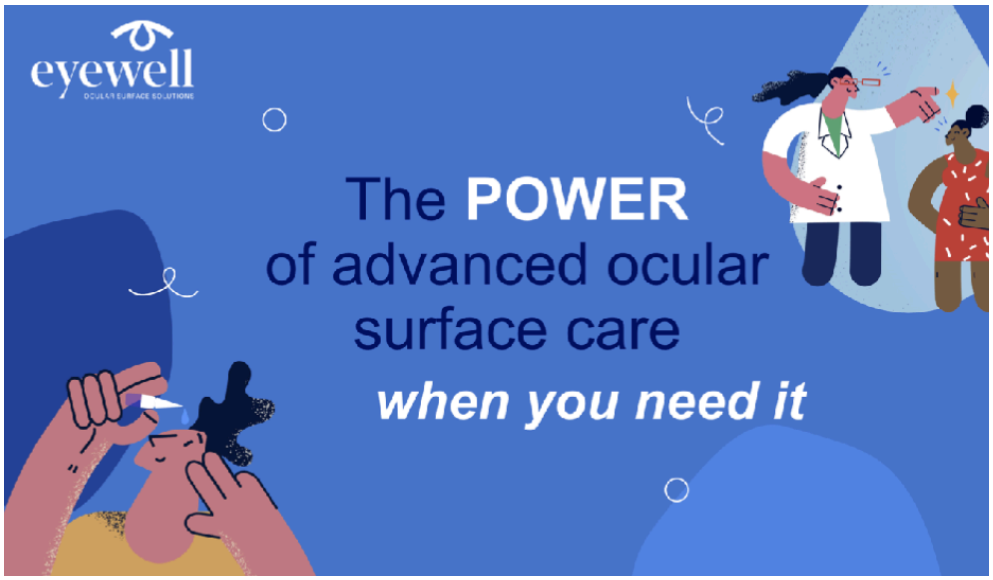
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NEWSLETTER



IN THIS ISSUE, WE HIGHLIGHT STUDIES SHOWING THAT PATIENTS WEARING SCLERAL LENSES STILL NEED TO BE TREATED FOR EYELID DISEASE.

THE SIGNS...

On the next page we highlight the findings of a new study in the *Journal of Clinical Medicine* that explored the extent to which signs of eyelid disease, including meibomian gland obstruction (MGD) , meibum quality, lid wiper epitheliopathy (LWE), and lid margin telangiectasia (LMT), were present among patients wearing scleral lenses (SL) for corneal irregularity and ocular surface disease. **The study concluded that eyelid disease was common among habitual scleral wearers regardless of the indication for lens use.**

Harthan JS, Nau A, Shorter E, Nau CB, Schornack M, Fogt JS. Presence of Eyelid Disease in Habitual Scleral Lens Wearers. J Clin Med. 2026 Apr 22;15(9):3181. doi: 10.3390/jcm15093181.

THE SYMPTOMS...

Scleral lenses (SL) are often fit for patients who can no longer tolerate other lens modalities or for patients with severe ocular surface diseases. There is a misconception that patients who wear scleral lenses no longer have dry eye problems. In a 2021 study of 197 keratoconus patients wearing contacts, the mean overall OSDI score of all participants was 40.2±22.8 (range: 0-100). There was no difference in mean OSDI scores by contact lens modality. **Based on an OSDI score of 33 or higher, 90% of participants reported symptoms indicative of dry eye disease.**

Shorter E, Harthan J, Nau A, Fogt J, Cao D, Schornack M, Nau C. Dry Eye Symptoms in Individuals With Keratoconus Wearing Contact Lenses. Eye Contact Lens. 2021 Sep 1;47(9):515-519.

THE LINK BETWEEN SCLERALS AND LID DISEASE

- **Eyelid disease is highly prevalent in habitual scleral lens wearers.** The study found that "eyelid disease was common among habitual SL wearers regardless of indication for lens use." Upper LWE occurred in 43% of eyes, lower LWE in 31%, and 20% had no expressible meibum.
- **OSD wearers show more severe gland obstruction and inflammation.** Compared with corneal-irregularity (CI) wearers, the OSD group had significantly more eyes with no expressible meibum (39% vs. 11%) and lid margin telangiectasia (61% vs. 19%). These findings reinforce the need for aggressive MGD management in this population.
- **Lid wiper epitheliopathy is common across all indications.** LWE rates were identical in CI and OSD groups (44%), suggesting that mechanical friction from scleral lenses—rather than underlying disease alone—plays a major role.
- **Midday fogging is frequent and may reflect inflammation.** Fogging was reported by 59% of participants and was associated with a higher prevalence of telangiectasia, supporting the link between inflammatory load, lipid disturbance, and reservoir turbidity.
- **Cross-sectional design limits causality.** The authors note that the study cannot determine whether eyelid disease preceded scleral lens wear or resulted from it, due to the absence of pre-fitting baseline data.

CLINICAL IMPLICATION:
EVERY SCLERAL LENS WEARER—REGARDLESS OF INDICATION—SHOULD UNDERGO ROUTINE EYELID EVALUATION. PROACTIVE TREATMENT OF MGD AND LID MARGIN INFLAMMATION SHOULD BE INTEGRATED INTO SCLERAL LENS FITTING AND FOLLOW-UP TO OPTIMIZE COMFORT, VISION, AND LONG-TERM WEAR SUCCESS.

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