

## BLEPHARITIS/MEIBOMIANITIS INFORMATION SHEET

This leaflet is intended to provide you with general information. It is not a substitute for advice from your ophthalmologist. You are encouraged to discuss the benefits and risks of treatment with your ophthalmologist.

### What is blepharitis?

Blepharitis is a common condition that causes inflammation of the margins of the eyelids. Both eyes are usually affected. The condition appears in two forms: anterior (front) and posterior (back) of the eyelid margins. The most common cause is bacterial infection in the glands of the eyelids and eyelash follicles. Blepharitis can occur in children and adults of any age. Signs and symptoms include:

- A feeling of “something in the eye”
- Red and sore eyelids
- Dry or burning eyes
- Excessive tearing
- Itching or stinging
- Excessive blinking
- Crusty or sticky eyelashes, particularly in the morning
- Photophobia (sensitivity to light)
- Intermittent blurred vision can occur in some patients

### What causes blepharitis?

There is no direct cause of blepharitis but it is more common in people who have skin conditions such as eczema or acne rosacea, and in those with allergic diseases like asthma. The causes of this ailment can be very diverse: use of certain medications, poorly balanced diet, hormonal problems, stress and/or use of contact lenses. Blepharitis is usually associated with tear film dysfunction.

Eyelids contain tiny glands that produce an oil which keeps the eyes moist as part of the tear film. In blepharitis, these glands become blocked, which causes irritated eyelids and dry, sore eyes. It is thought that in some people, blepharitis is partly caused by sensitivity to the bacteria (staphylococcus) which normally live on the skin.

## A decision to have treatment.

Blepharitis is a chronic condition and it cannot be cured. However it can be controlled with treatment. If this treatment is ceased it will reoccur. If you do not have treatment at all, your symptoms may continue to worsen. Treatment options include the following:

- The most important treatment is lid hygiene which includes hot compress, lid massage and lash scrubs. This should be done once daily with clean hands, even if the symptoms are not there to reduce the chances of flare ups. The aim is to reduce inflammation and encourage healthy tears to lubricate the eye. This is achieved by softening the oils in the eyelid glands, unblocking the glands, removing any crusting, and reducing the bacterial load.
- Lubricant eye drops (artificial tear drops).
- A diet high in Omega 3, 6 & 9, or whole flax seed oil.

In some cases, further treatment may be required. Including:

- Antibiotic eye drops or ointment.
- Anti-inflammatory drops such as steroids if the condition is severe.
- Oral antibiotics on a low dose such as doxycycline for at least 3 to 6 months.
- Non-invasive treatments conveniently performed at your eye clinic: Intense Pulsed Light (IPL).

Please avoid rubbing your eyes causes more irritation and increases the need to rub. This starts a vicious cycle which needs to be broken.

Please minimize the use of make-up, face creams, moisturisers, cleansers, etc. Your skin may become dry for a couple of weeks until it regains its natural balance.

## Possible complications

Blepharitis can be associated with chalazia and conjunctival concretions. Blockage of the oil glands can lead to a meibomian cyst or chalazion, a round painless swelling in the eyelid which is often very slow to resolve. The blocked gland can get infected and become red and sore. To help treat the cyst, use the hot compress treatment as early as possible. Occasionally surgery may be required.

Less commonly, blepharitis can lead to changes on the cornea (the clear window of the front of the eye). This usually requires further treatment and a check-up.

## When to seek further advice

If your eye becomes increasingly red or painful, your sight becomes more blurred or you develop noticeable and spreading redness together with a lot of eyelid swelling, you should call your ophthalmologist for further assessment.