 days later by systemic tetracycline.

The child was seen on May 21, by Dr. J. Rubie who was able to exclude the presence of any other congenital abnormalities. When the child was seen in the Out-patients Department on June 16, the condition was the same as on May 12. An x ray of the skull showed no bony abnormality.

A week later the child had some nasal discharge for which Ephedrine drops were used three times a day and on July 7 a transient rash appeared very like erythema multiforme. On July 14 the mother reported that on the day before the swelling had disappeared for some hours and then reappeared. Examination on this occasion showed that the swelling was much less tense than it had been previously and by July 31, the swelling had disappeared completely, and so remained on September 9.

### Comment

In view of the spontaneous resolution of the swelling, it is unlikely to have been a haemangioma, and in the absence of a history of trauma it must be assumed that this is a case of congenital encysted mucocele of the lacrimal sac even though probing was not carried out to establish the site of blockage.

It would appear that canalization became complete between the 8th and 10th week of life.

Our thanks are due to Dr. Rubie for giving his opinion on this case.

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