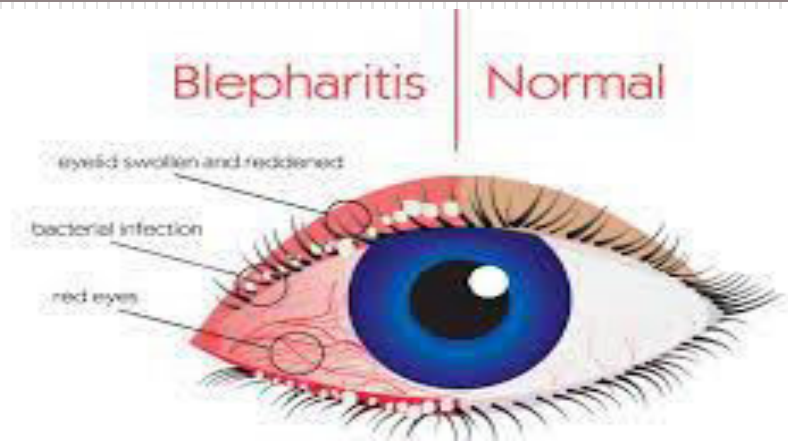


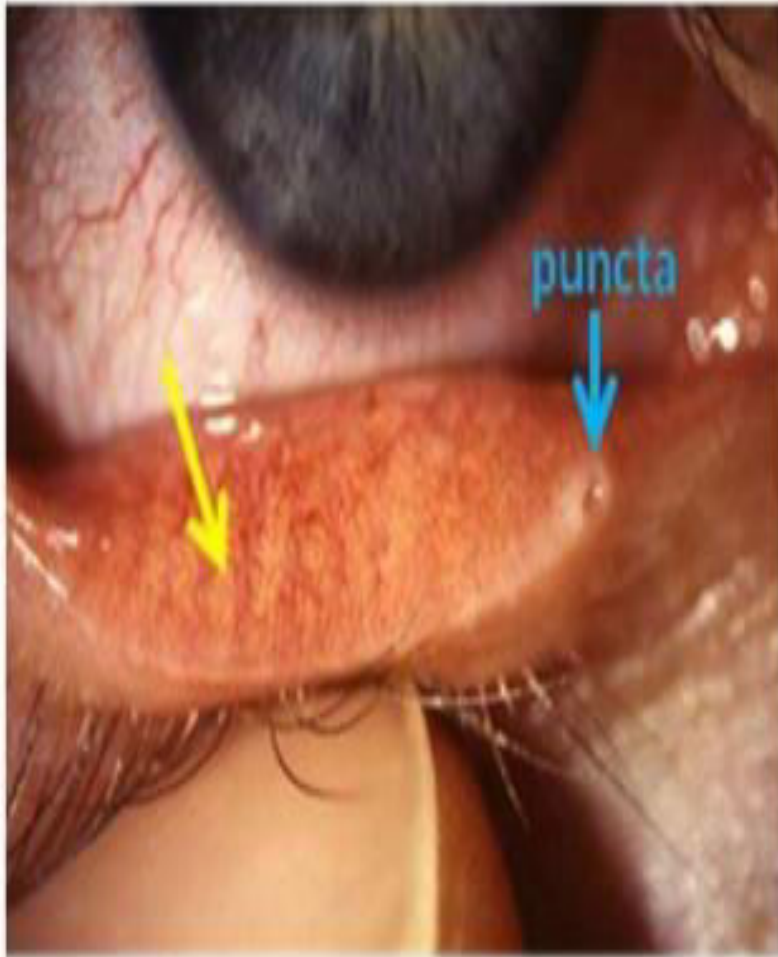
# BLEPHRITIS CHALAZION ABORMALITIES OF EYELASHES



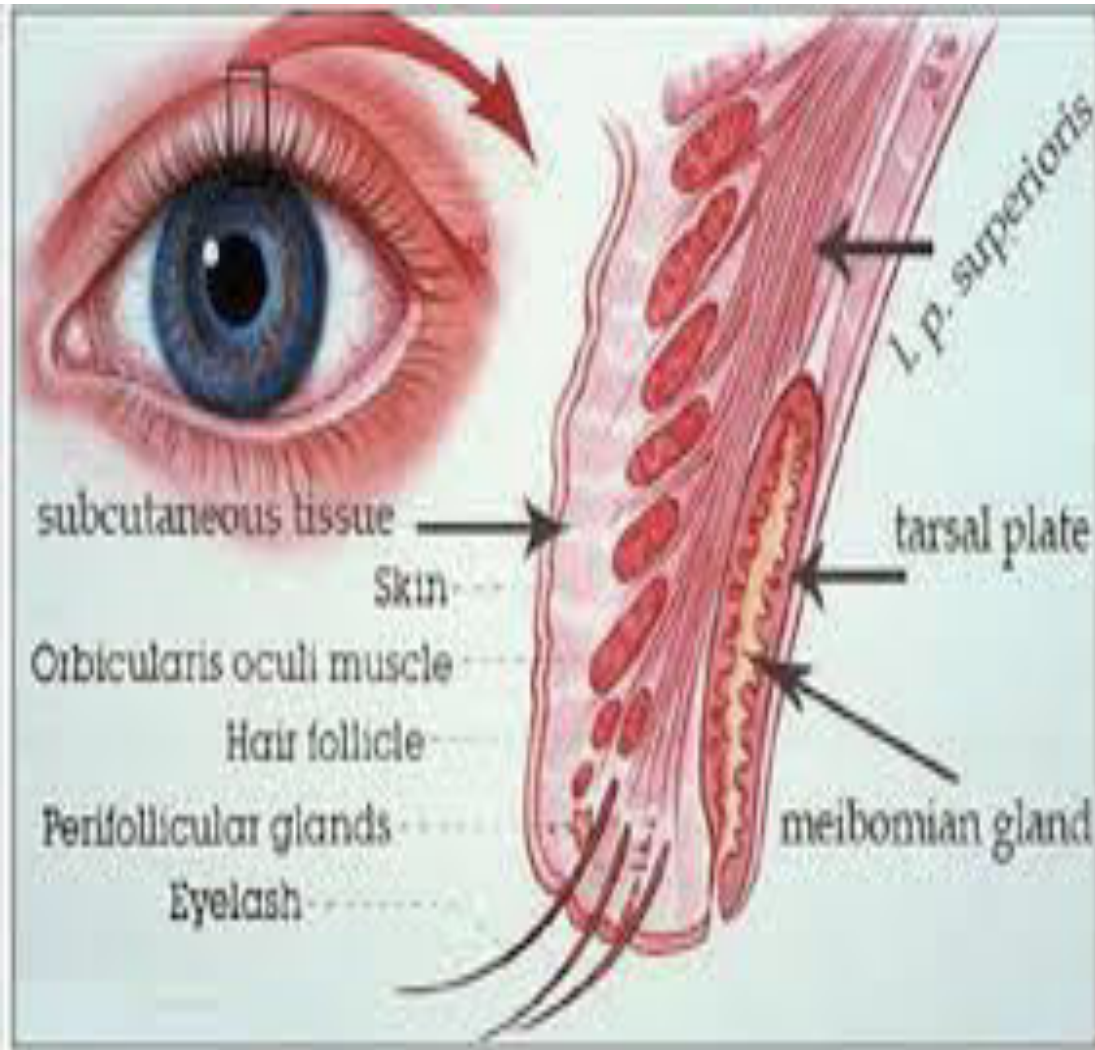
Prof Sofia Iqbal  
FRCS, MRCOphth  
Fellowship Orbit/Oculoplastics  
Fellowship Refractive surgery

