

## Stye



### What is a stye?

A stye (also known as a “hordeolum”) is a bacterial infection of the Meibomian glands of the lower or upper eyelids. These are common eye infections that are typically caused by *Staphylococcus* which is among the normal skin flora.

### What are the symptoms of a stye?

A stye typically resembles a lid “zit,” or pimple along the edge of the eyelids. The stye may be raised and red, and may feature a pus-filled whitehead as pimples often do. It can vary in size and level of inflammation, though an active stye is typically painful and warm to the touch.

### What makes a patient more vulnerable to getting a stye?

Styes tend to occur in those patients with a history of Meibomian gland dysfunction (MGD) which are clogged or inflamed lid oil glands. Styes also tend to occur more often in patients with blepharitis (a chronic lid infection). Styes can also occur after bacteria is introduced below the skin, such as after trauma or an insect bite.

### How is blepharitis related to a getting a stye?

Blepharitis is a chronic lid infection along the base of the eyelashes. If left untreated, blepharitis is essentially a regenerating reservoir of bacteria. When the right opportunity arises, these bacteria are able to get in the lid and cause an infection. Besides treating the stye itself, Vista Eye Care’s eye doctors would also want to treat the blepharitis to reduce the chances of a repeat stye infection.

## How is MGD related to getting a sty?e?

MGD is an inflammatory condition in which the oil glands of the upper and lower lids are backed up and inflamed. The oil from these glands is instrumental in preventing the tear layer from evaporating off the front surface of the eye. Oil is ideally produced at a constant rate by the Meibomian glands, and the flow of this oil is outwards, away from the lids. When an oil glands are clogged, as it is in MGD, the protective one-way flow of the oil is compromised, and bacteria can thrive while the gland exists in this stagnated condition. While the sty?e itself should certainly be treated right away, the chronic, progressive nature of the underlying MGD should also be addressed. We can perform a simple, painless scan called LipiScan on the Meibomian glands of the lower lids. This scan can determine if a patient has MGD, and based on that information we may recommend treating that disease so as to prevent the future formation of styes.

## How is a sty?e typically treated?

Because the sty?e is the result of an internal eyelid infection, oral antibiotics must be used to introduce treatment from the inside-out. Topical eye drops claiming to treat styes are not effective as the infection is below the skin, not on the ocular surface. Sometimes, topical ophthalmic ointments can be used to treat blepharitis which can lead to sty?e formation, but the treatment of the sty?e itself requires systemic antibiotics.

## Should patients try to express the sty?e themselves?

Just as squeezing on pimples can lengthen the duration of that skin condition, squeezing on a sty?e can force the infectious material of the sty?e deeper into your lid tissue and result in longer infections with a greater chance of scarring.

## Should styes be treated, or just left to run their course?

While most styes would self-resolve after 1-2 weeks, prompt treatment will prevent the sty?e from ever advancing to more threatening infections such as preseptal cellulitis. Furthermore, treating a sty?e while it is still active will help reduce the chances of scarring, or of leaving scarred nodules in the location of the sty?e. If the sty?e has cleared, but a nodule persists, surgical excision is needed to remove the nodule, though this is most often done for cosmetic reasons.

If you suspect your have a sty?e, call our office today at **(303) 450-2020** so that we can get you in for a medical eye appointment.

