You have been informed by your doctor or specialist that you have Blepharitis. Answers to some of the most commonly asked questions are given below.

**What is Blepharitis?**
Blepharitis is a persistent inflammation of the edges of the eyelids. It usually affects both eyes and it can occur at any age. Although Blepharitis maybe uncomfortable, it is not a sight threatening condition.

**What are the symptoms?**
Blepharitis may cause one or more of the following:
- Itchiness around the eyes.
- Persistent irritation or ‘burning’ sensation.
- Redness and swelling of the eyelid edges.
- Tiny flakes on the eyelashes.
- Crusting of the eyelids, especially in the morning.
- Eyelid cysts / styes.
- Sensation of ‘grit’ in the eye.
- Redness of the eye.

**What are the causes?**
Blepharitis may be due to a combination of one or more of the following:
- A disorder of the Meibomian (oil) Glands at the edge of the eyelid.
- Skin disorders such as dandruff of the scalp.
- A build up of crusts around the eyelashes, which the body’s own bacteria reacts to.

**How long will it last?**
Blepharitis is a persistent condition, but the symptoms can come and go. There is no one off cure, but it is possible to control Blepharitis with a simple treatment regime.
Is it serious?
No, although Blepharitis can be uncomfortable for the sufferer, it rarely causes problems to the eye itself.

Is it an infection?
No, but there may be over activity of normal skin organisms. These germs (bacteria and occasional fungi) flourish in debris/secretions that build up on the edge of the eyelids. This is why regular cleaning of the eyelids is important.

What is the treatment?
The treatment of Blepharitis involves the regular cleaning of the eyelids and lashes to remove the irritating substances.

It may take up to six weeks for the symptoms of Blepharitis to improve once the eyelid cleaning regime has begun, so perseverance is essential.

Eyelid cleaning should be performed at least twice a day, morning and evening, until the symptoms have settled. When the symptoms have gone, performing eyelid cleaning once a day, every day, may prevent further flare-ups.

Regular eyelid cleaning
Begin with warm flannel compresses. Gently press on the closed eyelids with a clean flannel soaked in warm water for five to 10 minutes, re-warming the flannel repeatedly. This softens the skin and any crusts attached to the eyelids.

Following the warm flannel compresses, clean the eyelid edges with a clean cotton ball (rather than a cotton bud as in the photo) moistened with a bicarbonate of soda solution or a baby shampoo solution. Alternatively, ready-made eyelid cleaning wipes may be used, which can be obtained from any chemist. Use a side to side motion to remove the debris from the eyelid edges and eyelashes.

Bicarbonate of Soda solution
Boil some water, and then let it cool to room temperature.

Pour 100 mls (1/4 pint) of the water into a clean container.
Dissolve one level teaspoon of bicarbonate of soda (not baking powder) in the water. Use as directed.

Discard this solution immediately after use.

**Baby shampoo solution**
Boil some water in a kettle.

Pour 100 mls (1/4 pint) of water into a clean container.

Allow the water to stand until it is warm, and then mix two or three drops of baby shampoo into the water. Use as directed.

Discard solution immediately after use.

If you have any problems or questions about your treatment, please ask one of the Eye Clinic Nurses.

**Sources of information**
- NHS Direct Telephone: 0845 4647 - www.nhsdirect.nhs.uk
- Your GP

**This leaflet is based on information from**
- Pharmacy Department.

**Important information**
The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

**Your comments**
We are always interested to hear your views about our leaflets. If you have any comments please contact our Patient Advice and Liaison Service (PALS) – details below.

**Hand hygiene**
The trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

**Other formats**
This information is available in alternative formats such as large print or electronically on request. Interpreters can also be booked. Please
contact the Patient Advice and Liaison Service (PALS) offices, found in the main reception areas:

**Conquest Hospital**
Email: palsh@esht.nhs.uk - Telephone: 01424 758090

**Eastbourne District General Hospital**
Email: palse@esht.nhs.uk - Telephone: 01323 435886

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

**Reference**
The Ophthalmology department have been consulted and agreed this patient information.

Review date: February 2018
Responsible Clinician: Dr H Htwe and Sister H Coombs

© East Sussex Healthcare NHS Trust – www.esht.nhs.uk