SYMPTOM

# Eye pain

Eye pain is aching, burning, soreness, or other discomfort in or around an eye.

**WHAT IT FEELS LIKE**
Sore, burning, gritty, aching, or pressure-like discomfort

**WHERE IT IS FELT**
In or around one or both eyes

**MOST COMMON CAUSES**
Dry eye, surface irritation, small scratches

**WHEN IT IS URGENT**
New vision loss, severe pain, injury, or chemical exposure

**USUALLY LASTS**
Hours to days for irritation; longer with inflammation or nerve problems

**SEE A DOCTOR IF**
Pain persists beyond a day, returns, or keeps worsening

## Overview

Eye pain may come from the eye's surface, structures inside it, or surrounding tissues. It can affect one or both eyes and feel burning, gritty, aching, sharp, or pressure-like.

Minor dryness or irritation often improves with simple care. However, pain can signal infection, inflammation, injury, or a sudden rise in pressure inside the eye. Vision changes, severe redness, light sensitivity, or recent injury need prompt assessment.

Headaches can also cause pain around or behind an eye when the eye itself is healthy.

## What it may feel or look like

Surface pain often feels scratchy, gritty, or burning, as though something is under the eyelid. The eye may water or look red, and blinking may worsen discomfort.

Deeper pain may feel like aching, throbbing, pressure, or pain behind the eye. It may worsen with eye movement. Other symptoms can include:

Itching without significant pain is more typical of an allergy. Thick discharge may occur with infection, but symptoms alone cannot identify its cause.

- Blurred or reduced vision
- Sensitivity to light
- Discharge or excessive watering
- Eyelid swelling
- Headache, nausea, or halos around lights
- A feeling that something is in the eye

## Common causes

Common causes include dry eye, smoke or dust, prolonged screen use, cosmetics, and contact lenses. An eyelash or small particle can scratch the cornea, the clear front surface of the eye. This is called a corneal abrasion.

Inflamed eyelid edges, or blepharitis, can cause burning, crusting, and grittiness. Conjunctivitis, or pink eye, usually causes redness, watering, itching, or discharge. Significant pain is less typical and should be assessed.

Less common causes include migraine, sinus inflammation, shingles near the eye, inflammation inside the eye, and inflammation of the optic nerve. These may cause light sensitivity, reduced vision, or pain with eye movement.

Urgent causes include serious corneal infection, particularly in contact lens users. Acute angle-closure glaucoma can cause severe pain, blurred vision, halos, headache, and nausea. Infection around the eye may cause fever, swelling, limited eye movement, or pain with movement.

Chemical exposure, penetrating injury, or a high-speed impact can cause damage that is not visible from outside.

## When to seek medical care

Go to an emergency department now if:

For chemical exposure, immediately rinse the eye with plenty of clean, lukewarm water. Remove contact lenses if they come out easily. Continue rinsing while arranging emergency help; do not delay to find a particular solution.

Seek same-day urgent care for eye pain with:

Book a routine appointment if mild pain lasts longer than a day, returns, or worsens. Seek

review sooner if discharge, redness, or dryness interferes with daily activities.

Do not drive yourself if your vision is affected.

- A chemical has entered your eye
- An object has pierced the eye or is stuck in it
- You suddenly lose vision or develop a dark curtain over your sight
- The eye was struck by a high-speed object, such as a metal fragment
- New blurred, reduced, or double vision
- Severe redness or strong light sensitivity
- Halos, severe headache, nausea, or vomiting
- Fever, marked eyelid swelling, or pain with eye movement
- A recent eye operation or injection
- Contact lens use, especially with redness or light sensitivity

## How the cause is found

A clinician will ask when the pain began, which eye is affected, and whether there was an injury or exposure. They may ask about contact lenses, infections, headaches, procedures, and vision changes.

The examination usually checks vision, pupil responses, and eye movements. The eyelids and eye surface may be viewed under magnification. Fluorescein dye can reveal a corneal scratch, and eye pressure may be measured when safe. Dilating drops may be used to inspect deeper structures.

Imaging or urgent specialist assessment may be needed for suspected deep infection, nerve problems, foreign objects, or serious injury.

## Treatment and self-care

Treatment depends on the cause. Dryness may improve with lubricating drops, and a clean warm compress may help irritated eyelid edges.

For mild surface irritation, rinse with sterile saline or clean, lukewarm water. Do not rub the eye. Stop wearing contact lenses until the eye is normal and, if infection or injury is possible, a clinician says it is safe to restart.

You may use a usual non-prescription pain reliever if it is safe for you and you follow the label. Do not use another person's eye drops.

Specific causes may require antibiotic like amoxicillin or doxycycline , antiviral, pressure-lowering, or anti-inflammatory medicine. Never use steroid eye drops unless an eye professional has examined you and prescribed them. Numbing drops used during examinations are not generally safe for home use because repeated use can delay healing and damage the cornea.

Do not remove an embedded object or press or patch an eye that may have been penetrated.

## What to expect

Minor dryness or irritation may settle within hours or days after the trigger is removed. A small corneal scratch often improves quickly but needs assessment if pain is strong, vision changes, or symptoms persist.

Infections and inflammation may take longer and require follow-up to confirm treatment is working. Dry eye, eyelid inflammation, migraine, and some corneal problems can recur.

If pain improves but vision remains blurred, arrange medical review. Pain relief does not always mean the underlying problem has resolved.

## Common questions

Can screen use cause eye pain?

Long periods of close focus can reduce blinking, causing dryness, burning, or aching. Breaks, regular blinking, and reduced glare may help. Persistent pain or vision changes need assessment.

Should I wear my contact lenses if the pain is mild?

No. Remove them and use glasses until the discomfort has fully resolved. Pain, redness, light sensitivity, or blurred vision in a contact lens wearer needs same-day assessment because corneal infection can worsen quickly.

Can sinus problems cause pain behind an eye?

Sinus inflammation can cause pressure around the eyes, usually with nasal symptoms. Migraine, nerve inflammation, and eye conditions can also cause pain behind one eye, so new or persistent pain should not automatically be attributed to the sinuses.

Is eye pain always serious?

No. Dryness and minor irritation are common. Urgency depends on associated symptoms, especially reduced vision, severe redness, light sensitivity, injury, chemical exposure, or contact lens use.

## Sources

- American Academy of Ophthalmology. Eye Pain . EyeSmart
- National Health Service. Eye pain
- Pflipsen M, Massaquoi M, Wolf S. Evaluation of the Painful Eye . American Family Physician . 2016;93(12):991-998
- Centers for Disease Control and Prevention. What Causes Contact Lens-Related Eye Infections
- Poison Control. Splashed a poison in your eye?