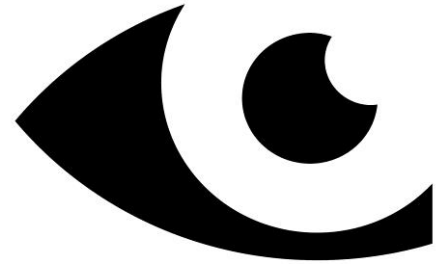


# Blepharitis

## Information for patients

This leaflet answers common questions about blepharitis. If you would like further information, or have any particular worries, please do not hesitate to ask your nurse or doctor.



### What is blepharitis?

Blepharitis is inflammation of the rims of the eyelids, which causes them to become red and swollen. It responds well to simple treatment and for most people it is not harmful.

There are three main types of blepharitis:

- **Anterior blepharitis** affects the front of the eyelids around the eyelashes.
- **Posterior blepharitis** affects the insides of the edge of the eyelids.
- **Mixed anterior and posterior blepharitis** is a combination of the two.

### What are the symptoms of blepharitis?

Symptoms may include:

- redness and soreness of the eyelids
- tiny flakes like dandruff at the bottom of the eyelashes
- a feeling that there is something in the eye
- dryness or burning in the eyes
- blurring of vision.

In most cases both eyes are affected, but one eye can be more affected than the other. The symptoms tend to be worse in the morning.

### What causes blepharitis?

**Anterior blepharitis** can be caused by either:

- a reaction to Staphylococcus bacteria – these usually live harmlessly on the skin of many people, but for unknown reasons they can cause the eyelids to become inflamed.
- seborrhoeic dermatitis – a skin condition that causes skin to become oily or flaky and sometimes irritate the eyelids, causing the meibomian glands to block. The meibomian glands are the tiny oil glands on the

base of your eyelashes which secrete oil that helps to keep the surface of your eye moist.

**Posterior blepharitis** is caused when the meibomian glands become blocked by debris, skin flakes or inflammation. Sometimes blockages in the meibomian glands are associated with certain skin conditions.

**Mixed blepharitis**, the most common form of blepharitis, is caused by a combination of both anterior and posterior blepharitis.

### What treatments are available for blepharitis?

Blepharitis cannot be cured, but a simple daily eyelid-cleaning routine can help control the symptoms. The eyelid-cleaning routine should be performed twice a day, even when you are not experiencing symptoms – this will help to prevent the blepharitis from recurring.

#### Eyelid cleaning routine:

- **Warm compress**, to melt the oily secretion (discharge) blocking the opening of the glands:
  1. Boil some water and let it cool until it is cool enough to touch comfortably.
  2. Soak cotton wool or a clean flannel in the warm water.
  3. Squeeze out the water and gently press onto your closed eyelids for five to ten minutes.
- **Massage**, to push the oil out of the eyelid glands.  
Gently massage your eyelids using your forefinger. Move in a downward motion for the upper eyelid and an upward motion for the lower eyelid.
- **Cleaning**, to wipe away any excess oil and remove any crusts, bacteria, dust or grime that may have built up.

You can use cool boiled water or a cleaning solution to clean the eyelids:

1. Use a cotton bud moistened with water or cleaning solution (see below for instructions on how to make the solution).
2. Gently rub the cotton bud along the edge of the lower lid – it helps to tilt the lid outward using a finger from your other hand.
3. The upper lid is more difficult to clean – it is best done with the eyelid closed and pulled slightly over the lower lid. This makes sure that you can't poke yourself in the eye.

4. Then more firmly scrub off any flakes on the base of your eyelashes. This is best done in front of a mirror.

To make a cleaning solution you should:

1. Boil some water and let it cool a little until it is cool enough to touch comfortably.
2. Add to the cooled boiled water one teaspoon of baby shampoo or half a teaspoon of bicarbonate of soda.
3. Mix thoroughly and store the covered solution in the fridge for up to one week.

## Other treatments

### Medication

In some cases, the doctor may prescribe antibiotic drops, ointment, artificial tear drops and, occasionally oral antibiotics or steroid eye drops.

If you have an underlying medical condition that is causing blepharitis, your GP will prescribe treatment for it or refer you to an appropriate specialist to ensure the condition is treated effectively.

Depending on the suspected cause of your condition and any other symptoms you have, you may also need additional treatment.

### Diet

There is some evidence to suggest a diet high in omega-3 fats can help improve blepharitis. The best sources of omega-3s are oily fish such as mackerel, salmon, sardines, herring and fresh or frozen tuna – not canned, as the canning process sometimes removes the beneficial oils.

Aim to eat at least two portions of fish a week, one of which should be oily fish. You can also get omega-3s from various nuts and seeds, vegetable oils, soya and soya products, and green leafy vegetables.

## Do you have any further questions?

For further advice, please phone the ophthalmic nurse practitioner during clinic hours:

- **Barnet Hospital:** 020 8216 4962
  - Monday to Thursday, 9am-5pm, and Friday, 9am-1pm
- **Edgware Community Hospital:** 020 7794 0500 ext 27202
  - Monday to Thursday, 9am-5pm, and Friday, 9am-1pm
- **Royal Free Hospital:** 020 7794 0500 and ask for the emergency eye nurse on bleep 1931.
  - Monday to Friday (9am-5pm)
- **St Pancras Eye Centre:** 020 3758 2034
  - Monday, Tuesday and Thursday (8am-5pm)
  - Wednesday and Friday (8am-1pm)
- **Whittington Eye Clinic:** 020 7272 3070 ext 4150
  - Monday to Thursday (9am-5pm) and Friday (9am-1pm)

## Acknowledgement and for further information

This leaflet has been adapted from the information provided by NHS Choices. For further information, please visit the NHS Choices website:

[www.nhs.uk/conditions/blepharitis/Pages/Introduction.aspx](http://www.nhs.uk/conditions/blepharitis/Pages/Introduction.aspx)

For more information about the ophthalmology service at the Royal Free London, visit our website at: [www.royalfree.nhs.uk/ophthalmology](http://www.royalfree.nhs.uk/ophthalmology)

If you have any feedback on this leaflet, please email:  
rf.comunications@nhs.net

**This leaflet is also available in large print. If you need this leaflet in another format – for example Braille, a language other than English or audio – please ask a member of staff.**

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