# Presentation lay out

- Lid anatomy
- Definition, etiology, types, clinical features, complications and treatment of blepharitis
- Infection of eye lid margins
- Chalazion
- Eye lash abnormalities

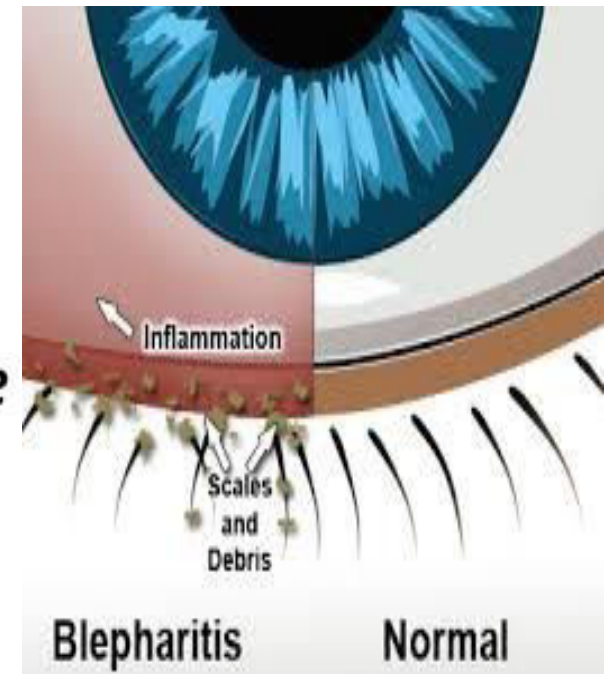


# BLEPHRITIS



# INTRODUCTION

- **Blepharitis** is inflammation or infection of the eyelid margins .
- **Blepharitis** is one the most common ophthalmological complications as well as one of the most difficult conditions to treat.



**Blepharitis** is a common eyelid inflammation that sometimes is associated with a bacterial eye infection, symptoms of [dry eyes](#) or certain types of skin conditions such as [acne rosacea](#).



# BLEPHARITIS

Anterior Blepharitis

Posterior Blepharitis

## Anterior Blepharitis



**Bacterial**  
(Staphylococcal)

**Seborrheic**

## Posterior Blepharitis



**Meibomian Gland Dysfunction**

Eye Lid Irritation

Chronic Red Eye

Dry Eye

# Classification

- ***Anterior***

*Staphylococcal*

*Seborrhoeic*

*Mixed*

***Posterior***

*Meibomian seborrhoea*

*Meibominitis*

***Mixed***



# ANTERIOR BLEPHARITIS

*Anterior blepharitis is characterized by inflammation at the base of the eyelashes .*

*Two variants of anterior blepharitis are identified: staphylococcal and seborrheic.*

❖ *In staphylococcal anterior blepharitis, colonization of the eyelids by staphylococci leads to formation of fibrinous scales and crust around the eyelashes.*

❖ *The seborrheic variant is characterized by dandruff-like skin changes around the base of the eyelids, resulting in greasy scales around the eyelashes.*





# *Staphylococcal blepharitis*



Chronic irritation worse in morning.  
Scales around base of lashes .  
(collarettes)



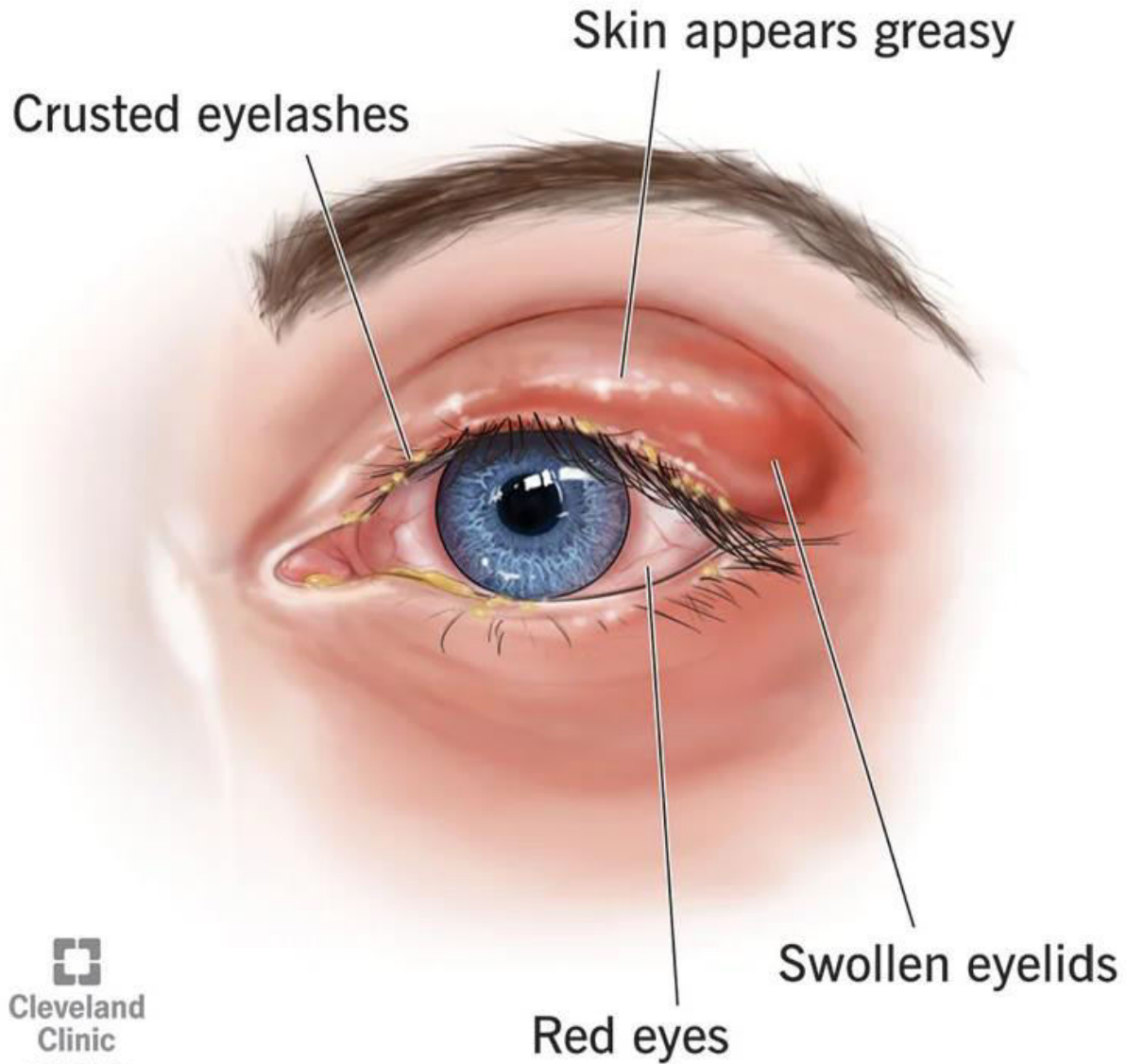
Hyperaemia and telangiectasia of  
anterior lid margin  
Scarring and hypertrophy if .  
longstanding



