

New dry eye theory published

Perry Rosenthal, MD, Boston Eye Pain Foundation and **David Borsook, MD**, Harvard Medical School, have proposed a "fundamentally new theory" behind dry eye. The new theory also "identifies a previously unidentified suicide-provoking, eye-centered pain disease" that the authors call oculofacial pain.

Conventional theories suggest that while tear levels may be sufficient, tears evaporate too quickly because of secretions produced by the meibomian glands. Yet other published theories discard the notion that there is a relationship between meibomian glands and dry eye.

Drs. Rosenthal and Borsook theorize that unidentified diseases of the corneal nerves increase the sensitivity of their specialized tear thickness sensors causing these eyes to feel dry despite the presence of adequate tears, and label these symptoms "false dry eye alarms." In reality, they suggest, the progression of the corneal nerve disorder eventually degrades the ability to efficiently transmit the messages for more tears to the tear glands, resulting in fewer tears.

Oculofacial pain is characterized by eye-centered, high intensity, unrelenting pain that may include severe photosensitivity and "represents a form of pain known as centralized pain that originates in certain pain-control centers in the brain and projects the symptoms to body parts they normally serve" (locations above