

Blepharitis in Sjogren's Syndrome

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Blepharitis refers to inflammation of the eyelids, particularly at the lid margins. It's a common disorder in the general population and has even higher frequency in patients with Sjogren's syndrome or rosacea. In Sjogren's patients, the use of excessive amount of ocular lubricants may block the meibean glands (that make lipid) and may be associated with a low-grade bacterial infection or a generalized skin condition.

Blepharitis Symptoms and Signs

Symptoms of blepharitis can mimic the symptoms of dryness due to Sjogren's. It has been postulated that the blocked meibian glands develop a low grade bacterial infection that releases an exotoxin that is irritating to the ocular surface. Indeed, the failure to respond to artificial tears or other medications may be the blepharitis rather than the failure of the artificial tears. The symptoms include burning, **foreign body sensation**, crusty debris (in the lashes, in the corner of the eyes or on the lids), dryness and red eyelid margins.

Blepharitis Treatments

Blepharitis can be difficult to manage because it tends to recur. Depending on the type of blepharitis you have, treatment may include applying warm compresses to the eyelids, cleansing them, and/or

massaging the lids. It is important to recognize that blepharitis may occur as part of the glandular dysfunction in Sjogren's syndrome, where the decreased production of lipid leads to an unstable tear film and increased evaporative loss of the tears (either your own or the artificial tears). However, recognition of dry environments is also important. For example, people who spend a great deal of time in front of a computer screen have a 80-90% decrease in their blink rate as they stare at the screen. Also, office buildings with central air conditioning or airplanes have very low humidity. Artificial tears may help replace the "water" part of the tear but attention to massaging the eyelids and lid scrubs is important. In the case of computer users, we recommend the setting of an alarm at hourly intervals to get up, stretch and gently massage the eyes.

The warm compress portion of treatment is designed to loosen crusts on your eyes before you cleanse them; it can also warm up and loosen the plugs blocking the meibomian glands in [meibomianitis](#).

To use a warm compress, follow these steps:

Wash your hands, then dampen a clean washcloth with warm water for about 2-3 minutes.

Next, we recommend making up a solution using about 1 tsp of "Johnson and Johnson" baby shampoo (ie. no tears shampoo) in a quart of water and using this in the next step. (The solution can be saved and kept for weeks)

Place another warm washcloth into the diluted baby shampoo and put the washcloth over your closed eyes.

With your eyes still gently closed, lightly massage the washcloth over the eyelids as if you were gently "milking" the caked mucus (now loosened by the warm wash cloth) out the end of the previously blocked glands that open at

the end of the eyelid.

When you first begin treatment, your eye doctor probably will suggest that you do this four times daily, or about five minutes each time. Later on, you might apply the compress once daily for a few minutes.

Cleansing the eyelids is essential to blepharitis treatment. Your doctor will recommend what cleansing agent to use, such as warm water only, salt water, baby shampoo diluted with warm water or a special over-the-counter product made specifically for cleansing the lids.

Clean eyelids by following these steps:

Some specialists advocate the use of Q-tips for cleaning the lids, but we have found that sometimes particles of cotton plant or even wood may be present in the Q-tip and so now use the clean wash cloth method.

Your doctor may have you clean your lids several times daily to start, and then once daily thereafter.

Antibiotic treatment is recommended only for certain types of blepharitis. Your doctor may prescribe either a topical antibiotic ointment or an oral antibiotic.

Recently, some authorities have suggested using [flaxseed oil supplements](#) (omega-3 or combination omega 3/6 fatty acid), either by pill or by liquid, to stabilize the meibomian secretions associated with meibomian seborrheic blepharitis.

Because blepharitis tends to be chronic, expect to keep up therapy for a long period of time. Depending on the type of blepharitis you have and if you wear [contact lenses](#), your doctor may ask you to stop wearing them during the treatment period and even beyond.

If you wear soft contact lenses, you may be prescribed [RGP contacts](#) instead. Another option might be to replace soft lenses more frequently because of the potential for excessive deposit buildup. Some people simply don't do well with contact lenses and will have to consider other options such as glasses. However, Sjogren's syndrome is a contraindication to Lasik surgery.

It's a good idea never to use eye makeup, which can interfere with eyelid hygiene and massage treatments. With some kinds of blepharitis, you may need to use an anti-dandruff shampoo for your scalp and eyebrows. But take extra care to keep shampoo out of your eyes to avoid irritation.