

Information for Patients

Blepharitis

The doctor or nurse practitioner has diagnosed that you have a condition of your eyelids that is called Blepharitis (pronounced Blef-a-ry-tis).

What is Blepharitis?

Blepharitis is a chronic (long term) recurring inflammatory condition of the eyelids. It usually affects both eyelids and can affect people of any age. If Blepharitis is not treated, it will not improve, and your symptoms will remain. Blepharitis usually involves the eyelid margins (the edges of the eyelid) and can be associated with conjunctivitis. The cause is often a bacterial infection such as Staphylococcus Aureus or Staphylococcus Epidermis but it may also be associated with poor hygiene, allergy (medicines or makeup), dandruff, excess production of lipid from the meibomian glands (tiny oil glands in the eyelid) and acne rosacea, a condition of the skin.

What are the signs and symptoms?

- Eyelid irritation
- Reddened eyelids
- Lid margin swelling
- Visible scales on the eyelashes
- Burning sensation
- Itching
- Loss of eyelashes
- Foreign body sensation
- Sticky eyelids when waking up in the mornings
- Eye dryness due to poor tear film quality and/or watery eye due to irritation of ocular surface

What is the treatment?

For most people this involves a simple eyelid care routine. This wipes away bacteria and deposits from the lid margins and expresses the lid glands. If you do this carefully as described, you should be able to keep the condition under control without the use of medicines.

Cleaning your eyelids

Always wash your hands thoroughly before and after you have cleaned your eyelids.

Remove contact lenses if worn

There are three main steps to eyelid hygiene that should be performed once or twice a day:

- Warm compresses
- Gentle lid massage
- Lid margin hygiene

Warm compresses

- Apply a warm compress for 5-10 minutes, twice a day. This can provide some relief from the soreness and itching. Simply moisten a clean facecloth under a running tap of hot water (as hot as you can stand) and then place over the eyelids for approximately 5 minutes. Reheat the compress regularly by soaking it in hot water, so that the flannel is not allowed to cool – the warmth melts the oils in the stagnated eyelid glands. Do this twice a day for two months, then several times a week (even after your eyelids are clear of the crusting). This will help to prevent the condition from returning.
- Some people find a microwavable eye mask (Eyebag, Blephamask) useful in place of a warm compress. Make sure that you clean the eye mask before and after use. It is important to carefully follow the manufacturers' guidelines if using one of these products, to prevent burning your skin.

Eyelid massage

- Gently massage your closed eyes by rolling your little finger in a circular motion; this will help to push the melted oil out of the glands. You cannot see the oil coming out as the droplets are tiny.
- Next take a cotton-tipped applicator (cotton wool bud) and with your eyes shut, gently roll the cotton bud sideways along the whole length of the upper eyelids and then repeat along the whole length of the lower eyelids. This will help to remove all residues from the margin of the eyelids after having initially dissolved the fatty contents with the heat.
- If the oils have been stagnant in the glands for quite some time, they might have changed their chemical structure. It is possible that when the oil drains onto the surface of the eye after gentle expression, it may cause irritation, a bit like getting soap in your eyes. This is normal and should get better with time as the Blepharitis comes under control.

Lid margin hygiene

- The expressed oils should be wiped away from the eyelid margin. This also helps to reduce bacteria, dust or grime (that may have accumulated along the eyelids whilst blinking) and also any remaining crusts.
- There are many recipes for cleaning solutions and the best proportions or products to use may vary between individuals. For example, boil a pint of water, fill an egg cup and allow the water to cool. Add either a drop of baby shampoo, a drop of tea tree shampoo or half a teaspoon of bicarbonate of soda. You could also use a commercial lid cleaning solution – there are a number of products available from the dispensing opticians at Manchester Royal Eye Hospital or from your local optician or pharmacy.
- Soak clean lint free makeup remover pads in the warm solution and remove crustiness from around the eyelids, paying special attention to the eyelashes. Throw the makeup remover pad away. If necessary, repeat with a clean makeup remover pad, paying attention to the roots of the lashes, the bases of the lashes and the length of the lashes.
- Some patients may find the use of cleaning products or shampoo makes their eyes dry. These patients should use commercial products for example Blephasol lotion or Blephaclean wipes.

Helpful tips

- Hygiene is very important and should be continued even after the condition has apparently cleared. Your face should be washed at least twice a day and hair should be kept clean and free of dandruff, as should the eyebrows. Using an anti-dandruff shampoo will help to reduce the dandruff.
- Never share towels and facecloths and ideally use clean ones each day.
- If you wear eye makeup at all, you should remove this thoroughly before going to bed.
- Do not share your eye makeup or use anybody else's.
- Once the condition has cleared, clean the lid margins once or twice per week in the same way.
- Use any prescribed medications as directed.
- If your eyes are feeling

Are there any other treatments available?

- Antibiotic ointment may be prescribed in short courses to get the condition under control. If this has been advised, rub the ointment into your eyelid after undertaking your lid hygiene. Only use the ointment for the prescribed period.
- Antibiotic tablets such as doxycycline may be prescribed if there are associated skin related problems; however for most patients this is not necessary.
- Lid solutions and wipes are available commercially but not on the NHS. If you interested in learning more about these products, please speak to the practitioner treating you, your family doctor (GP) or local Optician.

Are there any complications associated with Blepharitis?

Complications can include:

- Chronic infection
- Loss of eyelashes
- Trichiasis (ingrowing lashes)
- Conjunctivitis
- Corneal ulceration

- Eyelid scarring
- Cancellation of planned surgery

Will the Blepharitis come back again?

It is likely that the Blepharitis will reoccur if you stop the eyelid cleaning regime. Some people have to carry on with treatment for a long time to prevent it reoccurring, sometimes forever. Should the symptoms come back and you have stopped the eyelid cleaning, you should start the regime again and continue with it.

This is not an emergency situation or urgent condition and you should refrain from visiting the Emergency Eye Department unless your eye is red or painful and you have followed the advice in this information leaflet.

If however, you do require emergency treatment, you can contact the Emergency Eye Department which is open from 8.00am to 8.00pm every day. Outside of these hours please contact Ward 55 open 24 hours every day. These departments can be contacted via the hospital switchboard on (0161) 276 1234 asking to be put through to the Emergency Eye Department or the ward.