AN OBSERVATIONAL STUDY TO DETERMINE THE PREVALENCE OF THE DRY EYE DISEASE IN NEWLY DIAGNOSED DEPRESSIVE DISORDER PATIENTS

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KEY WORDS-Dry eye, Newly diagnosed depression, TBUT, Schirmer’s test, Oxford score, antidepressants.

ABSTRACT

INTRODUCTION:

Dry Eye Disease (DED) is a common multifactorial problem with varying prevalence rate of 5-34\%. Dry eye results in discomfort, visual disturbances and tear film instability with potential damage to ocular epithelial surface which is accompanied by increase in tear osmolarity and inflammation.
It poses a huge economic burden to patients if not evaluated for risk factors that may result in delay in treatment. It affects the quality of life of patients with regards to daily visual acuity. It results in social stigma as a patient may have chronic red eye. Patient may go in for depression.

Like Dry eye disease, Depression also a chronic problem nowadays. Depression is a life threatening disorder which affects hundreds of millions of people all over the world. Any age can be affected from childhood to late life. It causes severe distress and disruption of life. If left untreated it can be fatal. There are many studies saying that depression and dry eye disease are associated with each other because of antidepressants causing anticholinergic effects. But recent research saying that even depression itself causing the dry eye disease not only the antidepressants, because of their common pathophysiological mechanisms.

**AIM & OBJECTIVES**

To Determine the Prevalence of the dry eye disease in newly diagnosed depression patients without any previous medication.

**METHODOLOGY-Cross sectional, observational study**
This study was conducted in patients with newly diagnosed depression without any previous medication who satisfy the inclusion criteria attending the psychiatry OPD after obtaining consent.

100 patients are selected from psychiatry opd who were all diagnosed to have depression and classified as mild, moderate, severe depression by the psychiatrists.

- On the same day, of diagnosing of depression patients shall undergo a complete ocular examination before starting antidepressants. Visual acuity by snellen’s chart, intraocular pressure, fundus examination, dry eye tests like tear film break up time (TBUT), Tearfilm meniscal height, ocular surface staining with fluorescein, schirmer’s test, slit lamp biomicroscopic examination of eyelid margins and meibomian gland orifices, expression of meibum secretions and Blink rate also noted and results were analysed. Study was done for 6 months.

RESULTS AND INTERPRETATION:

Among 100 studied population, 42% had dry eye, prevalence of dry eye disease in depression patients in our study is 42%. 63.6% of dry eye disease was present in >50 years of age group. 60% had abnormal blink rate. TBUT was abnormal in 40 patients. 38% had low schirmer’s score. 37(37%) patients showed low TFMH.
showed abnormal oxford score. 32 female patients (58.2%) had dry eye when compared to male 10 (22.2%).

CONCLUSION

So, From this study it is clearly seen that the depression itself causing dry eye disease, not only the anti depressants which are using for treating the depression. If we do not diagnose the dry eye early and not properly treated, they may go for serious complications like corneal melting, perforation etc and eventually vision loss. So, it is important that psychiatrists take this into account especially while prescribing anti depressants which also aggravates dry eye disease and send the patients for ocular screening for dry eye disease once they diagnose the depression, to avoid such complications and to improve the quality of life.