

Cavanaugh Eye Center Dry Eye Protocol

Dry Eye in the LASIK or Premium IOL Patient

Dry eye can lead to poor outcome and high rate of enhancements. It is important to aggressively treat dry eye before surgery and for at least 90 days after LASIK

Treatment Principles for Dry Eye or Dysfunctional Tear Syndrome (DTS)

- Principle #1 Control coexistent conditions: blepharitis, meibomitis, eyelid abnormalities, medications altering tear secretion
- Principle #2 Supplement the tear film
- Principle #3 Conserve the tear film
- Principle #4 Control inflammation and heal the ocular surface
- Principle #5 Provide hormonal support

Dry Eye Workup

- ALL patients should have:
 - Review of meds & eliminate all systemic meds that can be drying if possible. The main culprits include antihistamines and antidepressants
 - Clinical exam including questions in history about dry eye
 - **Do Schirmers with anesthetic on ALL refractive patients** Hold anesthetic soaked Q-tip in area where strip is to be placed. Dry all tears from cul-de-sac prior to placing strip. Measure over 5 minutes.

Dry Eye Treatment Regimen

- **Based on Schirmer's score, complaints and exam findings / staining**
 - **>15** → use frequent tears post-op for 90 days
 - **10-15** → Preservative free or dissipating preservative tear product (ie **Refresh Liquigel, Optive**) every 2 hrs, **Gentel Gel q HS & Omega - 3 Fish Oil 1000 mg BID. Restasis BID** if indicated
 - **5-10** → all of the above plus **inferior silicone plugs and Restasis BID.**
 - **< 5** → all of the above plus add superior 90 day extended collagen plug to upper. May consider PRK rather than LASIK or no surgery at all.