Correlation Between Dry Eye and Pterygium

Essay

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List of Abbreviation

ADDEAqueous Deficient Dry Eye

AIDSAcquired Immune Deficiency Syndrome

CALT.....Conjunctiva-associated lymphoid tissue

CNS.....Central nervous system

CSConjunctival sac

DED.....**D**ry eye disease

DEWS.....**D**ry Eye Work Shop

EDE.....Evaporative dry eye

EGF.....Epidermal growth factor

FGF-2.....Fibroblast growth factor-2

FKFilamentary keratitis

HIVHuman immunodeficiency virus

HPV**H**uman Papilloma Virus

IgImmunoglobulins

IL..... Interleukin

KCSKeratoconjunctivitis sicca

LASIK.....Laser-assisted in situ keratomileusis

LFULacrimal functional unit

MAP kinase...Mitogen Activated Protein Kinases

MGD.....Meibomian gland dysfunction

MMMüller's muscle

MMP-I**M**atrix metalloproteinase-I

mRNA......Messenger ribonucleotide A

MUCMembrane-associated mucin

NFkβNuclear Factor Kappa Beta

P-53.....**P**rotein 53

PAS.....Periodic-Acid Schiff

PD.....Parkinson's disease

PDGF**.**Platelet derived growth factor

TBUT**T**ear-Film Breakup Time

TGF-β.....Transforming Growth Factor Beta

TGF-\beta...... Transforming growth factor beta

TNF- α Tissue necrosis factor alpha

TSP-1	Thrombospondin-1
UVA	Ultraviolet radiation-Alpha
UVB	U ltraviolet radiation-Beta
UVR	Ultraviolet radiation
VEGF	Vascular Endothelial Growth Factor
>	M ore than
<	Less than
%	P ercent

Introduction

Pterygium is a common external ocular disease. The prevalence of pterygium increases with age and is higher in people living in sunny clients. Although environmental factors including exposure to sunlight and in particular broad band ultraviolet radiation is thought to be most important, local tear film abnormalities are also included among the theories of etiopathogeneis of pterygium. Evidence of clinical correlation of dry eye conditions with pterygium has been accumulating during the years (*Ishioka et al.*, 2001 and Rajiv et al., 1991).

Although the aetiology of pterygium is still not fully understood, prolonged exposure to ultraviolet B radiation is thought to promote its development (*Mackenzie et al.*, 1992 and Saw et al., 2000), Other factors such as inherited susceptibility (*Islam and Wagoner*, 2001), chronic inflammation (*Hill and Maske*, 1989), heat (*Young*, 1994) and still others may also play a role in the formation of pterygium.

Kadayifcilar et al., and Ishioka et al., noted inadequate tear film stability in pterygia patients and suggested that abnormal tear function may be yet another risk factor related to pterygium

Introduction

development. However, several other studies have shown that tear function is normal in pterygia (*Biedner et al., 1979; Taylor, 1980 & Ergin and Bozdogan, 2001*).

Thus, there is an unresolved issue concerning whether the abnormal tear function is directly associated with pterygium, or does change of the tear function cause pterygium.

Aim of the Work

The aim of this study is to find out the relation between the dry eye and pterygium.

Conjunctiva

The conjunctiva is the thin mucous membrane lining the eyelid. It is reflected at the upper and lower fornices on to the anterior surface of the eyeball. It fuses with the cornea along the conjunctival limbus forming a circular 'opening' for the cornea. The conjunctival limbus is situated about 1 mm anterior to the edge of the corneal limbus (where the transparent cornea stops and the opaque sclera starts). It is a highly vascular membrane. It is related to the cornea via the epithelium which is continuous (if slightly different in nature) between the conjunctiva and the cornea. Thus, infections, inflammatory conditions and trauma can all potentially extend from one structure to the other (*Snell and Lemp*, 1998).