***Cont. Signs of Staphylococcal  
blepharitis***



# Blepharitis



# *PATHOPHYSIOLOGY*

*The pathophysiology of blepharitis is not completely understood. A role for lid-colonizing staphylococcal bacteria was first noted in 1946 . Several mechanisms by which staphylococci may alter meibomian gland secretion and cause blepharitis are supported by many studies .*

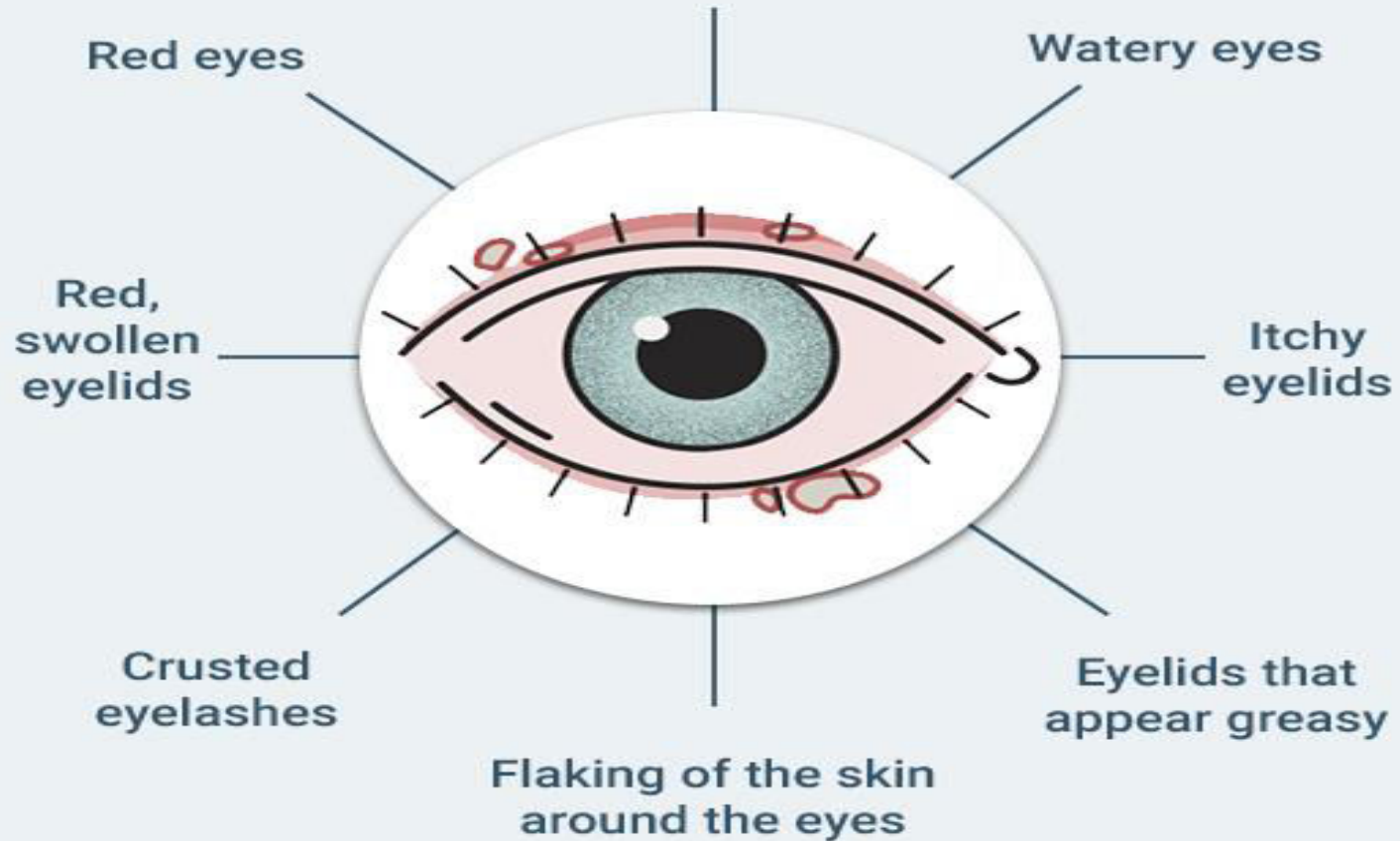
- *Direct infection of the lids*
- *Evoke reaction to staphylococcal exotoxin*
- *Provoke allergic response to staphylococcal antigens .*
- 

*It is likely that a combination of these is responsible for the clinical manifestations of staphylococcal blepharitis.*

# SYMPTOMS FOR BLEPHARITIS

---

A gritty, burning or stinging sensation in the eyes



Itching or  
Scratchy



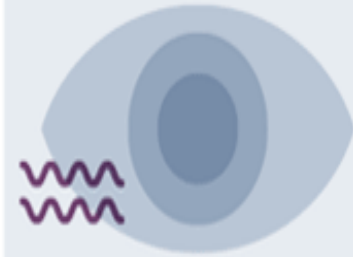
Redness/  
Inflammation



Tearing



Dry Eyes



Foreign Body  
Sensation



Mattering



Crusting

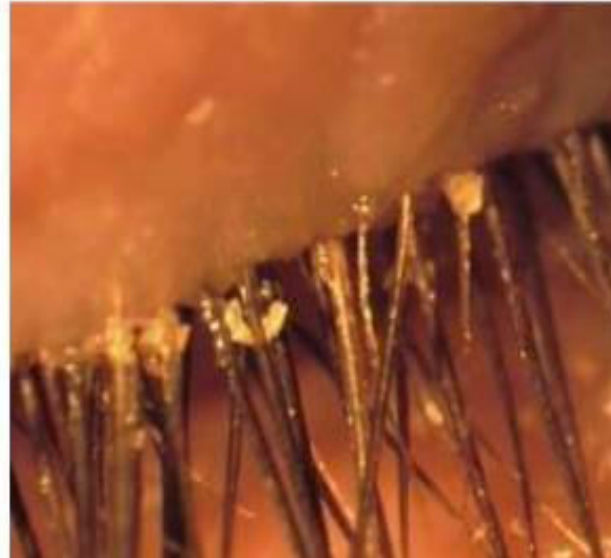
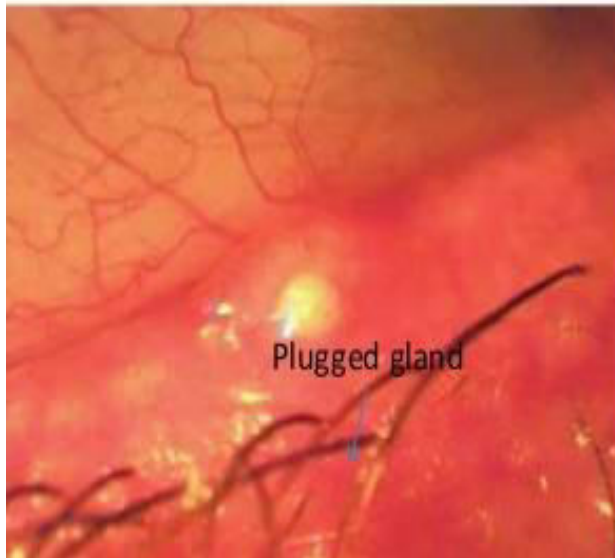


