

ADVICE FOR OCULAR SURFACE COMPLAINTS

Here are some recommendations on how to manage the common complaints caused by diseases of the ocular surface e.g. dry eye, blepharitis, recurrent corneal erosion syndrome, skin conditions affecting the eye and some type of conjunctivitis and other forms of ocular irritation. They are common and they often co-exist together.

CLEANING

Wet a clean facecloth with warm/hot water, wring it out, place over the closed eyelids for a minute or two. Repeat twice more as the facecloth cools. This softens and loosens scales and debris, and liquefies the oily reactions from the glands in the eyelid. It also feels good. Clean the facecloth regularly.

Undertake eyelid cleaning _____/day for _____ weeks

Then _____/day for _____ weeks.

Other options are:

- (1) to place ½ teaspoon of baby shampoo into 2 cups of hot water (and use this to warm your facecloth or cotton bud) or
- (2) add a teaspoon of salt to 2 cups of hot water.

Using these solutions, gently scrub the base of the lashes, 15 seconds per eyelid (use a side to side motion) with either:

- (1) your finger covered with a thin facecloth or
- (2) a cotton bud or
- (3) a commercial lint free pad (Lidcare - available at pharmacies or optometrists).

PRESERVE YOUR TEARS

Drink adequate amount of water; “think blink” – blinking stimulates tear production.

You may need to reduce/stop your contact lens wear and change to glasses until your eyes have improved.

Discuss with your GP if any of your regular medications cause dry eye. Common examples are hormone replacement therapy, Roaccutane, Antihistamines, diuretics. If you are using other eye drops, e.g. glaucoma drops, these can also irritate or dry the eye slightly.

Try to avoid conditions that encourage dryness or irritation, such as smoking/smokey places.

Prolonged visual effort (e.g. reading or computer work) decreases your blink rate. Use your artificial tear drops prior to or during reading and have regular breaks. Lower your computer screen to below eye level (this decreases the space between your eyelids) and humidify the room with plants/water.

Wear wrap around sunglasses or spectacles with side shields when outside in sun or windy conditions. Try to avoid air conditioning, low humidity, air travel (or prepare yourself well for them).

TREATMENTS

There is anecdotal evidence that evening primrose oil capsules or flaxseed oil capsules (Health Food Shop or Pharmacy) are very beneficial. Take 2-3 capsules per day.

Use artificial tears: (drops, ointment, gels).

- there are lots of types at differing costs.
- if unhappy with the 1st type, try another.
- try them 2-4 times per day.
- if you need drops more than 4 times a day, use preservative-free drops.
- apply drops when needed – when eyes are sore, when symptoms are worse, in drying conditions, when reading or using a computer, on a plane.

An antibiotic or steroid ointment may be prescribed to settle the infection/inflammation. Apply to the eyelids/eye after cleaning and before sleep to the base of the eyelashes (it does not matter if this enters the eye).

Use polyvisc/viscotears/lacrilube ointment before sleep to keep the eyes lubricated during the night.

If your symptoms fail to improve or recur, the first step is to step up the treatment. Otherwise report back to your doctor. Be prepared to trial some of the above treatments. Some may work for you, others may not. Further treatment options include special eye drops, blocking the tear (drainage) ducts, oral medications, surgery etc.

See your Optometrist every 2 years for a eye health assessment.

Remember

Some of these symptoms cannot be cured and may be lifelong. While they can be a source of frustration, this can be controlled (but not entirely eliminated) with these few simple daily measures. These should become a part of your daily routine. The aim is to reduce your symptoms and make you more comfortable. It will improve, so don't despair.

For further information see eyenz.com.