

POLICY FOR DRY EYES PRESCRIBING

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Intended audience	Primary & Secondary Care Prescribers	
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Stakeholders consulted prior to ratification	GP's, Secondary Care	
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Previous reviews	N/A	
Changes made during latest review	N/A	

1. INTRODUCTION

1.1 Purpose

Manx care supports the prescribing of dry eye lubrication ONLY where the use of dry eye lubrication is essential to preserve sight function for:

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

Refer to page 5 for the dry eye formulary.

Prescribing of dry eye lubrication for simple dry eye syndrome is not supported. Patients are expected to follow self-care advice and where necessary purchase dry eye lubricants to manage their dry eye symptoms. This includes for tired eyes, hayfever symptoms, contact lens wearers, old age related dry eyes

1.2 Scope

Primary & Secondary Care Prescribers

2. Policy

2.1 General Management advice for all patients

- Dry eye syndrome or dry eye disease is a common condition characterised by inflammation of the ocular surface that occurs when the eyes don't make enough tears, or the tears evaporate too quickly.
- Symptoms of dry eye syndrome include dryness, irritation or discomfort, and intermittent blurring of vision. Symptoms typically worsen with prolonged visual tasks, exposure to wind and air conditioning.
- The aims of treatment are to restore the ocular surface and improve ocular comfort.
- 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.

2.2 Self-care advice

Advise patients that by taking suitable precautions, the symptoms of dry eye syndrome can be lessened and, in mild cases, this may be sufficient to avoid the need for treatment.

These precautions include:

- Maintain good eyelid hygiene
- Limit contact lens use to shorter periods, especially if these cause irritation
- Cigarette smoke impacts on dry eye syndrome, stop smoking.
- Use a humidifier to moisten ambient air
- Avoid prolonged periods in air-conditioned environment
- If using a computer for long periods, place the monitor at or below eye level, avoid staring at the screen for prolonged periods, take frequent breaks.

See the attached link for further advice: <https://lookafteryoureyes.org/eye-conditions/dry-eye/>

If clinically appropriate, medications that exacerbate dry eye syndrome should be reviewed and where appropriate changed or stopped e.g. topical and systemic antihistamines, tricyclic antidepressants, selective serotonin reuptake inhibitors, diuretics, beta-blockers, isotretinoin, and possibly anxiolytics, anti-psychotics and alcohol.

