Some people develop marginal ulcers quite frequently, perhaps every few months. You may be able to stop more ulcers developing, or at least make them less frequent, by cleaning your eyelids regularly. The cleaning helps to reduce the number of bacteria in the glands of the lid.

**Eye lid cleaning:**
Lid cleaning is only necessary if you have had several ulcers, or if your doctor or nurse advise. There are two main methods.

One method is to boil some water to sterilise it, and allow it to cool a little so it is still hot, but not hot enough to burn. Add half a teaspoon of baby shampoo to a pint of the boiled water. Soak a clean face cloth in the baby shampoo solution and hold it against your eye for 2-3 minutes. The steam from the solution will loosen the scales on the lids. Then gently rub a cotton bud soaked in the same solution (warm not hot) along the edge of the lower eyelid, to remove scales and debris on the edge of the lid. Use a mirror, and pull the lid away from the eyeball with the fingers of the other hand. Try cleaning the edge of the upper lid gently without pulling (the upper lid is harder to clean and not so important). A second simpler method of bathing is to use water from the hot water tap, and gently wipe the flannel against your closed eyelids. Then clean the lids with a cotton bud as above. (Some doctors think boiled water is safer.)

Using either method bathe and clean 2-3 times a day at first, then less often as the lids become cleaner. It is safe to stop cleaning but you may need to start again if the ulcers return; alternatively continue cleaning just at night. Some people find baby shampoo does not help: try with and without (plain water) to see which cleans best.

If you develop marginal ulcers every month for several months, antibiotic treatment may be helpful. An antibiotic cream may help, such as Fucithalmic twice daily for one or more months, depending on how frequent your ulcers are. If this does not work, and your ulcers are very troublesome, tablets may help: Doxycycline 100mg daily for 1 month, then 50mg a day long term (providing you are not pregnant and are otherwise well ... ask your doctor first). Erythromycin is an alternative. Generally you should have seen an ophthalmologist at least a couple of times with ulcers before considering tablets.
What is a marginal ulcer?
A marginal ulcer is a small ulcer on the front part of your eye, the cornea. The cornea is the clear ‘window’ of the eye.

is a shallow crater, a bit like a crater on the surface of the moon. A ‘marginal ulcer’ is a shallow ulcer on the surface of the cornea.

A doctor or nurse can see the ulcer by using a slit lamp, a type of microscope, used in the eye clinic.

What causes marginal ulcers?
They form as part of your body’s reaction to bacteria (germs). Some bacteria are trapped in the eyelids, and some are naturally present on the surface of everyone’s eyes. The bacteria may invade the surface of the cornea, and your body’s immune system reacts to the bacteria to make the ulcer. When the body ‘over-reacts’ an ulcer forms.

What do you feel?
At first your eye starts to feel a little sore, as though something may be in it, and a little bit achy. About 1-2 days later it may start to water and be painful and red. Bright lights become painful, and your eye may become sticky and difficult to open in the morning.

What is the treatment?
There are two parts to the treatment: treating the ulcer itself, and then trying to prevent more ulcers.

The Ulcer itself
You are usually given such as a combination of dexamethasone and chloramphenicol to stop a more serious infection of the cornea.

Please see the more recent page http://www.goodhopeeyeclinic.org.uk/marginalcornealulcer.htm

Prevention of more ulcers
Doctors believe that the bacteria in the glands of the eyelids help to cause these ulcers.

The glands in the eyelids: glands in purple

continued............