

Blepharitis

Overview

Blepharitis is a common inflammatory condition that affects the **eyelids**. It usually causes burning, itching and irritation of the lids. In severe cases, it may also cause **styes**, irritation and inflammation of the **cornea** (keratitis) and **conjunctiva** (**conjunctivitis**). Some patients have no symptoms at all.

Blepharitis is usually a chronic problem that can be controlled with extra attention to lid hygiene. However, it is sometimes caused by an infection and may require medication.

Signs and Symptoms

- * Sandy, itchy eyes
- * Red and/or swollen eyelids
- * Crusty, flaky skin on the eyelids
- * Dandruff

Detection and Diagnosis

Blepharitis is detected during a routine examination of the eyelids and lashes using a **slit lamp microscope**.

Treatment

The key to controlling blepharitis is to keep the eyelids and eyelashes clean. Begin by soaking a clean washcloth in hot tap water. (You may also warm the washcloth by dampening it first and placing it in the microwave for 15-20 seconds. Use caution, all microwaves heat at different intensities. Hold the washcloth to your cheek to test for temperature before placing it on the eyes.) Place the compress on closed eyelids for 1-2 minutes to loosen the material attached to the roots of the eyelashes. Next, gently scrub the eyelids at the roots

of the eyelashes with either: a small soft washcloth; a commercially available eye scrub kit (***recommended***), or a cotton swab soaked in a mixture of equal parts of baby shampoo and water. Afterward, rinse the lids thoroughly with warm water.

This treatment should initially be repeated two times daily for two weeks, and then reduced to once daily long term. Like dandruff, there is no cure for blepharitis; but it can be controlled. In some cases, anti-inflammatory and antibiotic drops or ointments are necessary for flare-ups or more severe cases.

In other cases, meibomitis (impacted glands along the lid margins –“*granulated eyelids*”) is also present and requires long term treatment with hot compresses and occasional oral antibiotics.