2.3 Recommendations

2.3.1 New patients follow treatment pathway on page 4.

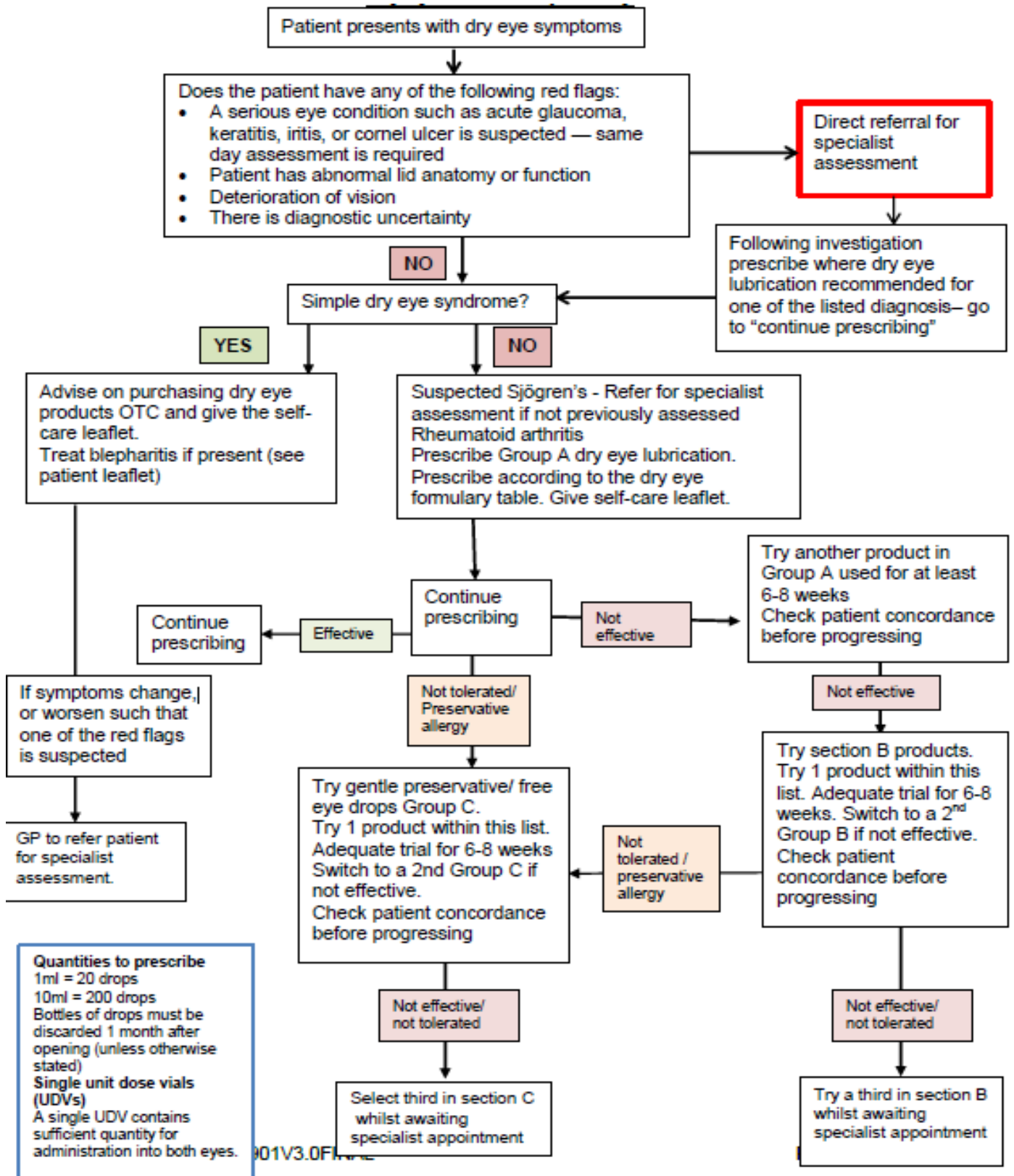
- 2.3.2 If a recommendation to prescribe comes from optometrist/ophthalmologist:
- For simple dry eyes – advise patient to purchase recommended product.
 - Prescribe where patient has a diagnosis as stated in the ‘Introduction ‘section above and if the recommended product is on the formulary.
- 2.3.3 Review existing patients prescribed dry eye preparations.
- Advise all patients with simple dry eye syndrome to purchase dry eye preparations.
 - Continue prescribing if they have a diagnosis as stated above.

3 REFERENCES AND/OR RESOURCES

- NHS England
<https://www.england.nhs.uk/wp-content/uploads/2018/03/otc-guidance-for-ccgs.pdf>
- Prescqiipp Bulletin 202 Eye Preparations March 2018 (NHS email required for subscription)
<https://www.prescqiipp.info/our-resources/bulletins/bulletin-202-eye-preparations/>
- NICE Clinical knowledge summaries – Dry Eye Syndrome August 2017
<https://cks.nice.org.uk/dry-eye-syndrome>
- All Wales Medicines Strategy Group Dry eyes
<http://www.awmsg.org/docs/awmsg/medman/Dry%20Eye%20Syndrome%20Guidance.pdf>
- Drug Tariff November 2022
<https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/drug-tariff>
- Serum Eye Drops for the Treatment of Severe Ocular Surface Disease Clinical Guidelines September 2017, The Royal College of Ophthalmologists
<https://www.rcophth.ac.uk/wp-content/uploads/2017/11/Serum-Eye-Drops-Guideline-2017.pdf>
- Understanding dry eye, The Royal College of Ophthalmologists & Royal National Institute of Blind People March 2013
<https://www.rcophth.ac.uk/wp-content/uploads/2015/02/RCOphth-RBUIB-Understanding-dry-eye-2013.pdf>

