Management,

Managing Dry Eye

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Tests to Run When You've Identified "Morning Dryness"

Last month I covered some "must ask" questions once a dry eye patient has been identified. Depending on the answers to the questions you will then be guided to certain clinical tests to inform treatment. An example would be if the patient answers the question that their eyes are irritated first thing in the morning or even irritated in the middle of the night. We need to look specifically at lid conditions that might be triggering and progressing and sustaining the inflammation, even in the face of treatment. If the patient also has sleep apnea, then there exists a very high likelihood that the patient has a degree of nocturnal lagophthalmos. At the very least, the patient should have the Korb-Blackie lid seal test and a thorough evaluation of partial blink while at the slit lamp.

The Korb-Blackie test is easily accomplished by having the patient lean back with their head against the headrest of the chair and gently closing their eyes. The room should be darkened and a transilluminator placed on the upper lid. If there is a partial lid closure and a lack of a tight lid seal, then you will see the glow of light where the lids should meet, and this indicates the likelihood of prolonged exposure while sleeping, causing an extensive as well as chronic amount of inflammation. The patient will also most likely demonstrate a partial blink pattern when observing with fluorescein at the slit lamp. This patient can be very recalcitrant to treatment and have a corresponding MGD as well. Until recently, we have not had a reliable method to address this problem of the recalcitrant patient caused by exposure.

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A promising product has just launched, and I've participated in the clinical trials by treating hundreds of patients. It is a very simple lid closure device that causes the lid to remain sealed shut during sleep and allows the lid to function

normally and protect the cornea and conjunctiva all night long as it would when it remains tightly closed. This product is the SleepTite/SleepRite™ eyelid seal for nighttime utilization. A porous, latex free design allows the skin to breath while achieving a tight lid seal throughout the night. It is available for both regular as well as sensitive skin types. The results have been remarkable and have resulted in healing of these tricky recalcitrant patients. By reducing the exposure, you reduce the overall oxidative stress and I've found that it now allows both topical as well as procedural treatments to exhibit far greater efficacy. Patients have been incredibly pleased with an easy-to-use and relatively inexpensive method to keep their eyes fully sealed during sleep and how fast the results are seen by me and felt by them.



Douglas K. Devries, OD has a degree in financial management from the University of Nevada and graduated from Pacific University College of Optometry. He is co-founder and managing partner of Eye Care Associates of Nevada. He is an adjunct clinical professor of optometry at Pacific University and residency program director. He dedicates the majority of his clinical practice to ocular surface disease.

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