

## Treatment Guidance: Dry Eye disease (May 2024)

- Dry eye disease (DED) is a common disorder where an inadequate tear film results in ocular surface irritation.
- The spectrum of DED varies from a mild, self-limiting, irritation to severe, **sight-threatening** disease. The quality of life impact of moderate DED compares to that of life on haemodialysis or with mild angina.<sup>1</sup>
- For information regarding the assessment of a patient presenting with DED symptoms see <https://cks.nice.org.uk/topics/dry-eye-disease/>.

### Summary of Management of DED by Severity

Mild	Soreness, irritation, discomfort	Negligible impact on the vision	Temporary treatment 1-2 x day with over the counter (OTC) drops, lid hygiene
Moderate	Increased discomfort	Transient blurring of vision	Long-term use of preservative-free (PF) drops 4 or more times per day, lid hygiene
Severe	Marked discomfort or pain	Reduction in vision	Specialist management

### Treatment advice

<p><b>SELF CARE</b></p> <p><b>Lid hygiene for all patients with DED:</b></p> <p>Daily use of USB-heated eye mask (purchase online) for 10minutes followed by lid massage.</p> <p>Occasional use of <b>lid wipes</b> or <b>cleaning solution</b> (patient to purchase OTC).</p> <p><a href="#">Blepharitis management CKS</a></p> <p><a href="#">BEST EYELID MASSAGE GUIDE youtube.com</a></p>	<p><b>First line (mild DED):</b></p> <p>Patient to purchase OTC drops and use BD - TDS</p>	<p><b>Nocturnal or early morning symptoms. Use at night:</b></p> <p><b>Ointments:</b></p> <p><b>HydraMed Night</b> (5g - £)</p> <p>-if stock issues use</p> <p><b>Xailin Night</b> (5g – £) or</p> <p><b>Hilo Night</b> (5g -£)</p> <p><b>Gels:</b></p> <p><b>Carbomer 980 0.2% PF</b> (10g - £)</p> <p><b>Thealoz Duo</b> (30 x unit dose vials, UDV - £££)</p>
<p><b>Second line (moderate DED) prescribe:</b></p> <p>Sodium hyaluronate PF drops QDS and PRN:</p> <p><b>Xailin Plus HA 0.2% PF</b> (10ml - ££)*</p> <p><b>Hy-Opti 0.2% PF</b> (12ml - ££)**</p> <p>-good for patients who struggle to squeeze bottle</p> <p><b>Eyeaze 0.4% PF</b> (10ml ££)</p> <p>-thicker longer-lasting but more blurring</p>		
<p><b>Third line (severe DED) – Specialist initiation</b></p> <p>Drops QDS and PRN:</p> <p>Thealoz Duo (10ml - £££)</p> <p>Viscotears TriAction (10ml - £££)</p> <p>Cationorm (10ml - £££) (may also be used second line)</p>		

#### Anti-inflammatory treatments: SPECIALIST INITIATION ONLY

**Only for patients under secondary care with persistent clinical signs despite intensive lubricant treatment:**

**Softacort** (hydrocortisone 0.3% PF, 30 x UDV - £££ (37p/dose)

**Prednisolone 0.5% PF** (20 x UDV - ££££ (64p/dose)

**Ikervis** (ciclosporin 0.1%, 30 x UDV - ££££ (£2.40/dose)

Price Indicator: £ <£3, ££ £3-£6, £££ £6-£12, ££££ >£12

\*Xailin Plus HA 0.2% has 90 day 'shelf-life' after opening. \*\* Hy-Opti 0.2% has a 6 month 'shelf-life' after opening.

<sup>1</sup> Utility assessment to measure the impact of dry eye disease. Ocul Surf. 2006 Jul;4(3):155-61

<sup>2</sup> TFOS DEWS II Epidemiology Report Ocul Surf. 2017 Jul;15(3):334-365.

<sup>3</sup> <https://www.england.nhs.uk/publication/conditions-for-which-over-the-counter-items-should-not-routinely-be-prescribed-in-primary-care-guidance-for-ccgs/>

### NHS England Guidance<sup>2</sup> states:

- “Self-care with OTC medication should be encouraged for conditions that are ‘**self-limiting**’ or are a ‘**minor issue**’.” This includes patients with mild DED.
- For patients with mild DED whom the prescriber feels has compromised ability to self-care because of medical, mental health or significant social vulnerability to the extent that their health and/or wellbeing could be adversely affected if reliant on self-care we suggest prescribing **Eyeaze (carmellose) 1% eye drops PF** (10ml - £1.81).
- Patients **with moderate or severe DED should continue to have treatments prescribed** if the condition is ‘long-term’, more complex, ‘not minor’ or ‘complex’. Or if a patient is prescribed prescription-only eye drops, which have not responded to OTC, or patients who are not capable of self-care.

### Referral to Ophthalmology

**Referral to a corneal specialist** should be considered if the patient has continuing clinical signs or symptoms despite using regular topical lubricants or if there are other features that might suggest a systemic cause, such as *oral dryness* or enlarged salivary glands.

### Lid Hygiene

The majority of patients with DED have evaporative dry eye because of **blepharitis** or **meibomian gland dysfunction**.<sup>3</sup> Therefore it is recommended that all patients with DED undertake a four-to-six-week trial of lid hygiene consisting of daily use of a USB hot compress for 10 minutes followed by lid massage. Occasional use of **lid wipes** or **cleaning solution** (e.g., Optase, Blephaclean, Blephasol) is also advised. For more information see

<https://cks.nice.org.uk/topics/blepharitis/management/management-of-blepharitis/>. **All products recommended for lid hygiene are to be purchased OTC by the patient.**

### Topical Treatment

There is significant variety in the quality and value of Dry Eye Disease treatments available OTC. PF treatments may afford better value for a patient because the bottle will last longer with a shelf-life of **up to 6 months** (rather than the usual 28 days for a preserved bottle). Patients requiring drops more than 3-4 times per day should use PF treatment as preservatives damage the ocular surface.

- Thinner/less viscous drops (e.g., hypromellose or polyvinyl alcohol) will provide more temporary relief albeit with less blurring.
- Thicker/more viscous drops (e.g., carboxymethyl cellulose, hyaluronic acid) will cause longer term relief, but may cause blurring of vision.
- Ointments (e.g., HydraMed Night) can be recommended for night-time use if the patient complains of symptoms at night-time or on waking. If the patient prefers (or has a lanolin allergy) a gel (e.g., Carbomer 980) can be used.

Advice for patients on administering eye drops: [www.myeyedrops.info](http://www.myeyedrops.info); ointment <https://patient.info/news-and-features/how-to-use-eye-ointment>

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