Eye Rubbing



# SLIT LAMP FEATURES

*The lashes should be examined for abnormalities such as blepharitis. With blepharitis there will be collarettes found at the base of the lashes.*



# ASSOCIATIONS

***secondary changes include :***

- ❖ ***stye formation***
- ❖ ***marginal keratitis and occasionally phlyctenulosis (Corneal nodule that developed near the limbus and then spread onto the cornea, carrying behind them a leash of vessels)***
- ❖ ***associated with tear film instability and dry eye***





# Complications

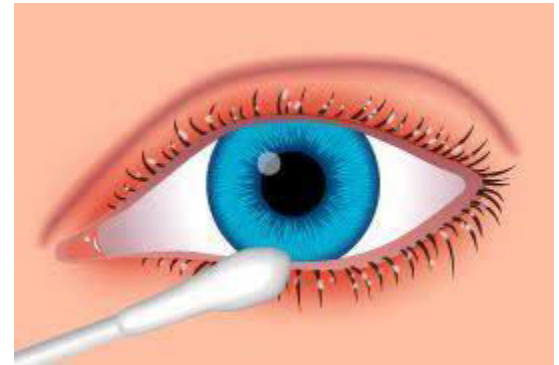
- **Trichiasis**
- **Poliosis**
- **Madarosis**
- **Tylosis**
- **Epiphora**
- **tear film instability \_ dry eyes**
- **Marginal keratitis**
- **Recurrent styes**
- **Conjunctivitis**
- **Chalazion**

# COMPLICATIONS



# Treatment

- Lid hygiene
- Tear film substitutes
- Antibiotic ointment
- Weak topical steroids



# Lid hygiene

- Wash hands, clean fingertips with Sterilid prior to use, rinse.
- Pump Sterilid foam onto clean fingertips.
- Close eyes and gently massage foam onto lids and lashes.
- Avoid touching eyes directly.
- Leave in place for 60 seconds for maximum effectiveness



# Posterior blephritis

- Meibomian seborrhoea
- Meibomianitis
- Obstruction of orifices



# Posterior blepharitis

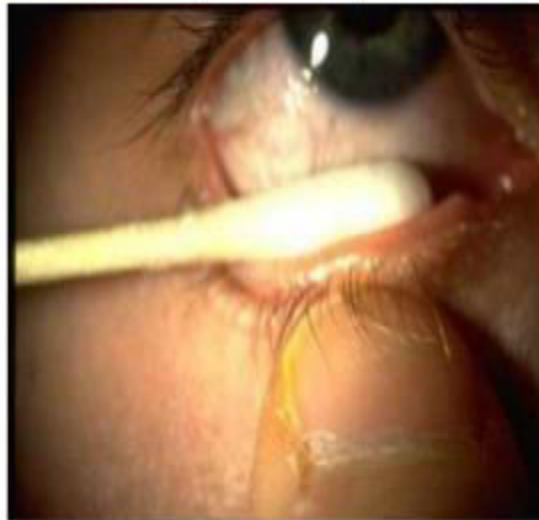
## 1. Meibomian gland dysfunction



- Oil globules over meibomian gland orifices



- Oily and foamy tear film



# Complications of Posterior Blephritis

- Chalazion formation
- Tear film instability
- papillary conjunctivitis
- inferior corneal epithelial erosions
- marginal keratitis



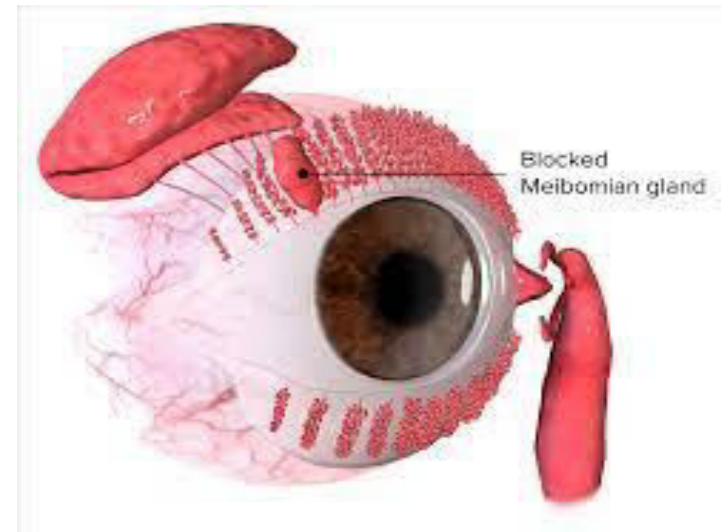


# Treatment

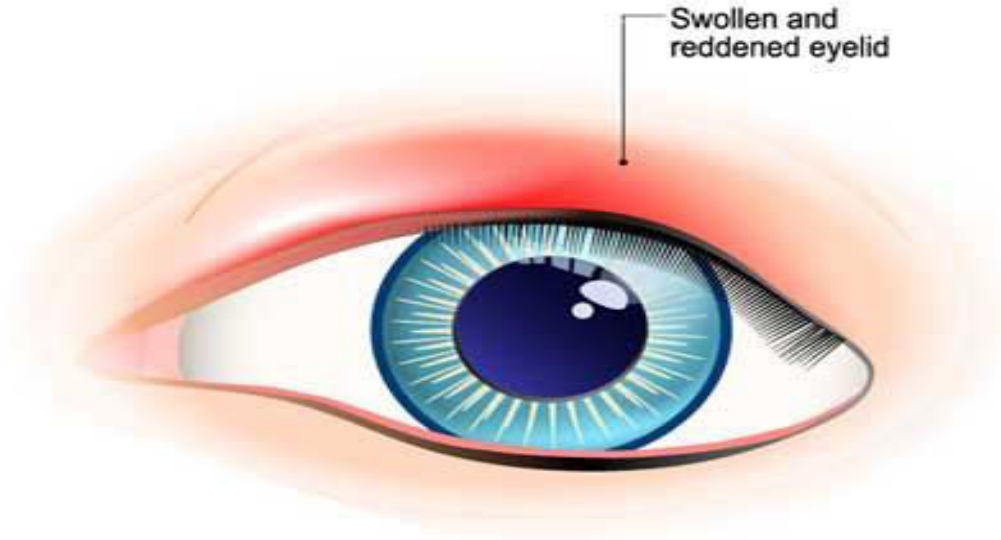
- **Systemic tetracyclines**
- **Azithromycin or erythromycin**
- **Lid hygiene**
- **Warm compresses**
- **Tear substitutes**
- **Weak steroids**

# CHALAZION

- Chronic, sterile, lipogranulomatous inflammatory lesion caused by blockage of meibomian gland orifices and stagnation of sebaceous secretions
- Meibomian cyst
- Painless ,round nodule
- May press on cornea and can cause astigmatism and blurred vision

