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Letter to the Editor

Alcohol Consumption in Patients with Previous Eye Surgery and Chronic Eye Irritation

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Dear Editor,

As an ophthalmologist, I see numerous patients that complain of chronic eye irritation, sensation of foreign body, lacrimation, eye pain, redness, burning and visual clouding. Dry eye syndrome can be caused by reduced tear production, excessive tear evaporation and/or altered tear quality and composition [1, 2]. There are numerous factors that cause and/or worsen irritated eye symptoms, such as autoimmune disease (i.e. lupus erythematosus, rheumatoid arthritis, scleroderma or Sjögren's syndrome), previous eye diseases (like blepharitis, conjunctivitis), incorrect or excessive use of contact lenses, previous eye surgery (i.e. refractive laser surgery, cataract, retinal surgery), eye drops for glaucoma or other pathologies, systemic medications (like hormones, immunosuppressants, decongestants, antihistamines, diuretics, antidepressants, beta blockers, medication for cardiopathies, diabetes and ulcers, etc.), menopause, old age, and environmental/work conditions (wind, sun, cold, dryness, excessive computer use, etc.) [1-3]. Patients are initially suggested to correct personal habits and external conditions, if possible. Therapy normally begins with eye artificial tear drops or gels that provide cleansing, lubricating and disinfection similar to natural tears [3]. Topical anti-inflammatory and corticosteroids drop can be prescribed for a limited time if needed [4]. Cyclosporine,

autologous serum eye drops and/or punctal plugs are additional treatment options for severe cases [2-4].

Artificial tears tend to help the symptoms in most cases. Some patients, however, complain of striking pain in the middle of the night that awakes them during sleep. Most of them have undergone cataract or refractive surgery or have suffered from chronic eye irritation [5-7]. It is interesting to note that these episodes are more frequent and more painful after alcohol consumption. As a doctor and a patient, myself that has undergone cataract surgery, I can confirm episodes of being awakened by the sensation of pins and needles in my eyes, which tends to occur after alcohol consumption. These symptoms can be due to an already sensitive corneal surface that remains after surgery and previous eye infections. The anterior segment appears red and inflamed (Figure 1). The superficial corneal epithelium can undergo abrasion and cause intense pain due to the highly concentrated sensitive nerve fibers in the cornea [8]. This corneal abrasion appears as a yellow-green area when stained with fluorescein and viewed with a blue light during slit lamp examination (Figure 2).

It occurred to me that the striking pain could be due to the rapid eye movement during the REM phase of sleep that acted on rubbing the

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epithelium across the inner lid conjunctiva, which at times could cause abrasion in already sensitive corneas. Current studies have reported abnormal friction factors caused by insufficient lubrication between the lid wiper area and the ocular surface defined as “Lid wiper epitheliopathy (LWE)” [9]. The fact that these symptoms occurred more frequently after alcohol consumption, could be explained by the global dehydration induced after drinking (hence the symptomatic hangover the day after). The state of dehydration can also affect the eye, causing induced tear hyperosmolarity and shortened break up time [10, 11].

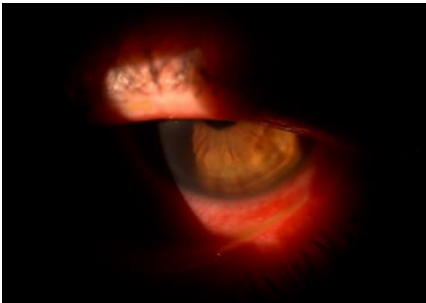


Figure 1: Slit lamp examination of the anterior segment showing chronic eye irritation.

An annual eye examination should be performed in the management of chronic eye irritation and dry eye syndrome. An early diagnosis and appropriate management of symptoms is essential to decrease discomfort and improve the quality of life and vision of the patient. Artificial tears drop and/or gel without preservatives need to be applied several times a day to reduce symptoms. When consuming alcohol, it is advisable to drink a lot of water before going to bed and apply artificial tears or gels before going to sleep to avoid waking up with pins and needles!

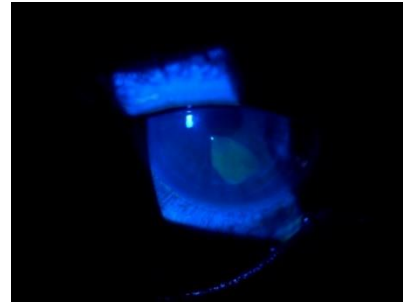


Figure 2: The irritated eye also has a corneal abrasion, which appears as a yellow-green area when stained with fluorescein and viewed with a blue light during slit lamp examination.

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