
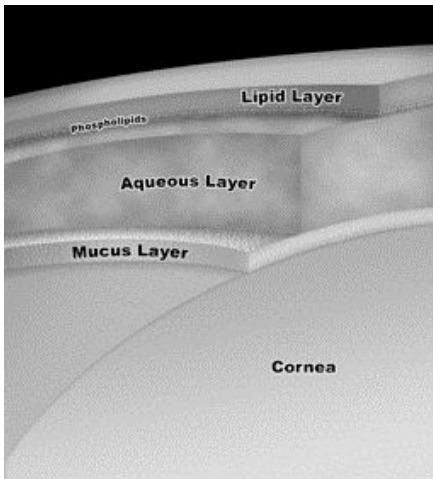


A poor tear film 



Who We Are

About Us

Dr. Cecchi offers a wide variety of eye and vision related services.

Specializing in cataract surgery, he also offers comprehensive eye exams, glaucoma screening and treatment, macular degeneration monitoring, and functional eyelid surgery.

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Dry Eye Syndrome



What is Dry Eye Syndrome (DES)?

The eyes produce a moisture layer that coats them. If there is a decrease in the amount of tear produced (quantitative deficiency) or a change in the quality of tear produced (qualitative deficiency), the eyes may be drier than they should. Dry eyes can cause symptoms such as episodic pain, achiness, fatigue, and blurred vision.

What is the tear film?

The tear film is a 3 layered film composed of mucin, water, and oil. Compromise of any one layer leads to dry eye. The most common type is quantitative deficiency which affect the central watery layer. Most often this is a natural process which becomes more prevalent as we age. Qualitative deficiencies are seen with disruption of the bottom mucin layer, or more commonly with the top oily layer. The most common cause of qualitative deficiency is blepharitis; inflammation of the meibomean glands along the eyelid which produce the oily layer. Qualitative deficiency leads to premature evaporation of the tear film.

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Treatment

Quantitative Deficiency

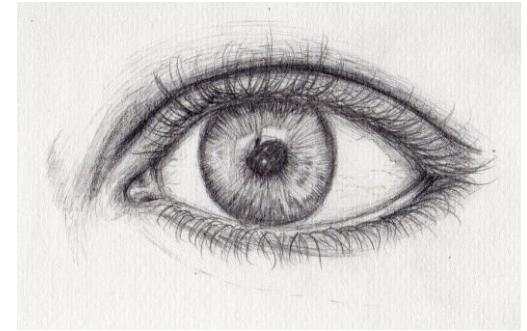
Treatment is geared toward producing more tears.

Artificial tear supplementation. Usually 2-4 times a day is sufficient. Artificial tear gel or ointment at bedtime.

Water intake. Hydration is essential. 8- 8 ounce glasses of water a day are recommended.

Restasis. Can help your basal tear production. These are not meant to totally replace artificial tears.

Underlying causes. Sjogren's syndrome is a rheumatological condition which occurs in 10% of Americans. A blood test can be done to diagnose it. Other rheumatological conditions such as Rheumatoid Arthritis, or Lupus can also cause quantitative deficiency.



Qualitative Deficiency

This is much more difficult to treat. Treatment is geared toward improved quality of the tears produced.

Eyelid hygiene. Warm compresses and lid scrubs with baby shampoo 1-2 times a day.

Oral Doxycycline. This can stimulate oil production thereby stabilizing the tear film.

Antibiotic ointment. Daily use can help with eyelid flora that can lead to oil gland dysfunction.

Underlying causes. Oil dysfunction is often caused by Rosacea known as Rosacea Blepharitis. Control of rosacea can lead to improved eye symptoms if present. Mucin deficiency due to systemic disease is not common. Conditions such as Cicatricial Pemphigoid or Stevens-Johnson Syndrome are some known causes.