

**Guest's Corner : Ocular Surface Society of Optometry
Innovative Instrument in MGD Diagnosis and Treatment**

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Lipid disorders of the tear film are probably the most important contributing factor to dry eye¹. Identification and management of meibomian gland dysfunction (MGD) are key to enhancing the tear film, and thereby, a patient's quality of life.



Fig 1. Mastrota Meibomian Paddle

Digital expression of the meibomian glands aids in the diagnosis of MGD. Gland excreta in MGD can be copious and turbid (meibomian gland seborrhea) and easily evacuated, or granular, scant and paste-like, suggesting gland obstruction. Recent work by Korb suggests that not all glands are active at the same time². The Mastrota Meibomian Gland Paddle (Fig 1.) is a diagnostic and potentially therapeutic instrument used to evaluate meibomian gland lipid production. Smooth-edged and easy to use, it allows the practitioner to easily evacuate the glands to assess their content.



Fig 2. – Gutierrez Meibomian Gland Expressor

Chronic inflammation from meibum stasis and keratinization of the meibomian gland ducts and orifices can ultimately lead to loss of gland clusters, atrophy and absorption. The Gutierrez Meibomian Gland Expressor (Fig 2.) is designed to aid in evacuation of congested lipid. Simply

rolled along the warmed lid margin, congested lipid is prompted to egress. Treatment is geared for in-office use.

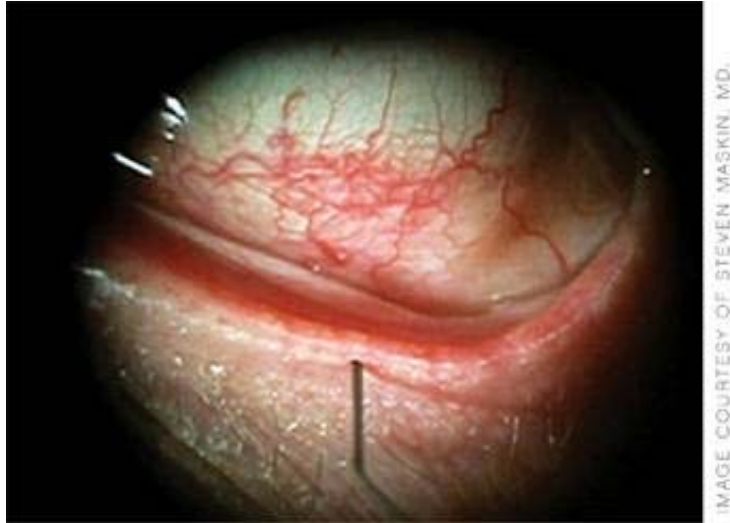


Fig 3. Maskin Meibomian Gland Intraductal Probes

More invasive, the Maskin Meibomian Gland Intraductal Probes (*Fig 3.*) are designed to re-establish ductal patency of the meibomian gland by probing using disposable sterile solid-wire probe cannulas.



Launched this year, the Ocular Surface Society of Optometry (OSSO) is dedicated to keeping our profession abreast of current thinking in regard to the ocular surface. With an active website, chat rooms and CE tracks at major meetings, OSSO is a vibrant and exciting new resource for discussing

topics such as these. Information on OSSO can be found by visiting www.ossopt.com.

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References:

1. Driver PJ, Lemp MA. Meibomian gland dysfunction. *Surv Ophthalmol* 1996; 40: 343-367.
2. Korb DR, Blackie CA, Paul LE, Solomon JD, Holmes M, Douglass T. The distribution of lower lid meibomian glands yielding liquid secretion. ARVO presentation, 2009.

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