

Treating crocodile tears syndrome (eye watering when eating or drinking)

Ophthalmology Department

Information for Patients

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What is crocodile tears syndrome?

Crocodile tears syndrome (also called gustatory lacrimation) is when one eye waters a lot when you eat or drink. It usually happens every time you have a meal.

There are many other reasons why someone would have a watery eye. Sometimes it can be a mix of many different issues. These include:

- irritation of the eye,
- the eyelid to be in the wrong position (malposition),
- blockage or narrowing of the tear drainage system.

You get can watery eyes with any of the above issues at any time. It is not always when eating or drinking. Your health professional will take a careful history and assessment to rule out any of the above issues.

Why did I get crocodile tears syndrome?

This condition is a rare problem usually following an episode of Bell's palsy. Visit: <https://yourhealth.leicestershospitals.nhs.uk/> and search for leaflet 'Treating facial weakness affecting your eye caused by Bell's palsy' or leaflet number 1189 for more information. Or following other conditions that can injure the facial nerve. It can rarely be a condition that you are born with.

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

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To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net

We believe that as the facial nerve recovers after damage the nerves are rewired. The connection which should go to the glands that make saliva in your mouth, goes to the gland that makes tears (lacrimal gland) instead.

How is it treated?

In the past treatments like removing a part of the lacrimal gland, using tablets and surgery to destroy the nerve connection were used. Unfortunately the results from these studies have showed mixed results and have found it to be causing potential sight threatening complications.

Botulinum neurotoxin type A injections have been previously used in many conditions including one that causes sweating during eating (Frey's syndrome). It was first used as a treatment of crocodile tears syndrome in 1998. It has good results and since then many studies have been published to show its benefit in patients with this eye condition. It is important that you know that this treatment is not a cure. You will need to get repeat injections. The botulinum toxin wears off after 3 to 5 months.



It works by blocking the nerve signal to the lacrimal gland. We give this treatment using a small injection given to the top of the eye socket above the eyeball. This is where the lacrimal gland (tear gland) is located. We can give either through the skin, or under the upper eyelid after turning the lid over. We inject a very small dose which can sometimes be painful. The pain wears off soon afterwards. It takes a few days for the treatment to start to work. We often give this injection in a clinic setting by a trained healthcare professional.

What happens after the treatment with botulinum toxin injection?

You will not need dressing over the eye. You will be able to go home after the injection. Usually there is a mild ache around the area injected. We recommend simple painkillers like paracetamol should you need them. There may be a small bruise and the eyelid will be a little swollen, but this often settles within a few days.

What are the side effects of botulinum toxin A injection?

Like almost every medicine, there are side effects that you need to know about before having this treatment:

- **Rash / itching:** This is rare but it could be a reaction to the injection.
- **It may not work:** Despite having the treatment, you may find that the treatment does not help with your symptoms. We would then consider a stronger dose after speaking with you about the risks.
- **Double vision:** Some of the muscles that move your eyeball are very near the site of the injection. If the injection spreads to those muscles you may experience double vision. If this is the case, it often resolves after a few weeks as the treatment wears off. **You must not drive** while you have double vision.
- **Drooping / closure of the upper eyelid:** The muscle that opens your eyelid is also near the site of injection. This could cause you to have a droopy eyelid. This will go away after a few weeks.
- **Dry eye:** The treatment may reduce the amount of tears you make. This can cause you to have a dry eye. You may need lubricant eye drops to stop this.
- **Swollen eyelid:** Sometimes you may get bruising with the treatment. You may get a bacterial infection by the injection but very rare. We will give you antibiotics if needed.
- **Infection:** Because of the way botulinum toxin is made, there is a small risk of blood borne infections (such as HIV and hepatitis). This risk is extremely low because all blood used in production of the medication is carefully screened and treated.
- **Vision loss:** With any injection around the eye there is a small possibility of side effects that can seriously affect your eye sight although this is extremely rare.



Does the product have a licence for this condition?

Most medicines used in the UK hold a 'product licence' which is granted by a government organisation. This licence states specific conditions in which the medicine can be used to treat people. Although we have used botulinum toxin for treating eye conditions including watery eyes since 2001, the manufacturers have never applied for a licence for the product to be used for this condition.

We use it on a "named patient" basis, and records are kept of all injections and patient details. This is one example of many drugs that are licenced for use for one condition being used safely and successfully for another condition.

Where can I get more information?

You can also contact our Oculoplastics nurse specialist team at Leicester Royal Infirmary on: **0116 204 7971**

Support website: www.facialpalsy.org.uk

If you are not sure about any part of this leaflet, then please ask your health professional to explain further. Please keep this leaflet for future reference.

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