

## Management of dry eye syndrome

**Thurrock CCG, and Basildon and Brentwood CCG do not support the prescribing of ocular lubricants for the management of mild to moderate dry eye syndrome. Prescribing is ONLY supported for the management of severe symptoms where the use of ocular lubricants is essential to preserve sight function for:**

- **Severe ocular surface disease (OSD) caused by the following conditions: Sjögren's syndrome, autoimmune disease (e.g. Rheumatoid arthritis, ulcerative keratitis), neurotrophic cornea**
- **Previous corneal conditions, recurrent corneal erosions, corneal injury**

### General management:

- Dry eye syndrome, or dry eye disease, is a common condition that occurs when the eyes do not make enough tears, or the tears evaporate too quickly.
- Most cases of sore tired eyes resolve themselves. Patients should be encouraged to manage both dry eyes and sore eyes by implementing some self-care measures such as good eyelid hygiene and avoidance of environmental factors alongside treatment.
- Mild to moderate cases of dry eye syndrome or sore tired eyes can usually be treated using ocular lubricants that can easily be purchased over the counter.
- Medications with anticholinergic side effects, which can exacerbate dry eye syndrome should be reviewed and stopped where appropriate, such as topical and systemic antihistamines.
- If there is an underlying condition (suspected or known) that can cause dry eyes, consider referral for specialist assessment.

### Self-care advice:

- Advise patients that by taking suitable precautions the symptoms of dry eyes can be lessened, and in mild cases, this may be sufficient to avoid the need for treatment. These include:
  - Eyelid hygiene to control the blepharitis that most people with dry eye syndrome have.
  - Limiting the use of contact lenses, if these cause irritation.
  - Using a humidifier to moisten ambient air and avoiding prolonged periods in air-conditioning.
  - If smoking tobacco, stopping smoking may help.
  - If using a computer for long periods, ensure that the monitor is at or below eye level, avoid staring at the screen, and take frequent breaks to close/blink eyes.

Prescribing of ocular lubricants for the management of simple dry eye syndrome is not supported. Patients are expected to follow self-care advice and where necessary purchase ocular lubricants over the counter to manage their dry eye symptoms. This includes for tired eyes, hayfever symptoms, contact lens wearers, old age related dry eyes. This position is supported by NHS England guidance on conditions for which over the counter items should not routinely be prescribed in primary care.

### Recommendations:

- **Do not initiate** ocular lubricants following a recommendation from an optometrist/ophthalmologist for mild to moderate dry eye syndrome or simple dry eyes. Advise patients to purchase the recommended product over the counter.
- Only prescribe ocular lubricants for one of the listed exceptions detailed above and prescribe one of the recommended formulary ocular lubricants (detailed in table below).
- **Review and discontinue** the prescribing of ocular lubricants for existing patients for the management of mild to moderate dry eye syndrome or simple dry eyes. Advise patients to purchase the recommended product over the counter.
- Continue the prescribing of ocular lubricants for the management of severe symptoms if the patient has a diagnosis as detailed in the exceptions above. Follow the recommended formulary ocular lubricant products.

Providers commissioned to provide services on behalf of Thurrock CCG and Basildon and Brentwood CCG are reminded that they are required to follow the local joint formulary and prescribing guidance, or relevant Medicines Management agreement.

