COMPARATIVE STUDY BETWEEN THREE MODALITIES OF TREATMENT OF DRY EYE SYNDROME

Thesis

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List of Abbreviations

® Registered mark.

μm²..... Square micrometer.

4HPF..... Four high power fields.

ANA..... Antinuclear antibody.

ANCA..... Antinuclear cytoplasmic antibody.

ANOVA..... One way analysis of variance.

ATD..... Aqueous tear deficiency dry eye.

BSLPD..... Boston sclera lens prosthetic device.

DES...... Dry eye syndrome.

DEWS..... Dry eye work shop .

E.I.P.I.Co..... Egyptian international pharmaceutical industries

company.

EGF..... Epithelial growth factor.

ELISA Enzyme linked immunosorbent assay .

FAs..... Fatty acids.

FDA Food and drug administration.

GCD..... Goblet cell density .

HBV..... Hepatitis B virus.

HCV..... Hepatitis C virus.

HIV..... Human immune deficiency virus.

HS..... Statistically highly significant.

IgA..... Immunoglobulin A.

IOP..... Intra ocular pressure.

KCS..... Keratoconjunctivitis sicca.

LASIK Laser in situ keratomelusis.

LIPCOF..... Lid parallel conjunctival folds.

LM..... Light microscope.

MGD..... Meibomian gland disease.

mOsm/L..... Milli osmol per litre .

NS..... Statistically non significant .

 $NSAIDS..... Non \ steroidal \ anti \ inflammatory \ drugs \ .$

NSTD...... Non-Sjögren's tear deficiency.

P Probability.

PAS..... Periodic acid Schiff.

 $PMMA.....Polymethylmethacrylate \ .$

PUFA..... Polyunsaturated fatty acids.

RF..... Rheumatoid factor.

rpm...... Revolution per minute.

SCL..... Soft contact lens.

SD..... Standard deviation.

SPSS Statistical programme for social science.

SS......Sjögren's syndrome.

SS..... Statistically significant.

SSTD..... Sjögren's syndrome tear deficiency.

TBUT..... Tear break up time test.

TCR..... Tear clearance rate .

TFI..... Tear function index.

TGFB..... Transforming growth factor beta .

List of Tables

Table No.	Title	Page
1	Tear film constituents	14
2	Grading scheme for dry eye severity	48
3	Management of dry eye based on disease severity	49
4	Tear substitutes	50
5	Vital staining of the ocular surface	65
6	Staining protocol	76
7	Comparison between the three groups regarding age	82
8	Comparison between the three groups regarding gender	83
9	Comparison between the three groups regarding pre treatment TBUT and Schirmer's values	83
10	Comparison of the effect of treatment on TBUT values	
	within each group.	84
11	Comparison of the effect of treatment on Schirmer's values within each group.	85
12	Comparison between the three groups regarding percent change of TBUT and Schirmer's	86
13	Comparison between pre and post treatment IOP in group 3	89
14	Comparison between the three groups regarding pre- treatment rose bengal staining	90
15	Comparison between the three groups regarding pre treatment lissamine green staining	90

16	Comparison between the three groups regarding the effect of treatment on rose bengal staining	91
17	Comparison between the three groups regarding the effect of treatment on lissamine green staining	91
18	Comparison between the three groups regarding the pre- treatment cohesion power	96
19	Comparison between the three groups regarding the effect of treatment on the cohesion power	96
20	Comparison between the three groups regarding the pre treatment cell size	98
21	Comparison between the three groups regarding the effect of treatment on cell size	98
22	Comparison between the three groups regarding the pre treatment N/C	100
23	Comparison between the three groups regarding the effect of treatment on N/C	100
24	Comparison between the three groups regarding the pre- treatment goblet cell distribution	101
25	Comparison between the three groups regarding the effect Of treatment on goblet cell distribution	101
26	Comparison between the three groups regarding the pre treatment degree of keratinization	103
27	Comparison between the three groups regarding the effect of treatment on the degree of keratinization	103
28	Comparison between the three groups regarding their complications	108

List of Figures

Fig. No.	Title	Page
1	Anatomy of the eyelid	5
2	Anatomy of the conjunctiva	6
3	Anatomy of the cornea	7
4	Anatomy of the lacrimal gland	8
5	Histology of lacrimal gland acini	10
6	Anatomy of the lacrimal drainage system	12
7	Mechanisms of dry eye.	17
8	Post-LASIK dry eye with flourescein stain	20
9	Capping of meibomian gland orifices with oil in posterior blepharitis	23
10	Severe bilateral proptosis with lid retraction	24
11	Nodular episcleritis	28
12	Mucous plaques and filaments stained with rose bengal stain	29
13	Symblepharon	29
14	Posterior blepharitis	29
15	Herbert's pits.	29
16	Vital staining with rose bengal stain	31
17	Vital staining with lissamine green stain	31

