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DRY EYE

WHAT ARE THE **SYMPTOMS?**

- Dryness, eyestrain, stinging, itching, irritation, burning, gritty sensation
- Sensitivity to light, wind or cigarette smoke
- Difficulties opening eyes in the morning (eyelids stuck together) and wearing contact lenses
- No tears when cutting onions or feeling emotional
- Excessing tearing

But you may not have any symptoms.

WHAT ARE THE CAUSES?

Dry eye can affect anyone, but it increases with:

- Hormonal changes, age
- Extended screen use, which leads to insufficient and incomplete blinking
- Medication use
- Cataract or LASIK surgery
- Environmental conditions (smoke, pollution, air conditioning etc.)
- Long-term **contact lenses use**
- Demodex infections (eyelash parasites) and diseases that cause inflammation of the eyelids (blepharitis), such as rosacea, seborrhoeic dermatitis, psoriasis and eye allergies
- Excessive use of make-up on the eyelashes and free margin of the eyelids



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WANT TO KNOW MORE ABOUT DRY EYE?

www.mydryeyedisease.com



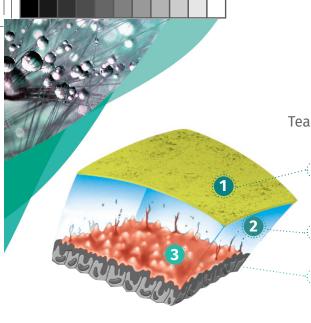


DRY, RED, IRRITATED EYES, EYESTRAIN, **ITCHING, STINGING, GRITTY FEELING...**



OUR SOLUTIONS TO YOUR **DRY EYE PROBLEMS**

Ask your doctor for further information



WHAT ARE **TEARS?**

Tears are composed of three layers. known as the **tear film**:

1. The LIPID LAYER (OIL)

limits tear evaporation, lubricates the eye and improves vision

2. The AQUEOUS LAYER (WATER) hvdrates and nourishes the cornea

3. The MUCIN LAYER (ADHESIVE) sticks the tears to the cornea

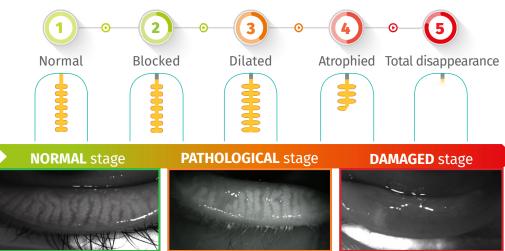
WHAT IS MGD?

MEIBOMIAN GLAND DYSFUNCTION

MGD causes the most common form of dry eye and results in:

- Reduced lipid (oil) production
- Poor guality oil: the oil thickens and blocks the Meibomian glands. hence it cannot be released
- **Obstruction and atrophy** of the Meibomian glands

• THF MEIBOMIAN GLAND DAMAGE CYCLF



WHAT IS DRY EYE?

What are the causes?

- Abnormal tear evaporation, due to insufficient lipids (oil)
- **Poor tear production,** due to insufficient water in the tears
- Unbalanced tear composition
- Low frequency, incomplete blinking



Cells in the coniunctiva

produce the mucin

laver (adhesive)

Lacrimal gland

produces the aqueous

layer (water)

Parasympathetic nerve stimulates the glands

DIAGNOSIS

- Standard tests include a questionnaire to assess symptoms, examination of the eyelids using a slit lamp, Schirmer's test and ocular staining
- New non-contact examinations are now available to assess tear quality and quantity, along with meibomian gland imaging

TREATMENT

Since **dry eye** is caused by multiple factors, its treatment is complex and can include:

- Hygiene, heating and massaging the eyelids
- Blinking exercises
- Tear substitutes
- Anti-inflammatory treatments
- Punctal plugs
- Intense Pulsed Light (IPL) therapy

WHAT IS IPL THERAPY?

INTENSE PULSED LIGHT

TREATMENT in less than 10 minutes





• HOW IT WORKS

Non-invasive and painless, IPL (Intense Pulsed Light) therapy involves applying **a series of light pulses to the cheek,** which:

• Stimulates the parasympathetic nerve that controls the glands • Reduces inflammation of the skin and evelids

TREATMENT PROTOCOL

• Three sessions spaced out by 7 to 15 days • A fourth session might be necessary • One follow-up session after several months may be recommended • Sessions are **quick**, **painless** and **do** not require anaesthesia • A mild stinging sensation and heat may be felt during the session

• FXPECTED **RESULTS**

- Improved tear quality and quantity • Symptoms reduction
- Reduced inflammation of the face and evelids.
- and fewer **Demodex** (eyelash parasites)
- A lasting effect (several months)