lacrimal duct obstruction can occur as a secondary complication. The primary cause of lacrimal duct obstruction in Apert syndrome is typically related to the craniofacial abnormalities present in individuals with this condition.

Due to the craniosynostosis and facial skeletal abnormalities seen in Apert syndrome, the anatomy of the tear drainage system may be altered, leading to obstruction of the lacrimal ducts. Additionally, individuals with Apert syndrome may also have abnormalities in the development of the nasal passages and other structures of the face, which can contribute to tear drainage issues.

Management of lacrimal duct obstruction in individuals with Apert syndrome may involve a multidisciplinary approach, including evaluation by ophthalmologists, otolaryngologists (ENT specialists), and craniofacial surgeons. Treatment may include conservative measures such as regular eye care, lubricating eye drops, and management of eye infections. In cases of severe obstruction or recurrent issues, surgical interventions such as dacryocystorhinostomy (DCR) or tear duct probing may be considered to improve tear drainage and alleviate symptoms.