

Dry Eye Clinic

Department of Ophthalmology

Information for Patients

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Introduction

Dry eye can be painful and affect your day to day activities. We understand the impact this can have on your life. The aim of this clinic is to give you:

- support and advice in managing the condition.
- more time to discuss any issues you are having.

The clinic is run by the corneal specialist nurses who will carry out a full eye examination and can start you on a suitable treatment. They will do some tests at your appointments to see how well your treatment for dry eye is working.

The nurses work with the corneal team who take care of dry eye conditions. You will stay with the same consultant, however the nurse will examine you in clinic and tell the doctor of any changes to your eyes. If needed you will have an appointment to see the doctor.

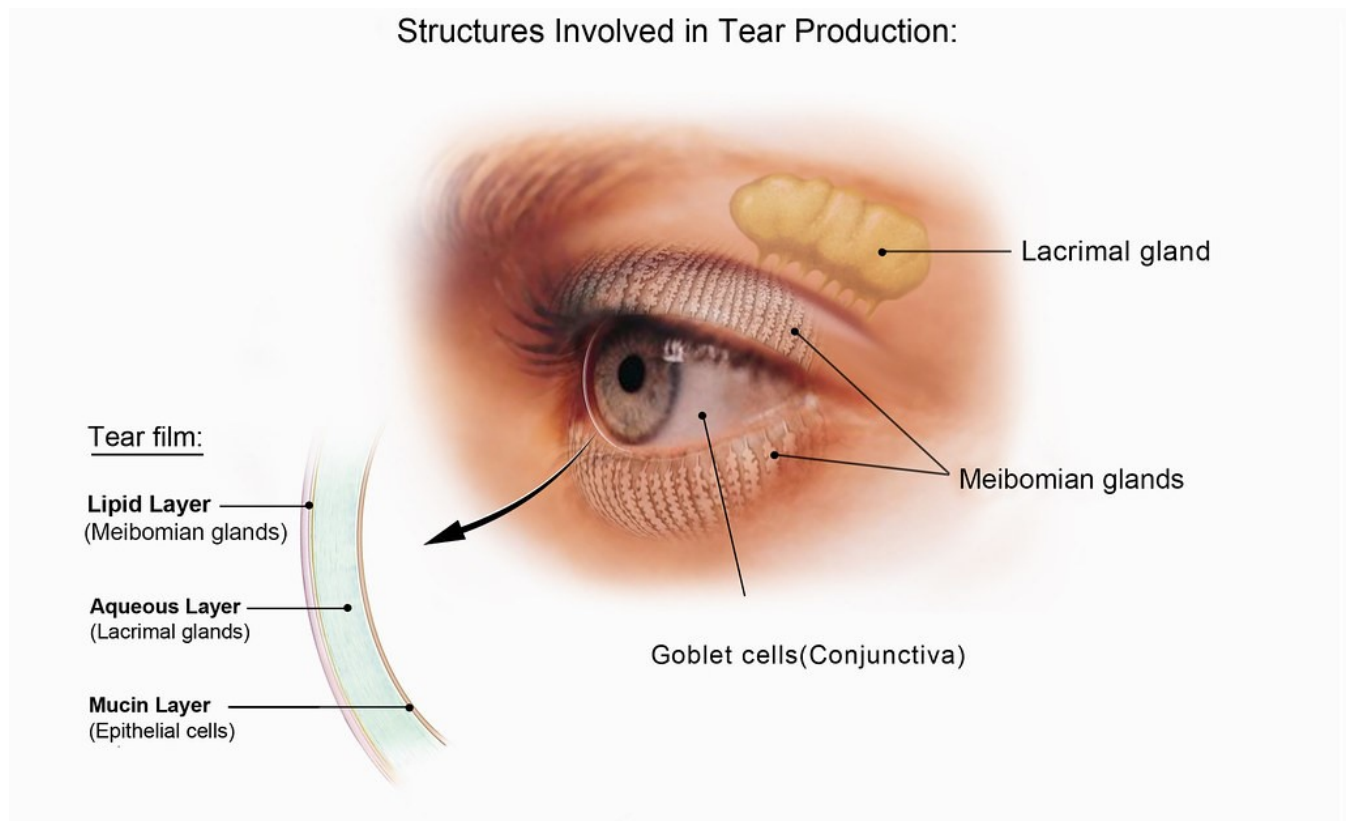
Your GP should supply the medicines you need. If treatment changes, we will give you a prescription and tell your GP. You will be sent a copy of the letter we send to your GP.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

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What is dry eye?

Dry eye can be caused by poor quality tears, eye surface problems, nerve endings working differently, and conditions that cause redness and swelling (inflammation).