**Formulary ocular lubricants**  
**Prescribe by brand name and as the cost effective formulary product**

	Brand	Active ingredient(s)	Cost (Drug Tariff April 2020)	Expiry once opened	Additional comments /information
<b>Preserved preparations Available OTC</b>	<i>Generic or Lumecare Tear Drops</i> 10ml <i>1<sup>st</sup> line</i>	Hypromellose 0.3% eye drops	£0.90 £0.79	28 days	Lumecare Tear Drops- wait 30 minutes after use before inserting contact lenses.
	<i>Sno Tears 1.4%</i> 10ml <i>1<sup>st</sup> line</i>	Polyvinyl alcohol 1.4% eye drops	£1.06	28 days	Not suitable for soft contact lens wearers
	<i>Clinitas Carbomer Gel</i> 10g tube <i>1<sup>st</sup> line</i>	Carbomer '980' 0.2% gel	£1.49	28 days	Suitable for soft contact lens wearers
	<i>Blink Intensive Tears</i> 10ml <i>2<sup>nd</sup> line</i>	Sodium hyaluronate 0.2% eye drops	£2.97	45 days	Suitable for soft contact lens wearers
<b>Preservative free (PF) preparations Available OTC</b>	<i>Evolve Hypromellose 0.3%</i> 10ml <i>1<sup>st</sup> line</i>	Hypromellose 0.3% eye drops PF	£1.98	3 months	No information regarding soft contact lens wearers
	<i>VIZcellose 0.5%</i> 10ml <i>2<sup>nd</sup> line</i>	Carmellose 0.5% eye drops PF	£2.88	3 months	Suitable for soft contact lens wearers
	<i>VIZcellose 1%</i> 10ml <i>2<sup>nd</sup> line</i>	Carmellose 1% eye drops PF	£1.80	3 months	Suitable for soft contact lens wearers
	<i>Aeon Repair</i> 10ml <i>2<sup>nd</sup> line</i>	Sodium hyaluronate 0.15% eye drops PF	£4.00	3 months	Suitable for soft contact lens wearers
<b>Ointment for night use Available OTC</b>	<i>Xailin Night</i> 5g PF tube	Paraffin based ointment PF	£2.56	2 months	Not suitable for soft contact lens wearers
	<i>HydraMed night</i> 5g PF tube	Paraffin and retinol based ointment PF	£2.32	3 months	Wait 30 minutes after use before inserting contact lenses.
<b>For specialist initiation only. Continue prescribing in primary care</b>	<i>Ikervis</i> 0.3ml unit dose	Ciclosporin 0.1% eye drops	£72.00	Single dose	Only for severe keratitis in adults with dry eye disease that has not improved despite use of tear substitutes (NICE TA369)
	<i>Ilube</i> 10ml	Acetylcysteine 5% eye drops	£33.46	28 days	Filamentary keratitis. Not suitable for soft contact lens wearers

10ml of eye drops normally contains approximately 200 drops (approximately 20 drops in 1ml)

There is insufficient robust evidence to suggest that any one ocular lubricant is superior to another. Trial a product for 4 to 6 weeks to determine effectiveness of the product before trialling an alternative.

Preservative free formulations (available as 10ml bottles and individual dose units) should be reserved for:

- Genuine allergy or intolerance to a preservative
- Evidence of epithelial toxicity from preservatives (demonstrated by persistent red eyes)
- Moderate to severe dry eye syndrome
- Chronic eye disease using multiple, topical eye medications, and frequency of administration > 6 times daily
- Soft contact lens wearers

<b>Position Statement No.</b>	56
<b>Title</b>	Management of dry eye syndrome
<b>References</b>	<p>NHS England Conditions for which over the counter items should not routinely be prescribed in primary care: Guidance for CCGs (2018): <a href="https://www.england.nhs.uk/wp-content/uploads/2018/03/otc-guidance-for-ccgs.pdf">https://www.england.nhs.uk/wp-content/uploads/2018/03/otc-guidance-for-ccgs.pdf</a></p> <p>All Wales Medicines Strategy Group, Dry Eye Syndrome Guidance: <a href="http://www.awmsg.org/docs/awmsg/medman/Dry%20Eye%20Syndrome%20Guidance.pdf">http://www.awmsg.org/docs/awmsg/medman/Dry%20Eye%20Syndrome%20Guidance.pdf</a></p> <p>MTRAC Commissioning Support Ocular Lubricants for the treatment of dry eye disease (2018): <a href="https://ccg.centreformedicineoptimisation.co.uk/files/MTRAC%20Dry%20eye%20products%20guidance%20June%202018.pdf">https://ccg.centreformedicineoptimisation.co.uk/files/MTRAC%20Dry%20eye%20products%20guidance%20June%202018.pdf</a></p> <p>MIMS: <a href="https://www.mims.co.uk/table-dry-eye-treatments/ophthalmology/article/1596602">https://www.mims.co.uk/table-dry-eye-treatments/ophthalmology/article/1596602</a></p> <p>April 2020 Drug Tariff</p>
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