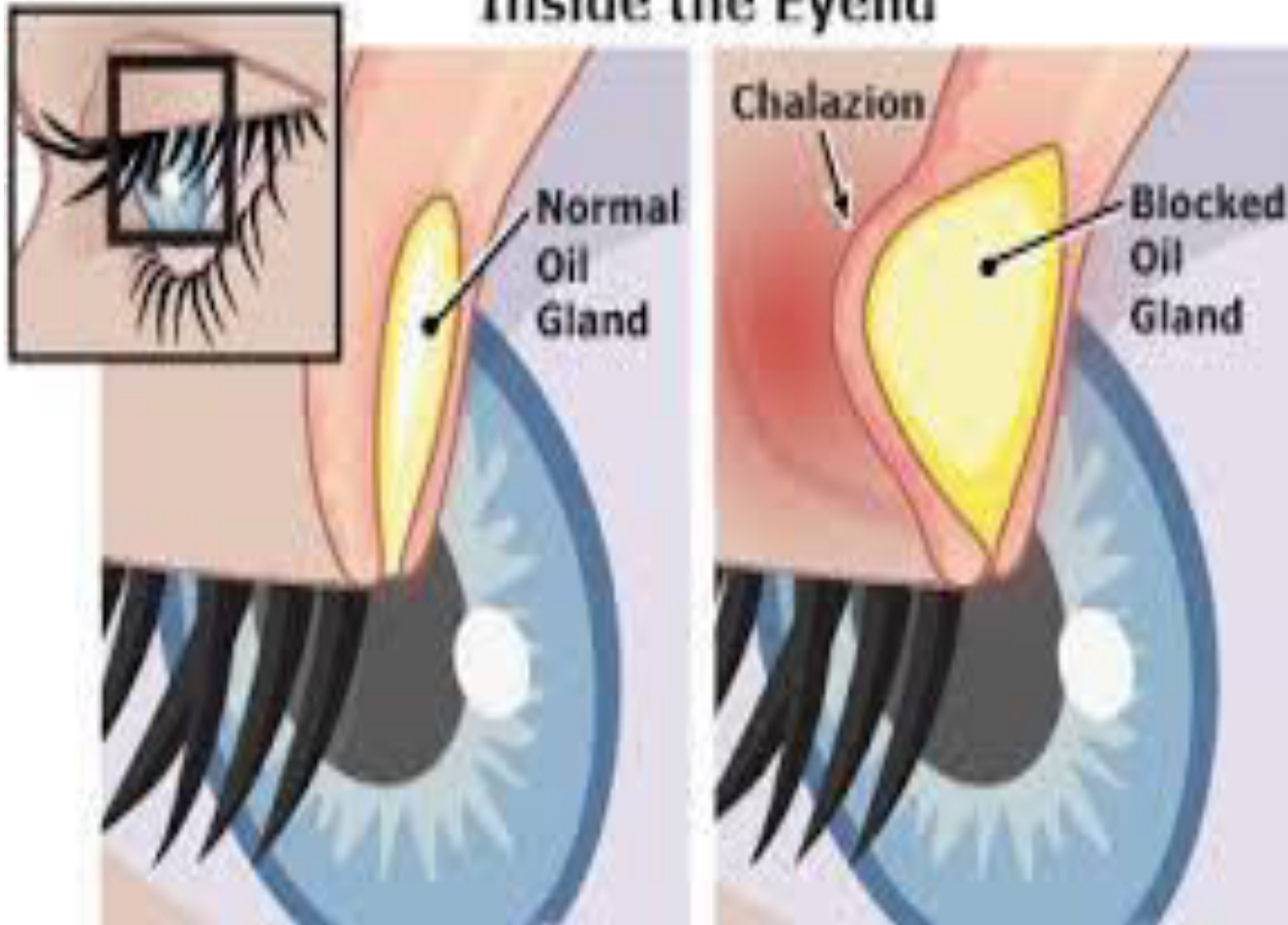


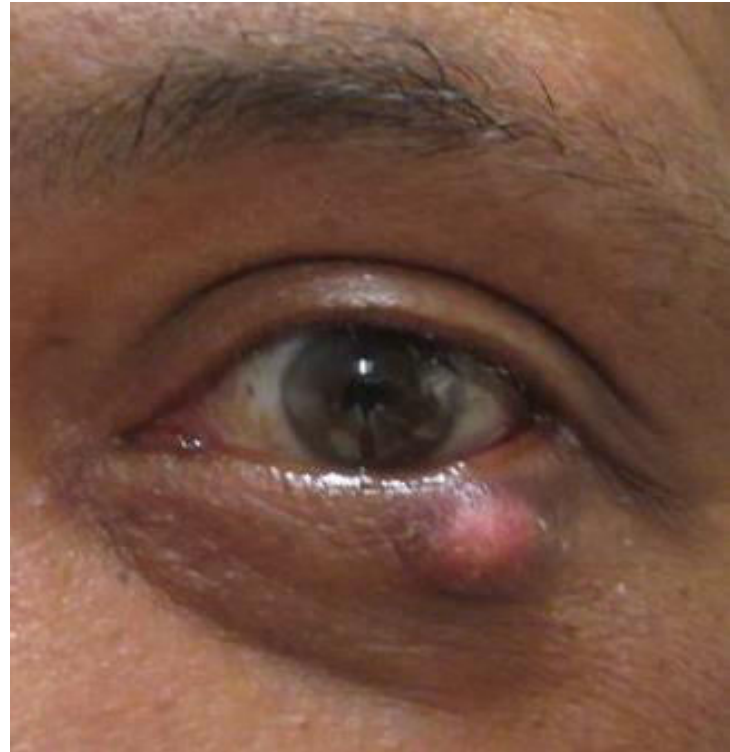
# Risk Factors for Chalazion



- **Chronic Blepharitis**
- **Acne Rosacea**
- **Seborrhea**

## Inside the Eyelid





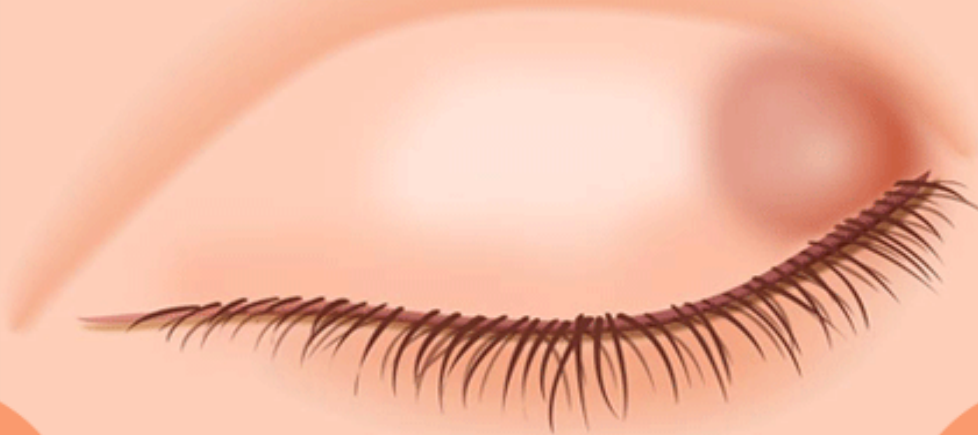
# COMPLICATIONS

## Conjunctival granuloma



# Treatment

## 4 Ways to Get Rid of a Chalazion



Warm  
compress



Medication



Surgery



Corticosteroid  
injection



ALL ABOUT VISION

# Surgery





# Incision and Curettage



# INFECTIONS OF LID MARGINS

## **Internal hordeolum**

an acute staphylococcal infection of meibomian glands



## ○ **External hordeolum**

- an acute staphylococcal infection of lash follicle and its gland of zeiss or moll



# EXTERNAL HORDEOLUM (STYE)

---

- Painful sty.

