

Why does my dry eye cry?



Dr. Pamela Kaw

Patients are often perplexed when informed that one of the common symptoms of dry eye is frequent tearing. Naturally, they seek an explanation. So I explain it as follows: Our basic tear film is actually a fine layer of water trapped between an oily layer on the outside and mucous layer on the inside. Any disturbance to this “finely oiled” protective film results in reflex tearing. The extra tears bring in healing molecules to the surface of the eye in order to repair the damaged tear film.

Other common symptoms of dry eye disease are burning, sandy sensation, foreign body sensation, dull ache around and behind the eyes, intermittent sharp eye pain and chronic red eyes. As the severity of the disease increases all these symptoms occur more frequently and stay for longer periods of time. Many of you may be aware of the term “syndrome” associated with dry eyes. It points to the complexity of the condition and that a group of symptoms consistently occur together. Tear glands (also called lacrimal glands), mucous glands,

oil glands, eyelids, conjunctiva and cornea work in tandem to ensure that the surface of the eye is smooth and unaltered for best possible vision. Autoimmune disorders (like Sjogren’s), rosacea, allergies, prescription or over-the-counter eye drops, chemical burns, contact lens use, dry atmosphere, and eye surgery can contribute to altering the surface of the eye and cause symptoms of dry eyes. Inflammation (swelling and redness) of the eyelids, also called blepharitis, is a major component of dry eye syndrome and is targeted frequently during treatment of the condition.

Treatment is aimed at the underlying condition. In addition, initial treatment includes using artificial tears and warm compresses. Common ingredients of artificial tears are polyethylene glycol,

propylene glycol, hydroxy-methylcellulose, glycerine and polysorbate. Care should be taken to select eye drops with as few ingredients as possible, avoid drops that promise to “clear red eyes” or “itchy eyes” because often these contain non-lubricants that have no effect and even hinder recovery. Warm compresses

may use stronger drops to reduce inflammation of the eyes. These include steroids, cyclosporin and other medications to reduce inflammation. Sometimes oral or topical antibiotics are used to treat associated infections. Fish oil capsules, healthy diet, smoking cessation are other very effective interventions used to control this often chronic condition. In-office monitoring is done by simple tests like staining the surface of the eyes with fluorescein dye that stains the dry spots, testing osmolarity of the tears and measuring the tear production.

In summary, dry eye is very common, easily treated when mild but sometimes needs advanced treatment. With patience, you and your doctor will often arrive at a treatment regimen that keeps this condition in control.

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can be applied on closed eyes with a warm moist washcloth, microwaved sock filled with rice, microwaved potato, warm teabags. For most patients these simple steps **DONE REGULARLY** work. For more severe conditions, however, advanced treatment is necessary under an ophthalmologist’s care. Your physician

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