4 APPENDICES

Appendix 1: Dry Eye Treatment Pathway



Appendix 2: Dry Eye Formulary

Grouping	Brand	Drug Tariff (Sept 2021)	Number of Drops/Applications in 1 bottle/tube	Cost/month for 2 drops daily	Cost/month for 4 drops daily	Cost/month for 10 drops daily	Approximate Retail Price in Pharmacy	In use expiry	Additional advice/ comments	
For night-time application with Group A, B or C drops	Paraffin based ointments	Hilo Night preservative free)	£2.75 (5g)	300	£0.55	£1.10	£2.75	£4.95	6 months	Can be administered with other drops in the daytime
		Xailin Ointment	£2.51 (5g)	300	£1.25	£1.25	£2.51	£4.68	2 months	
Group A 1st line	Generic	Hypromellose 0.3% eye drops	£1.05 (10ml)	200	£1.05	£1.05	£2.10	£1.89	1 month	
	Clinitas	Carbomer 0.2% eye gel	£1.49 (10g)	300	£1.49	£1.49	£1.49	£2.68	1 month	Can be administered for night time use with other drops in the daytime
	Sno Tears	Polyvinyl alcohol 1.4% eye drops	£1.06 (10ml)	200	£1.06	£1.06	£2.12	£1.91	1 month	
Group B 2nd line	Oxyl	Sodium Hyaluronate 0.15% eye drops	£4.15 (10ml)	200	£4.15	£4.15	£9.30	£7.47	1 month	
	Systane eye drops	Polyethylene glycol 400 and Propylene glycol eye drops	£4.66 (10ml)	200	£4.66	£4.66	£9.24	£8.38	1 month	
	Celluvisc	Carmellose 1% PF eye drops	£3.00 (30 x 0.4ml)	n/a	£6.00	£12.00	£30.00	£5.40	Single use	
Group C Preservative free (PF)	Evolve	Hypromellose 0.3% 10mL preservative free bottle	£1.98 (10mL)	200	£1.98	£1.98	£3.96	£3.56	90 days	PF sterile eye drop in multi-dose bottle. May be used by contact lens wearers
	Refresh ophthalmic	Polyvinyl alcohol 1.4%	£2.25 (20 x 0.4ml)	n/a	£6.75	£13.50	£33.75	£4.05	Single use	May be used by contact lens wearers

	Hylo-Fresh	Sodium Hyaluronate 0.03% 10mL preservative free bottle	£4.95 (10mL)	200	£4.95	£4.95	£9.90	£8.91	6 months	PF sterile eye drop in multi-dose bottle. May be used by contact lens wearers
	Celluvisc	Carmellose 1% PF	£3.00 (30 x 0.4ml)	n/a	£6.00	£12.00	£30.00	£5.40	Single use	May be used by contact lens wearers
	Systane UDVs	Polyethylene glycol 400 and Propylene glycol single dose unitis	£4.66 (28 x 0.8ml)	n/a	£9.32	£18.64	£46.66	£8.38	Single use	
Specialist recommendation	Generic	Fluorometholone 0.1%	£1.71 (5ml)	100	£1.71	£3.42	£5.13	POM	1 month	
		Prednisolone 0.5%	£2.00 (10ml)	200	£2.00	£2.00	£4.00	POM		
		Minims Prednisolone 0.5% (PF)	£12.25 (20 x 0.5ml)	n/a	£36.75	£61.25	£183.75	POM	Single Use	
Secondary care prescribing only	Ikervis	Ciclosporin 1mg/ml	£72 (30 x 0.3ml)	n/a	£144.00	£288.00	n/a	POM	1 month	
	Ilube drops	Acetylcysteine 5% eye drops	£16.90 (10ml)	200	£16.90	£16.90	n/a	POM	1 month	