- External hordeolum=Infection of Zeis gland=stye
- Compared with seborrheic blepharitis patients, patients with S. blepharitis are younger and more frequently female. During acute S. blephararitis, perifolliculitis can lead to ulceration and fibrinous exudates on the lid margin.

Typical changes of chronic blepharitis include crusting and hard brittle scales on the base of the lashes.



# Etiology

- Bacterial infection by staphylococcus
- Excessive use of cosmetic
- Poor nutrition
- Sleep deprivation
- Lack of hygiene
- Lack of water
- Rubbing of the eyes.

# SIGNS AND SYMPTOMS

- Localized swelling of the eyelid
- Localized pain
- Redness
- Tenderness
- Crusting of the eyelid margins
- Burning in the eye
- Droopiness of the eyelid
- A lump on the top eyelid
- Itching



**Internal Hordeolum** : It is an acute Supportive inflammation ( formation of pus )of mei-bomian glands.

**Etiology:** Occurs due to secondary infection (**occurs during or after treatment for another infection.**) of chalazion.

**Symptoms** : More violent than sty because the gland is larger & embedded deeply in the dense fibrous tissue.

**Sign** : Yellow spot (pus) seen shining through the conjunctiva on averting ( remaining) the lid;

### **TREATMENT**

**Warm compresses and massages of the lesions for 10 minutes 4 times per day**

**Tropical anti biotic ointment**

**Amoxicillin**

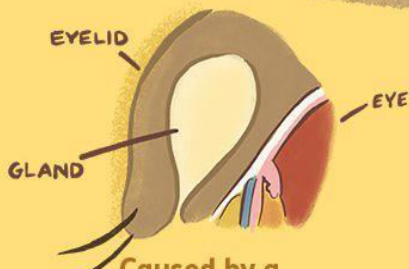
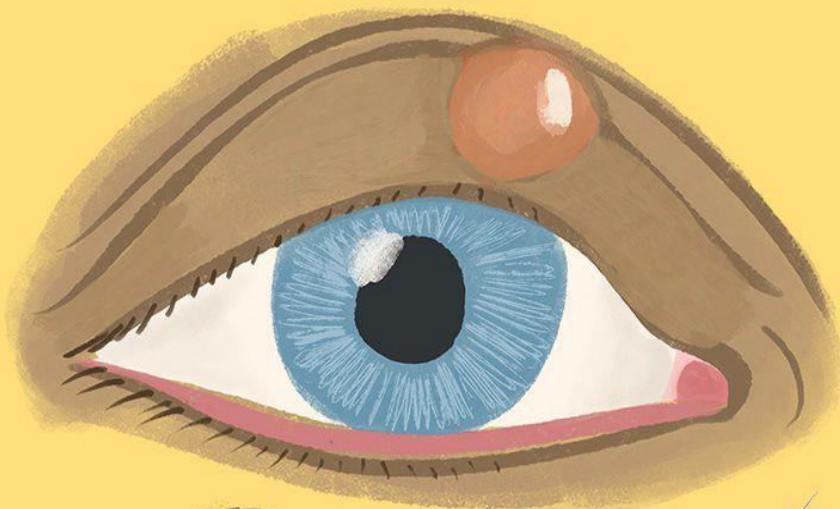
**Doxycycline**

**Erythromycin**



# Chalazion vs. Stye

Chalazion:



EYELID

EYE

GLAND

Caused by a blocked oil gland

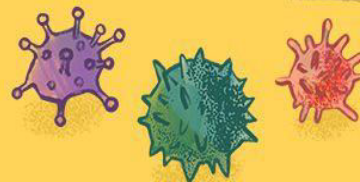
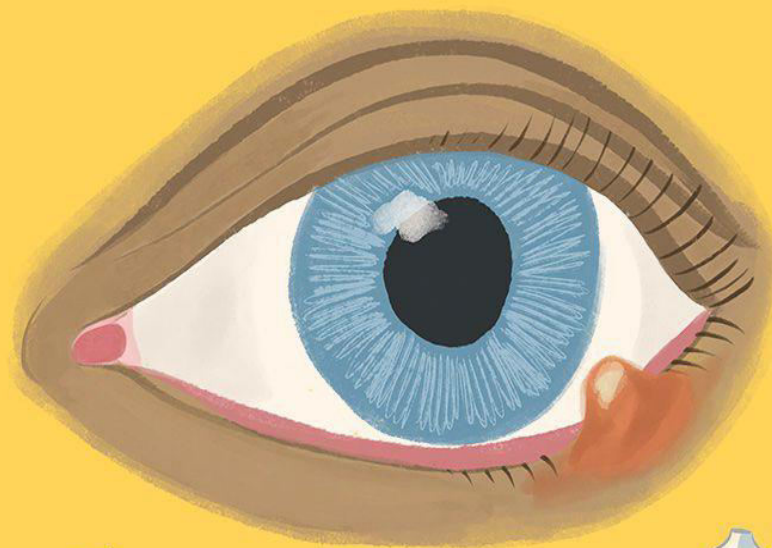


Resolved by warm compresses, surgery, or steroid shots



Defined by swelling, blurry vision, and a hard bump

Stye:



