



Mid Cheshire Hospitals
NHS Foundation Trust

Dry Eyes

Important information for patients



I've been told I have dry eyes, what does this mean?

The eye is coated with a thin film of tears. In most cases, dry eye results in mild discomfort but in more severe cases it can become very painful and the dryness can cause permanent damage to the front of the eye. The severity of the problems depends very much on the cause of the dry eye. Once you have been diagnosed with dry eye you tend to always be susceptible to it, but it can be treated. Usually there are times when it is better than others.

What are the symptoms?

Symptoms can vary from one person to another. They can affect one or both eyes. The symptoms may get worse over the course of the day.

Symptoms include:

- Gritty feeling
- They may become red
- Irritation
- Excessive watering if your tear film is inadequate
- It can make you feel like you have something in your eye; an eyelash or a piece of grit, even when there is nothing there
- Vision slightly blurry, though usually only for short periods of time. The blurriness usually gets better by itself or when you blink.

What causes dry eye?

Dry eye is caused by a problem with the tears. When you blink you leave a thin layer, called the tear film, over the front of your eye. The tear film keeps the front of your eye healthy and it also helps the eye focus properly, giving you clear vision. The tear film is a complicated structure made up of three layers. If you do not produce enough tears, if your tears are not of the right quality or your tears are not spread across the front of your eye properly then you may develop dry eye.

What is the tear film?

- The inner layer which adheres to the surface of the eye
- Middle layer, aqueous
- The outer layer, lipids.

What does the tear film do?

- Lubricates the eye
- Prevents it drying out
- Gives protection from bacteria
- Gives protection from environmental irritants i.e. dust.

Dry eye is usually a natural symptom of getting older. As you get older your eyelids are less effective at spreading the tears each time you blink. The glands in your eye which produce the three layers of the tear film become less effective, so the quality of your tear film is affected as you get older.

The tear film may also be affected by:

- Drugs, like antihistamines or oral contraceptives
- Contact lenses, which can make you more at risk; you should follow the advice for wearing and looking after them very carefully
- Other health problems, such as rheumatoid arthritis
- Sjogren's Syndrome, which may cause you to have dry eye and a dry mouth or vagina
- Surgery or an accident which affects or scars your eye, although this usually improves once the eye has healed
- An infection or inflammation of any of the glands around your eye, or an infection of the eye lash roots (called blepharitis). Sometimes getting rid of the infection or inflammation can help to improve your dry eye.

What is the treatment?

Once the ophthalmologist, health care professional or GP has confirmed you have dry eye they will discuss what can be done to help you. You cannot "cure" dry eye but there are some treatments that can help your eyes feel more comfortable. If your dry eye is caused by another condition, such as an infection, then treating this infection may help with your dry eye symptoms. If your dry eye is caused by wearing contact lenses then having a break from your lenses may help the dry eye to improve. Often dry eye is caused by getting older, which can't be helped, but there is treatment that can help with your symptoms.

There are four main ways to help your dry eye:

1. Making the most of your natural tears

There are things that you can do yourself which may help reduce the symptoms of dry eye. You can often lower the temperature in a room because high temperatures and central heating can make tears evaporate more quickly. However, you need to make sure that you keep yourself comfortable. A humidifier, this is a small machine that helps put more water into the air, which may help slow down the evaporation of your tears.

Many people find that their dry eye is more uncomfortable when they're reading or using a computer. This is usually because you tend to blink less when you are doing this sort of thing. This gives the tears more chance to evaporate. You can try to blink more when you're doing these tasks or use eye drops before you do anything, like reading, as this may help to keep your eyes comfortable. Ensure a good fluid intake, keep yourself well hydrated.

2. Using eye drops

Most people with dry eye need to use some form of eye drops, also known as "artificial tears". Eye drops aim to supplement and replace your natural tears and make the eye more comfortable. They can also prevent any damage to the front of your eye, which can happen if the eye is dry for a long time.

They can be used frequently, or as much as you need them. However if you are having to use your drops more than 6 times a day then you should let your

ophthalmologist or health care professional know as you may need a different treatment to the drops you're using.

There are three main types of eye drops which the GP, health care professional or ophthalmologist may prescribe or recommend:

a. Lubricant eye drops

These are made by many different companies. Some people find one brand works better for them than another. Your doctor may suggest a selection of different brands for you to try. It is usually best to try one type for at least a month.

Most artificial tear drops can be bought over the counter from the pharmacist. If you're entitled to free prescriptions, or have a prepayment certificate, you can ask your doctor to prescribe them. Some people develop sensitivity to the preservative used in the drops, especially if they're using them a lot. This can make your eyes sore. Preservative-free drops are available.

b. Gels

If your standard eye drops are not helping, your doctor may suggest thicker gel-like drops which are made from different chemicals and may last longer in the eye. They do the same thing as the ordinary drops but you do not have to put them in as often.

c. Ointments

Ointments are also available to help keep your eye moist overnight. When you sleep, sometimes your eyes

are not fully closed, so tears can evaporate and leave your eyes very dry when you wake up. Ointments help stop the eyes drying out overnight so that they feel more comfortable in the morning. Ointments tend to be used overnight because they are sticky and cause blurry vision for a short time. Ointments are usually used as well as eye drops during the day.

3. Reducing the draining away of tears

It is possible to help dry eye by blocking up the drainage holes in the upper and/ or lower eyelids. Stopping the tears from draining away may help the tears to stay in your eye for longer. The medical term for blocking the tear ducts is punctal occlusion. This is a simple, quick and painless procedure carried out in the clinic by your health care professional.

Usually, punctal occlusion is tried for a period of time to see if it helps. The small drainage channels are blocked by little pieces of plastic called punctal plugs. If it helps you with the symptoms of dry eye, the plugs are left in place. Sometimes blocking the ducts can cause the eye to over-water. If this happens, then the plugs can be removed. If you have had your tear ducts blocked you may still need to use drops, gels or ointments to protect your eyes and keep them as comfortable as possible.

4. Supplements

Omega 3 and 6 oral supplements have been shown to help in the management of dry eye. Your health care professional may recommend these.

Useful contacts

Royal National Institute of Blind People (RNIB) is not aware of a particular support group for people with dry eye. However, there is a national charity for people with Sjogren's Syndrome as this syndrome causes very dry eye:

British Sjogren's Syndrome Association

Station Road
Birmingham, B31 3DP
Tel: 0121 478 0222
www.bssa.uk.net

Royal National Institute of Blind People (RNIB)

105 Judd Street
London, WC1H 9NE
Tel: 0303 123 9999
helpline@rnib.org.uk
www.rnib.org.uk

Royal College of Ophthalmologists

18 Stephenson Way
London, NW1 2HD
Tel: 020 7935 0702
www.rcophth.ac.uk

This information is available in audio, Braille, large print and other languages. To request a copy, please ask a member of staff.



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