

Patient Information

## Ophthalmology Department

# Blepharitis

This leaflet explains what **Blepharitis** is and how it can be treated

### What is blepharitis?

Blepharitis is an inflammation of the eyelid margins, in particular around where the eyelashes begin. It is one of the most common eyelid conditions and can cause long term discomfort, irritation and usually affects both eyes.

There are two main types of blepharitis:

- **Anterior blepharitis:** This affects the base of the eye lashes with a dandruff-like condition visible under the microscope.
- **Posterior blepharitis:** This is linked to a build up of the oily secretions arising from the meibomian glands that normally open onto the lid margin. The secretions lubricate the eye but these glands can become blocked, inflamed and infected in these patients.

**Symptoms are similar for both:** Irritation, burning, soreness and redness of the eyelids. There may be grittiness and sometimes watering or a feeling of dryness of the eyes.

### What causes blepharitis?

There are several possible causes, which include:

- Skin disorders - for example acne, Rosacea, dandruff etc
- Chemical irritants – such as perfumes and certain cosmetic products
- Infection
- A build up of greasy/oily secretions on the eyelid margin leading to inflammation

### What treatment will I need?

Regular lid hygiene is the most important part of prevention and treatment should be done daily as follows:

#### **Hot Compresses - Should be done before lid cleaning**

Specific products like the **EyeBag, Meibopatch and other similar products** are microwavable devices designed for hot eyelid compresses. They help maintain a suitable temperature for a longer period of time which helps with expressing oily secretions from eyelid glands.



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Other non-specific options are hot compresses using cotton wool or flannel. Carefully soak a flannel or cotton wool in fairly hot water that you are able to withstand without burning yourself and hold it against closed eyes for 5 - 10 minutes (you will need to re-warm your cloth repeatedly, as it tends to cool down fairly quickly compared to specifically designed devices). **Never share flannels with others due to the risk of cross contamination.**

## Cleaning

Many lid wipes/scrubs are available from chemists and opticians (e.g. Blephasol Duo, Supranettes, Lumicare etc.). We recommend rubbing the wipe together to generate lather and then scrub your lids and eyelashes (like shampooing your eyelashes).

## Eye ointment (Antibiotic or in combination with a steroid)

Eye ointment may be prescribed. Wash your hands, place a small amount of ointment on your fingertips and rub into the lid margin. This should be done after carrying out lid hygiene.

## Antibiotic tablets

In some severe cases we give a course of oral Doxycycline (a type of Tetracycline) for three to six months, to improve the quality of the tear film and Blepharitis.

## Artificial tears

This may help if you develop dry eyes and improve symptoms of grittiness and soreness. For further advice on the eye drops see your local pharmacist or GP.

## Omega 3 dietary supplementation

Recent evidence suggests that omega-3 dietary supplementation is of benefit to patients with blepharitis and meibomian gland disease.

Perseverance with lid hygiene gives the best results; to stop treatment altogether will probably result in a recurrence of the problems.

Having followed the steps outlined above, we would expect the redness and irritation to start improving after approximately 8 -12 weeks. In some severe cases, further management may be required under the supervision of an ophthalmologist.

If you need further information or advice please contact the Eye Unit located in Clinic 9 of the **Outpatients Department: Tel - 024 7696 6606 / Eye Casualty: Tel - 024 7696 6627**

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## Document History

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