Reasons for having poor tears are as follows:

- The eyelid has glands that produce oil which covers the tear film. When the oil is not released the tear film evaporates. The oily layer is the top layer which is released from the eyelids.
- The aqueous layer is produced from the tear ducts. This is the middle layer and is the thickest.
- The mucous layer comes from goblet cells on the surface of the eye; this is the thinnest layer. Glands on the surface of the eye can stop producing mucous.
- The tear film covering the eye is made up of a balance of ingredients. If this normal balance is upset, this will affect the eye surface.
- People over 60 years old are more likely to have dry eye.
- Inflammatory conditions can affect how the eye makes tears, and also effect the eye surface.

Inflammatory conditions can contribute to dry eyes. These include conditions such as rheumatoid arthritis, lupus and Sjögren's syndrome. You may need to have these conditions managed along with your dry eyes. You may already have been diagnosed with these conditions and have medication from another clinic to deal with symptoms. The condition will need constant treatment to control symptoms.

What is the treatment for dry eyes?

The main treatment for dry eye is replacement tears, which need to be used at regular intervals. This replaces the tear film. There are many different dry eye drops available.

Medication

There are different types of tear supplements to replace the tear film. The aim is to manage the condition:

- Drops
- Gel
- Ointments

They range from watery and therefore easily tolerated but short-lasting, to thick and oily, which last a long time but may make the eyes feel 'sticky' and blur your vision. There are many types and it may be a case of trying a few in different combinations, to see which suits you. You will be advised according to the cause of your dry eye.

Punctal plugs

Punctal plugs can be used to stop the tears draining out of your eye. These can be replaced at intervals, as they can fall out and need replacing.

Tears normally drain out of the eye via tiny tubes (punctum). The punctum are on the lid margin, which is the flat area of the lid behind the lashes.

Punctal plugs sit in the tear ducts and help stop the tears from draining away. This can help by keeping tears on the surface of the eye for longer. The procedure is quick and painless.

If this is successful we may look at a more permanent procedure.

Managing eyelid conditions

Treating eyelid conditions which cause dry eye can help with symptoms.

Treatment involves using heat, massage and cleaning of the eyelid (we have a separate leaflet which explains how to do this).

Contact lenses

Some people feel a benefit from wearing contact lenses, as it can help with the discomfort from dry eyes. They are used for a very small group of patients with underlying eye conditions. There is an increased risk of infection by using contact lenses. They need to be changed every month.

What tests do you do in the clinic?

We do certain tests in the clinic which show us the cause of your dry eye, and which help determine the best treatment to manage your symptoms.

The tests are:

- **Osmolarity test:** a probe is used to touch the white part of your eye to measure how concentrated the tears are.
- **Schirmers test:** we numb your eye for this test by putting a local anaesthetic eye drop in your eye. We then place some paper between the lower eyelid and the eye. This paper measures how many tears are produced. It takes 5 minutes and you need to keep your eyes closed.
- **Ocular Surface Disease Index (OSDI) questionnaire:** your answers to 12 questions help give us an idea of how dry eye is affecting you.
- **Tear meniscus test:** measures the depth of tears in your eye.
- **Tear break up time (TBUT) test:** measures how quickly tears break up.
- **Oxford score test:** looks at how dry the surface of the eye is.

Together these tests can help diagnose and manage your dry eye condition. They can also help us to decide if certain treatment is improving your symptoms.

Your appointments

On your first visit we will examine the inside of your eye. We will need to make your pupil bigger (dilate) so we can see this properly. Therefore, please do not drive to this appointment. We will only dilate pupils at future appointments if needed.

If you are a new referral, your notes will be discussed with a corneal consultant and suitable follow-up appointments will be arranged for you. You may have a few appointments with the nurse before you see the consultant.

It can take a few months for treatment to help with your symptoms, so we may see you at 3 monthly intervals until we have the right treatment, then we could see you at 6 month intervals. This is normal for managing your condition.

We also do telephone follow-ups, where we will call you to discuss how things are.

Dry eye is a chronic condition where you will have good and bad days. There is no cure for this condition. It is important to follow the regime agreed with the nurse so we can monitor if the treatment is working. This helps us know if we need to try different treatments with you.

If we feel your dry eye symptoms are well managed we can then discharge you back to your GP. If you have any future issues your GP can refer you back to this service.

Contact details

If you have any questions, or you need treatment advise please contact us:

- **Corneal Specialist Nurse:** 07506 827 360 or 07970 940 125
Monday to Friday, 9am to 5pm
- **Corneal Team Secretary:** 0116 258 5913
- **Eye Casualty Department:** 0116 258 6273
Monday to Saturday - 8.30am to 4.30pm
Sunday and Bank Holidays - 8.30am to 12.30pm

Alternatively your optician can advise you about dry eye conditions.

If you have any questions, write them down here to remind you what to ask when you speak to your nurse/consultant:

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اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

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ਜੇ ਤਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

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