

Information for patients

What is BLEPHARITIS?

Blepharitis is an inflammation of the eyelid margin, where the lashes grow. It is a very common, chronic (lingering) condition that is often difficult to eradicate and requires long-term treatment. It is sometimes referred to as “dandruff of the eyelashes”.

What causes and who gets BLEPHARITIS?

Blepharitis is most commonly seen in older adults where changes in the oils secreted by the eyelid (meibomian) glands and alterations in the normal skin bacteria are thought to be contributory.

Blepharitis may also be associated with a low grade bacterial infection (staphylococcal blepharitis) or generalised skin conditions including; seborrheic dermatitis, acne rosacea and atopic eczema.

However, blepharitis is not contagious and cannot be passed from one person to another.

What are the symptoms of BLEPHARITIS?

Blepharitis may cause a wide variety of symptoms including **some** or **all** of the following:

- red sore eyes red eyelids itching
- stinging burning soreness
- aching grittiness watering
- eyelids stuck upon waking crusty discharge flakes on the eyelashes

Blepharitis is very variable in its presentation and appearance. Some people have red, angry, crusty eyelids yet have few symptoms, whereas others have blepharitis nearly invisible to the naked eye but are terribly symptomatic.

Blepharitis does **not** damage your eyesight but can disturb your tears causing your vision to be smeary and also lead to “dry eye” symptoms. It can also be associated with the development of eyelid cysts, and inflammation and infections of the conjunctiva and cornea.

What treatments are there?

It is important to understand that whilst blepharitis and any underlying skin condition can be difficult to eradicate, symptoms can usually be controlled with regular eyelid hygiene (cleaning).

Regular eyelid margin hygiene (suggested):

Twice daily for 3 weeks then daily indefinitely as follows:

- Make a solution of 1 teaspoon of sodium bicarbonate (from the chemist) dissolved in 1 cup of **cooled** boiled water.
- Dip one end of a clean cotton-bud in the solution and then carefully but firmly, rub the end along your eyelid margin through the **roots** of your eyelashes (where the eyelashes come of the eyelid) using a side-to-side motion. Do this until all the flakes, crusts and oily debris are softened and removed.
- **IF** an ointment has been prescribed squirt a small amount onto a fingertip and rub it thoroughly into the **roots** of the eyelashes. If an ointment has not been supplied, Vaseline can be applied in the same manner - this will soften any eyelid debris and soothe the eyelid.

Note:

Care must be taken when cleaning the eyelashes and applying the ointment to ensure that the eye is not touched.

Alternative technique:

- Cleaning using a solution containing dilute baby shampoo. However, some people find this can be uncomfortable.

Hot-Compress bathing:

Patients with abnormal or excessive oily eyelid secretions and who often complain of stinging eyes, may benefit from hot compress bathing (which melts the fatty secretions) followed by careful eyelid hygiene.

- Run a clean face cloth under the hot tap until hot but not scalding. To prevent losing the heat, quickly wring it out until moist, fold it in half and apply across eyelids. It is best to tilt your head back slightly so that it rests in place and then using your fingertips held together, apply gentle pressure and massage the secretions towards the eyelid margin ie. from top downwards for the upper eyelid and from the bottom upwards for the lower eyelid. You may need to repeat the procedure 2-3 times and 2-3 times a day. After you have finished carefully clean your eyelids as described.

Alternative technique:

- Wrap a moist face cloth around a small, warm (microwaved for 4 minutes) potato in order to apply warmth to the eyelids for several minutes. However, it may be more difficult to massage the secretions with this technique.

Ointments / eye-drops:

You may be prescribed anti-biotic or occasionally steroid eye-drops or ointments to be applied to your eyelids or eyes. Your doctor will explain how these are to be used. It is important that you only use any such medications as directed and not unsupervised.

Artificial tears:

Symptoms of grittiness, irritation or smeary vision due to tear film disturbance may be helped by artificial tears which are available without prescription and can be obtained from chemists, opticians and some supermarkets.

Tablets:

Sometimes your doctor may prescribe a 8-12 weeks course of oral antibiotics (e.g. doxycycline). Provided you do not suffer side-effects it is important to try to complete the course as beneficial effects may not be immediate.

How long will it be before I notice an improvement?

An improvement in symptoms may take several weeks to occur so it is important that you persevere with the treatments.

However, if in spite of your best efforts your blepharitis continues to cause symptoms or if it “flares up” you need to have your treatment amended. See your doctor or optician.

ATTENTION:

If your vision deteriorates then you should seek urgent medical attention from your optician, general practitioner or local eye emergency clinic.

More information?

Further information may be obtained from your optician, general practitioner or eye doctor. There are also many online resources but you need to be sure of their legitimacy and impartiality, particularly if proprietary products or treatments are recommended.

The author of this information leaflet has no proprietary interest in any products that are mentioned.