

Blepharitis: (sometimes infectious) condition of the eyelid margins & the local gland

Can include:

- Lid margin
- Meibomian glands (internal side of eyelid)
- Glands of Zeis = sebaceous (oil secreting) gland
- Glands of Moll = sweat gland

Stye (aka hordeolum)

Signs: infection of one or more glands of the eyelid

Sx: pain (worsens w/ increased lid swelling), redness, inflammation)

Causes: mostly Staph aureus

Treatment

1. Warm compresses tid-qid x 10-15 mins (improvement after 2 days)
2. If necessary incision & drainage (w/o squeezing) followed by topical antibiotic ointment applied to conjunctival sac (lower lid margin) tid-qid
3. Systemic abx may be necessary when cellulitis develops

Infectious blepharitis

Signs: bilateral inflammation of lid margins (anterior side)

Sx:

- Staph: burning, itching, ulcerated, erythematous, lid margins, dry scales clinging to lashes
- Seborrheic: no ulceration, greasy scales, less inflammation at lid margin

Staphylococcal

Causes: Staph aureus, Staph epidermis, Coagulase-neg Staph
→ infection from normal flora
→ contact transmission/ skin hygiene

Seborrheic

Causes: Pityrosporum ovale
→ naturally-occurring skin fungus
→ associated w/ seborrheic dermatitis of scalp, brow & ears

NOTE: both types can occur simultaneously and can run chronically for months to years if not properly treated

Treatment: eyelid margin hygiene

1. Warm compress to closed eyelids for 5-10 mins tid-qid to soften secretions in blocked glands
2. Gently scrub lid margin with cotton swab/cloth cleansing with warm water (+/- a drop of baby shampoo) [LidCare]
3. Topical anti-infectives are available (ointment form are needed)

Chalazion: blockage of Meibomian gland

Signs: focal, chronic inflammation of eyelid; sterile (NOT infection)

Sx: begins with mild inflammation & tenderness (NOT painful or red) → persists and/or worsens over weeks to months → may lead to conjunctival redness/swelling if pointing inward

Treatment:

1. Warm compresses tid-qid x 10-15 mins
2. If necessary (pick one):
 - a. Incision & curettment (w/o squeezing)
 - b. Intralesional corticosteroid injection

NON-infections

NO ACUTE INFLAMMATION