Triggered by an infection



Treated with antibiotics and OTC solutions



Marked by pain, tearing, and sensitivity to light

# **DISORDERS OF LASHES**

**1. Trichiasis**

**2. Metaplastic lashes**

**3. Distichiasis**

**4. Phthiriasis palpebrarum**

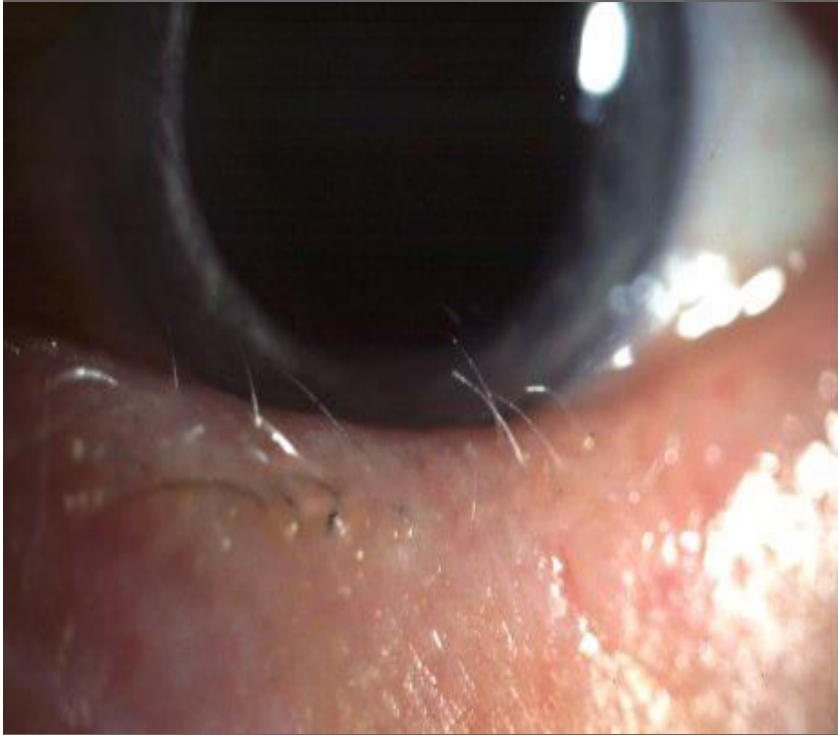
**5. Madarosis**

**6. Poliosis**



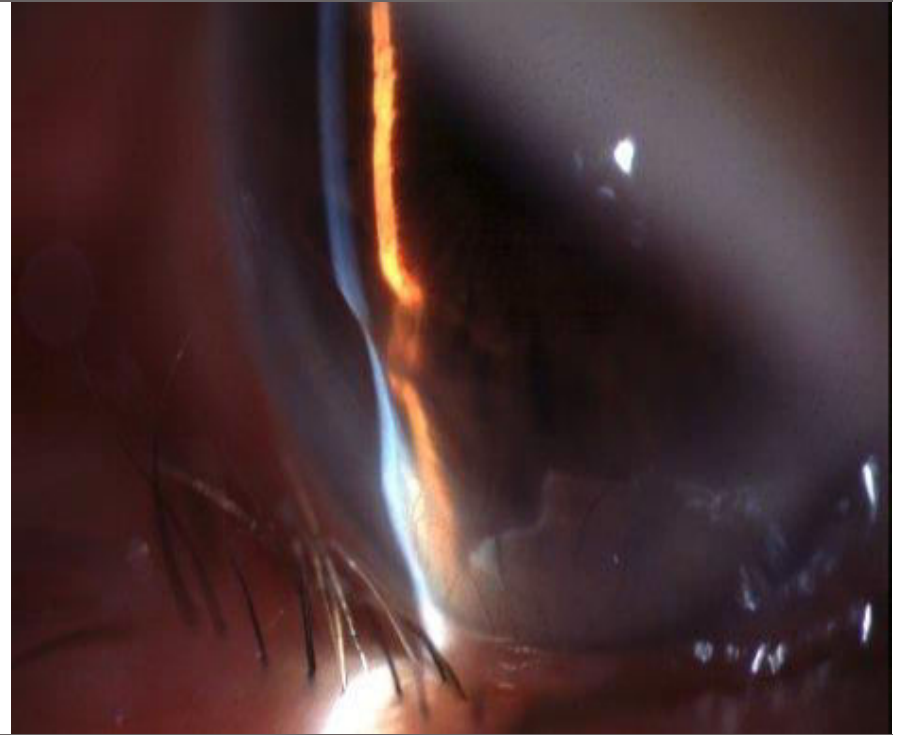
# Trichiasis

## Signs



- **Posterior misdirection of normal lashes**
- **Most frequently affects lower lid**

## Complications



- **Corneal ulceration and pannus**

# Common Causes of Trichiasis

**Etiology:** common causes:

- 1. trachoma
- 2. spastic entropion

**Other causes:**

- 1. Blepharitis
- 2. ocular pemphigoid
- 3. scars resulting from injuries
- 4. chemical burns
- 5. destructive inflammations such as stevens johnson syndrome
- 6. congenital distichiasis



**Symptoms:** FB sensation with irritation in the eye, pain ,conjuntival congestion,reflex blepharo spasm, and lacrimation.

**Complications :** Recurrent erosions, superfecial corneal opacities, recurrent corneal ulcers, corneal vascularization. Sometime it may threaten the Vision.

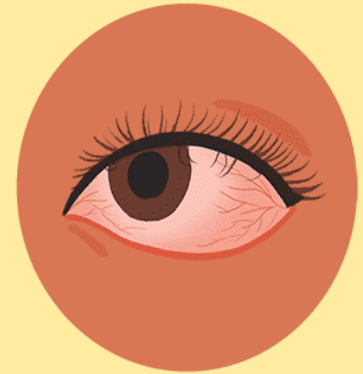
# Symptoms of Trichiasis



Foreign body sensation



Eye pain



Eye redness



Blurry vision



Watery eyes

# Treatment Options for Trichiasis

**Epilation** - but recurrences within few weeks

**Electrolysis** - but frequently repeated treatments required

**Cryotherapy** - for many lashes

**Laser ablation** - for few scattered lashes

**Surgery** - for localized crop resistant to other methods

# Metaplastic lashes

## Signs



**Aberrant lashes arising from meibomian gland orifices**

## Causes



**Cicatrizing conjunctivitis (ocular pemphigoid, Stevens-Johnson, chemical burns)**

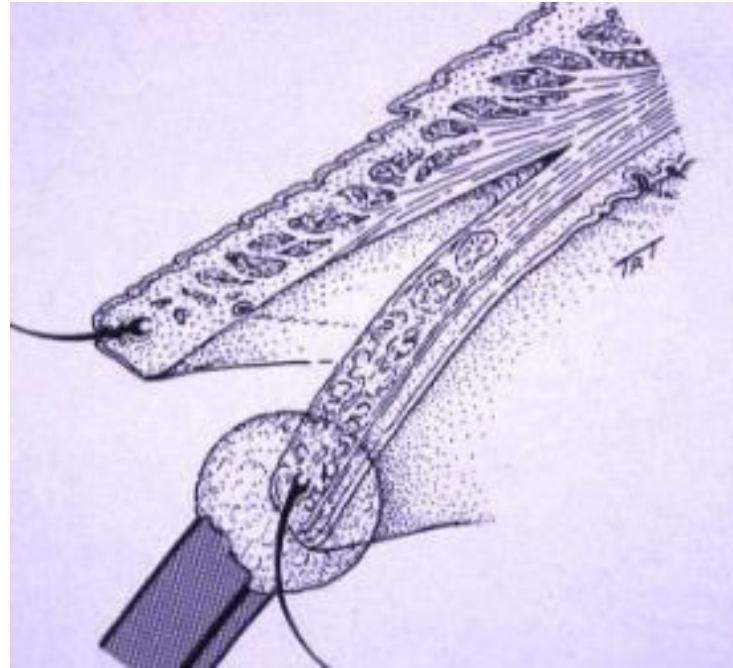
# Distichiasis

## Signs



- **Second row of lashes arising from meibomian gland orifices**
- **Congenital**
- **Occasionally dominantly inherited**