18	Tear film- break up time	32
19	Schirmer-I test	34
20	Large conjunctival fold extending parallel to the lid margin	35
21	Ferning test (type 2)	38
22	Meibometry	39
23	Meibography: a- transillumination to view the gland, b-gland expression	40
24	Fluorotron	41
25	a,c: High grade squamous metaplasia and reduction in number of goblet cells . b,d: increase in number of goblet cells . periodic acid schiff stain	44
26	A: irregular mires caused by tear film debris, B: irregular corneal topography caused by ocular surface and tear film irregularities, C , D : the topographic map associated with normal ocular surface	46
27	Rose Bengal vital stain	66
28	Lissamins green vital stain	67
29	Tear break up time test	68
30	Schirmer's test.	69
31	The white cellulose acetate filter paper . the surface shows the penciled lines along which the strips are cut	70
32	Application of the filter paper to the conjunctiva	71
33	Filter paper strips arranged in the sample carrier	73
34	The sample carrier is immersed in the Gill's haematoxylin	73

35	The sample carrier is immersed in the modified eosin stain	74
36	The sample carrier is immersed in xyelene with filter paper strips stained brilliant blue	74
37	Mounted slides left for Canada balsam to dry	75
38	Impression cytology showing sheets of coherent cells	77
39	Impression cytology showing separate cells	78
40	Impression cytology showing high N /C	78
41	Impression cytology showing abundant goblet cells	79
42	Impression cytology showing absent goblet cells	80
43	Comparison of the effect of treatment on TBUT	87
44	Comparison of the effect of treatment on Schirmer's test	88
45	Comparison between pre and post treatment IOP in group 3	89
46	Pre treatment rose bengal staining	92
47	Post treatment rose bengal staining	92
48	Pre treatment lissamine green staining	93
49	Post treatment lissamine green staining	93
50	Normal epithelium	94
51	Epithelium with high magnification showing reduction of goblet cell number , N/C is $^{1}\!\!/_{4}$	95
52	Absent goblet cells, N/C is 1/6	95
53	Pre treatment cohesion power	97

54	Post treatment cohesion power
55	Pre treatment cell size
56	Post treatment cell size
57	Pre treatment goblet cell distribution
58	Post treatment goblet cell distribution
59	Pre treatment degree of keratinization
60	Post treatment degree of keratinization
61	Impression cytology of a case of our study showing reduction of goblet cell density
62	Impression cytology of the same case after treatment with cyclosporine A 0.05% showing increase of goblet cell density 105
63	Preparation of autologous serum drops
64	A case of cicatricial pemphigoid treated with topical autologous serum
65	A case of severe dry eye treated with topical autologous serum106
66	Impression cytology of a case of our study showing decrease of goblet cell density and loose separate cells
67	Impression cytology of the same case after treatment with topical dexamethasone 0.1% showing increase of goblet cell density and sheets of coherent cells

68	Comparison between the three groups regarding burning	
	sensation	108
69	Comparison between the three groups regarding hyperemia	109

Contents

		Page
-	List of abbreviations.	I
-	List of tables	IV
-	List of figures	VI
-	INTRODUCTION	1
-	AIM OF THE WORK	3
-	REVIEW OF LITERATURE :	
	Anatomy	4
	Physiology	11
	Pathogenesis	15
	Classification	17
	Diagnosis	25
	Treatment	47
-	SUBJECTS AND METHODS	63
-	RESULTS	81
-	DISCUSSION	110
-	CONCLUSION	120
_	SUMMARY	122

-	REFERENCES	124

- ARABIC SUMMARY

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Introduction

Dry eye syndrome (DES) is a common disorder of the tear film which is characterized by a deficiency in the quantity and /or quality of tears, an unstable tear film, ocular surface damage and bothersome symptoms such as ocular irritation, dryness, fatigue and fluctuating visual disturbances (*Novic et al*, 2007).

The current understanding of the pathogenesis of DES has proceeded from the mere recognition of a lack of , or altered quality of tears to recognition of inflammation as the key pathogenic mechanism (*Elmer and Reinstorm*, 2004).

Dry eye disease, a chronic inflammatory condition that may be mediated by activated T- cell lymphocytes, affects the ocular surface and lacrimal glands. The damage caused by dry eye disease may be irreversible, and despite the availability of various tear substitutes, many patients with dry eye syndrome can experience corneal pathology with a subsequent reduction in vision (*Schechter*, 2006).

Many years ago, the traditional approach to treating dry eye has been to lubricate the ocular surface by either replacing or conserving the patient's tears using artificial tears drops (*Hong et al*, 2007).

Since then, significant advances have been made in treating many facets of dry eye including: