

Blepharitis

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ABSTRACT

Blepharitis is a eye lid disorder characterised by inflammation and pain. It affects all ages. Poor hygiene is primary cause of blepharitis. Topical antibiotics are first line of treatment with eyelid cleansing and warm compression. Topical steroids, oral antibiotics are also recommended in severe conditions. Blepharitis needs a long term treatment.

Keywords – Blepharitis, eyelids, Meibomian gland, itching, ulceration, hygiene, inflammation.

I. INTRODUCTION

Blepharitis is an inflammatory disorder of eyelids affecting all the age and ethnic groups probably because of poor hygienic condition. Blepharitis is common among different ocular morbidity and prevailing unhygienic conditions. Apart from poor hygienic conditions, microbial infection, clogged Meibomian gland, dandruff, eyelash mite and allergy are the some of the major causes of this disease.

Classification and Diagnosis

It is based upon anatomical location, blepharitis classified as anterior, posterior or mixed type blepharitis.

In anterior blepharitis, inflammation occurs on the base of eyelashes and follicles and it is characterized by redness in lid margin, superficial discomfort, eyelid ulceration, crushing around lashes, blurred vision, light sensitivity, stickiness of eyelids in morning etc.

In posterior blepharitis Meibomian gland dysfunctioning happens and it is characterised by decreased meibom secretions with foamy tears, chalazia, eyelid scarring, corneal scarring, corneal neovascularisation, corneal ulceration, marginal infiltration and pannus. Red swollen eyelids, burning sensation, ocular irritation, loss of eyelashes and misdirected eyelashes are common symptoms of Blepharitis.



	Squamous Blepharitis	Ulcerative Blepharitis
1.Cause	Abnormal metabolism, seborrhoea and dandruff of scalp	Due to infection
2.Symptoms	Itching, redness, swollen lid margin, lacrimation, photophobia, soreness	Same
3.Signs		

Scales	Numerous, Whitish and dry scale	Yellowish and sticky
Ulceration	Absent	Present
Bledding	Absent	Present
Madarosis	Few and temporary and replaced without distortion	Permanent loss of eye lashes if replaced misdirected.
Course	Mild	Progressive
Complications	Occasional	Serious like trichiasis, Tylosis, ectropion, epiphora

Treatment and management

Blepharitis is a common recalcitrant condition, complete recovery from this condition is not possible.

Topical antibiotics and warm compress is as a first line therapy.

Among different antibiotics, macrolides are preferred in the treatment of blepharitis, because a long with antibacterial effect it reduces inflammation as well long term therapy creates resistance.

Topical steroids are using in chronic condition of blepharitis to reduce inflammation, but it can use for less duration due to its complications like increased intraocular pressure.

Oral antibiotics are preferred in chronic conditions. Omega 3 fatty acids are the supportive therapy in blepharitis to improve function of Meibomian glands.

Eyelid cleaning, warm compress and eyelid scrub are preferred to reduce some complications by removing the meibom clogging and remove microbes.

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