# Building a Dry Eye Center of Excellence with Different Practice Modalities

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## Course description:

The course will review how to build a dry eye practice and what this would look like at different levels. The course will discuss the key tests needed for DED diagnosis and how to determine which tests are necessary. Different treatment modalities for DED will be discussed, ranging from topical intervention to in office procedures.

#### Learning objectives:

- 1. Understand how to effectively implement OSD/DED diagnostic testing in office
- 2. Understand what dry eye treatment options look like for beginner, intermediate, and advanced practices
- 3. Discuss the pros and cons of different amniotic tissue options available for dry eye patients
- 4. Review available topical therapeutics for dry eye treatment
- 5. Understand the difference between the OSDI and SPEED questionnaires

### 1. Dry eye defined (10 minutes)

- a. TFOS definition reminder
- b. Inflammation and obstruction
- c. Visions cycle

## 2. Key Tests for OSD/DED Diagnosis (10 minutes)

- a. Questionnaire
  - i. OSDI
  - ii. SPEED
- b. History
  - i. "How do your eyes feel first thing in the morning?"
  - ii. "When are your symptoms the worst?"
  - iii. "Do you ever have itchy, dry, or sticky feeling eyes?"
  - iv. "Do your eyes water or look red?"
  - v. "How often are you thinking about your eyes?"
- c. Point of Care Testing
  - i. Osmolarity testing
  - ii. Inflammation/mmp9 testing
- d. Slit Lamp
  - i. Thorough exam of Lids and Lashes
    - 1. Demodex Blepharitis
    - 2. Lid telangectasia
  - ii. Staining
    - 1. NaFl

- 2. Lissamine
- 3. Grades and patterns
- iii. MG Expression
  - 1. Diagnostic vs therapeutic
  - 2. Imaging
    - a. Meibography
    - b. Slit Lamp Photography
- 3. Attacking Elements of MGD (10 minutes)
  - a. Obstruction
    - i. Thermal Expression
      - 1. Automated
      - 2. Intelligent manual expression
    - ii. Surface maintenance/evaportaion
      - 1. PFATs with lipid
      - 2. Perfluorohexyloctane
    - iii. Inflammation
      - 1. Review of available therapeutics
        - a. Cyclosporine .05%
        - b. Cyclosporine .09%
        - c. Cyclosporine.1
        - d. Lifitigrast .5%
        - e. Varenicline
        - f. Loteprednol .25%
      - 2. Interventional treatment
        - a. IPL
        - b. LLLT
    - iv. Treatment of associated Inflammatory lid/skin conditions
      - 1. Rosacea
      - 2. Demodex blepharitis
        - a. Lotilaner .25%
    - v. Treatment for ILS
      - 1. Ointment
      - 2. Mask
      - 3. Lid Seals
- 4. Light based Therapy (10 minutes)

- a. IPL
  - i. Where, when and how
  - ii. Practice economics
- b. Low Level Light Therapy
  - i. Where, when and how
- c. Radio Frequency
  - i. Where when and how
- d. Biologics
  - i. Amniotic Tissue
    - 1. Dry
    - 2. Acelluar
    - 3. Cryopreserved
  - ii. Nerve growth factors
- 5. Putting it all together (10 minutes)
  - a. Where to start dry eye beginner
    - i. Treatment offerings
      - 1. Products in office
      - 2. Counseling on skincare, makeup etc
      - 3. Thermal expression?
    - ii. Equipment needs
      - 1. Slit lamp
      - 2. CTA, expressor
      - 3. Vital dyes
  - b. Intermediate dry eye practice
    - i. Treatment offerings
      - 1. Pharmaceuticals
        - 2. Thermal expression?
        - 3. Light therapies
          - a. IPL? LLLT?
    - ii. Equipment
      - 1. Meibography
      - 2. Anterior seg imaging
  - c. Advanced dry eye practice
    - i. Treatment offerings
      - 1. More pharmaceutical options

- a. Neurotrophic keratitis
  - i. Oxervate
- 2. Amniotic membranes
- 3. RF, micro needling, microcurrent
- d. When to buy equipment
  - i. Diagnosis vs management
- e. Patient flow
  - i. Differences in approach