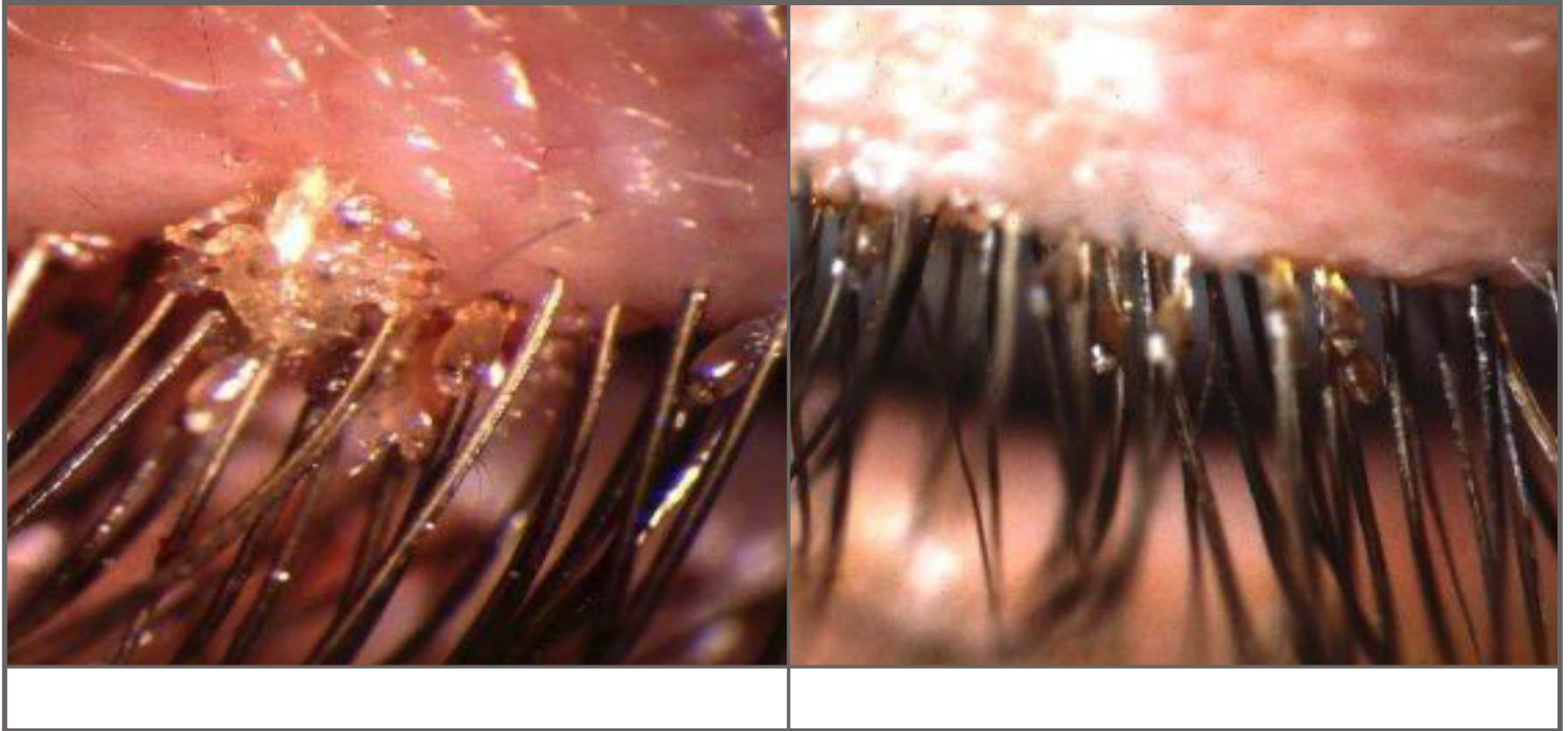
## Treatment



- **Division into anterior and posterior lamellae**
- **Cryotherapy to posterior lamella**
- **Reapposition of lamellae**

# Phthiriasis palpebrarum

- Infestation of lashes by pubic crab louse and its ova (nits)
- Typically affects children in poor hygienic conditions



Lice gripping base of lashes

Nits and empty shells adhere to base of lashes

**Treatment** - removal, destruction and delousing

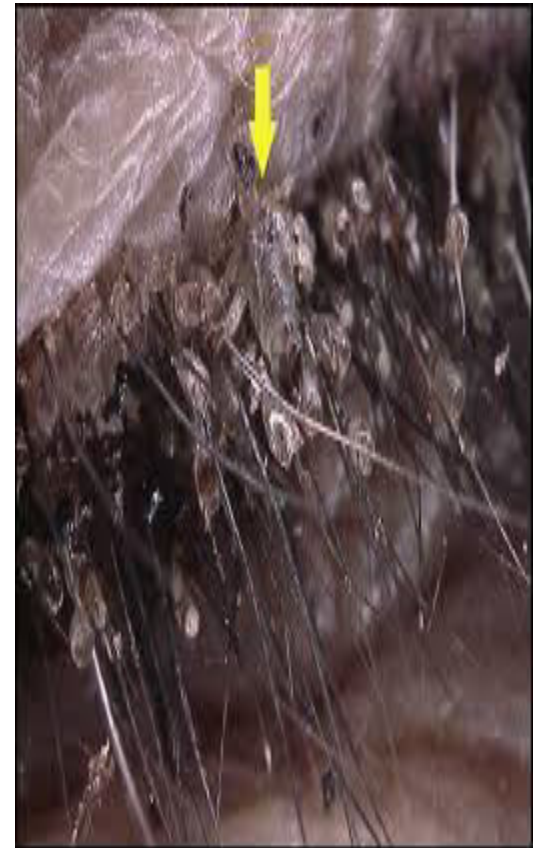
## Phthiriasis palpebrarum



Infestation of lashes by  
pubic crab louse and its  
ova (nits)

Typically affects  
children in poor  
hygienic conditions

Lice gripping  
base of lashes





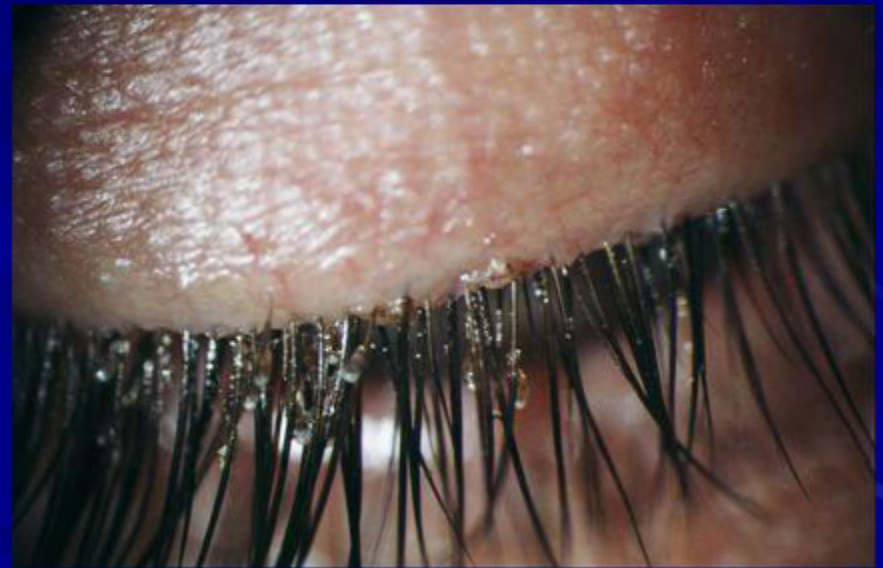
# Lice, Crabs (pediculosis, phthiriasis)

## Treatment

- Mechanical removal
- Bland ophthalmic ointment

## Pearls

- Anti-lice lotion to other involved body parts
- Sexual partners
- R/o other STDs



# Poliosis

Premature localized whitening of hair



## Ocular associations

- Chronic anterior blepharitis
- Sympathetic ophthalmitis

## Systemic associations

- Vogt-Koyanagi-Harada syndrome
- Waardenburg syndrome

# Madarosis

Decrease in number or complete loss of lashes



## Local causes

- Chronic anterior lid margin disease
- Infiltrating tumours
- Burns, radiotherapy or cryotherapy

## Systemic causes

- Generalized alopecia
- Myxoedema
- SLE
- Syphilis
- Leprosy

## Following removal

ANY  
QUESTIONS

