

TREATING MGD WITH THE NEW MG EXPRESSOR

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After Diagnosing MGD

- Prescribe your preferred treatment for your patient's degree of MGD-including aggressive warm compresses with manual manipulation. I use Dr. Kathleen Mastrotta's method of having the patients use their index finger (after washing their hands) to "run" across horizontally on their eyelid margin. The warm compresses should be done for a minimum of 5 minutes-twice a day. Have the patient make an appointment to see you in a week.

Digital Expression-Ask the patient to put moderate pressure-especially work the nasal area



Instruct the patient to rinse out their eyes after expression with either saline or eye rinse. This helps remove liberated inflammatory material. Schedule the patient for an in office lid expression in 1-2 weeks

Prepping the Patient

- I like to instill 2 drops of either Zylet or Lotemax prior to the procedure. As the expression will be liberating inflammatory material into the patient's tear film.
- Ask your technicians to start the warm compress process-using either gel pack or rice socks. After 2-3 minutes, replace the warming items with a newly heated one. We want at least 5-7 minutes of warm lids prior to expression

Lid Hyperthermia



In Office Expression

- After the patient's lids have been adequately warmed, immediately start with the expressing the lower lids using small firm strokes-without using the slit lamp (I will occasionally use my BIO to get a better view). I like to tighten the lids by stretching the outer canthus. Recent literature shows the importance of functioning nasal meibomian glands in promoting proper meibomian secretion-so I pay particular attention to the nasal inferior lids.

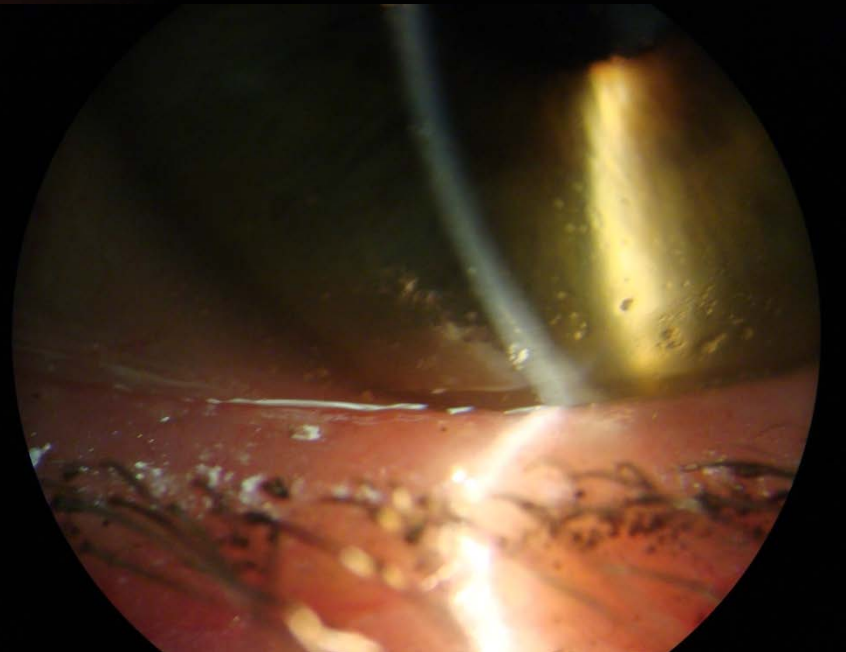
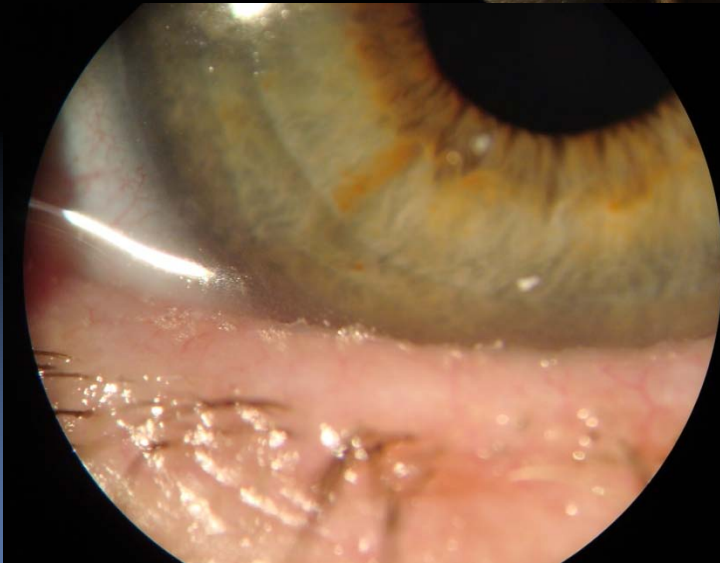
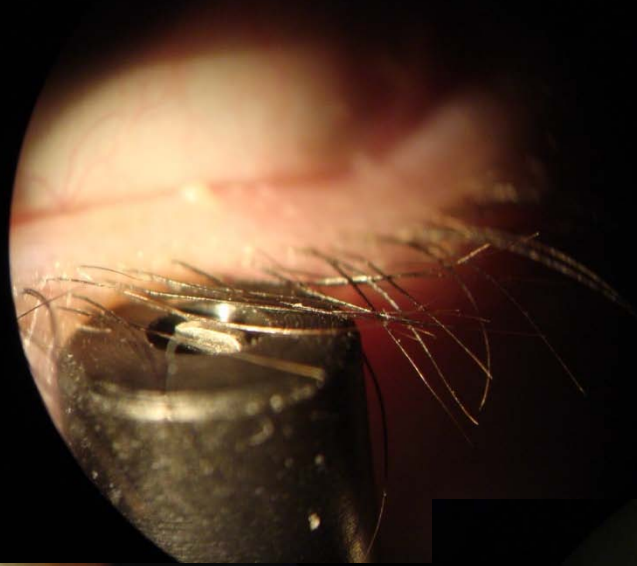


I will often use the BIO to get a lighted slightly magnified view of the lids

Expressing the Superior Lids

- Next we'll work the superior lids. Tighten the lids, and work the superior lids vertically along its length. Then finish off by working the lid margin horizontally-again paying more attention to the nasal area. Once I am done, I rinse the eyes with saline.
- As I am expressing the glands, I have my technicians start warming either the gel pack or rice sock.

Liberated Expression



Final Expression

- I now will have the patient use the warm compresses again one last time-for 2-3 minutes . During this time, I will enter the procedure information and office visit findings in the EMR.
- The patient is then moved to the slit lamp, where I will concentrate the MG Expressor treatment on the nasal glands. In some cases, I will add manual expression (after instilling topical anesthetic)-possibly using a Jaegar plate or Mastroda paddle-followed by rinsing with saline.

Additional Manual Expression



Mastrota Paddle



Jaegar Plate-
modified by M.
Gutierrez, OD

Post Treatment

- After the expression, I like to add another drop of either Lotemax or Zylet. If I will start the patient on Azasite, I will also install a drop at this time. Since the lids are now hopefully decongested, the hope is that medication will be absorbed by the meibomian gland a little more readily.
- Most patients will comment that their eyes feel much better at this point in the treatment.

Follow UP

- As MGD is a chronic condition, most patients have found the in office treatment with the MG Expressor beneficial and effective in helping control their symptoms (along with long term treatment which will include warm compresses and omega 3 oils- possibly with long term off label use of Restasis, pulse Rx's of Azasite and/or Lotemax). Most MGD patients will find significant benefit from quarterly in office procedures.



Pro-type-made with an old pen, paper clip,
bead, and clear eye tape

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