

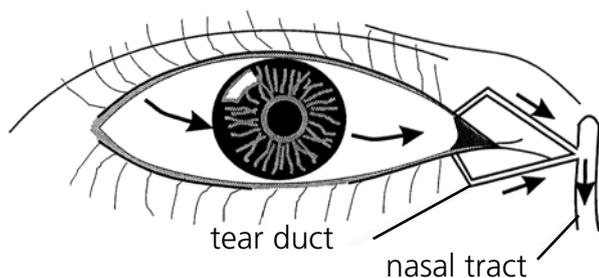
Dry Eye

Tears

Tears lubricate, clean and nourish the cornea, the clear window at the front of the eye. Tears are essential to the health and comfort of the cornea.

Tears are produced by the tear gland in the upper eyelid and contain oil from other glands in the eyelid. This oil enables the tears to cling to the surface of the eye, keeping the cornea moist. The front of the eye is constantly bathed in tears which are spread over the surface through blinking.

Tears drain away from our eyes into our nose and throat through small drainage glands, called tear ducts on our eyelids, as shown in the diagram below.



What causes dry eye?

- **Insufficient tear production** - this can happen as we age and can be associated with other conditions such as *rheumatoid arthritis*.
- **Lack of oil in the tears** - when there is a lack of some of the oily substances in the tears, this can cause an uneven covering of tears on the front of the eye. It may also allow tears to evaporate quickly or to run straight off the eye.
- **Poor eyelid closure** - dry eye can be caused if our eyelids do not meet fully when we blink or sleep.

What are the symptoms of dry eye?

- A gritty/sandy sensation in the eye.
- Burning.
- Watering - this is often because the tears do not contain enough oil, so they run off the eye.
- Redness.

How can the clinician tell if the problem is dry eye?

The clinician will take a detailed history from you of your symptoms. If you see a clinician face to face, they will also carry out an examination. From this they will be able to see, through the appearance of the eye, that the eye(s) are dry or if the tears are not covering the eye properly.

Dry eye is a long-term condition, so treatment must be continued long term.

Dry eye can be made worse by dry and smoky atmospheres, and should be avoided if possible. If these atmospheres cannot be avoided you could use a room humidifier or place a dish of water near a heater.

What is the treatment?

1. **Replacement tears** - in the form of eye drops/gel. This is often required 4 times a day or more. If you are using drops regularly, it is recommended to use preservative-free formulations.
2. **Lubricating eye ointment** - this is a thicker formulation. This is often recommended for night time use as it lasts through-out the night. The drops and ointment must be used regularly. They will comfort the eyes and prevent damage to the cornea.
3. **Eyelid hygiene** - daily warm compresses on your closed eyelids for 10-15 minutes can encourage the flow of oil onto the cornea. This will help the tears stick to the surface of the eye and minimise evaporation.

The Trust cannot accept any responsibility for the accuracy of the information given if the leaflet is not used by Royal Devon staff undertaking procedures at the Royal Devon hospitals.

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