

Singaporeans, Thais suffer from MGD symptoms regularly unaware of risk

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Johnson & Johnson Vision study reveals seven in 10 Singaporeans and eight in 10 Thais suffer from symptoms of Meibomian Gland Dysfunction but do not seek professional help, putting eyesight at risk



A new survey conducted by Johnson & Johnson Vision has revealed that a majority of Singaporeans (70%) and Thais (77%) regularly suffer from symptoms of Meibomian Gland Dysfunction (MGD), a leading cause for Dry Eye Disease (DED). Despite this, most Singaporeans and Thais (86% of Singaporeans, 79% of Thais) are unfamiliar with MGD, and a majority (76% of Singaporeans, 69% of Thais) choose not to seek professional help, putting their eyesight at risk.

The online survey, which polled over 1,000 individuals in Singapore and Thailand respectively, was aimed at further understanding the prevalence of dry eye symptoms as well as the lack of awareness around the condition among the population in both countries.

Majority of Singaporeans and Thais do not know they suffer from MGD

MGD is a leading cause of DED, which affects more than 340 million people around the world. However, many cases go undetected because of the lack of awareness around MGD and what its symptoms are.

MGD is a chronic, progressive and obstructive condition that can affect both the structure and the function of the oil glands in the eyelids. The oils are necessary for protecting the tears from pathogens, allergens and evaporation. Without proper functioning meibomian glands, patients may face eye discomfort, inflammation, fluctuating vision and be at risk for developing dry eye.

Symptoms experienced across both markets include:

- Soreness (40% in Singapore, 48% in Thailand)
- grittiness, the feeling of having dust in your eye (31% in Singapore, 34% in Thailand)
- dryness (51% in Singapore, 27% in Thailand)
- excessive watering (18% in Singapore, 17% in Thailand)

- burning sensation in the eye (11% in Singapore, 48% in Thailand)

These symptoms may all be signs of MGD.

The survey also revealed the key contributing factors to MGD symptoms. About half of all respondents (51% in Singapore, 49% in Thailand) report that they typically experience these MGD symptoms when looking at digital screens. Work was also a key contributing factor to MGD symptoms in Singapore, with 49% of Singaporeans stating that they experience these symptoms at work. However, due to the lack of awareness around the disease, Singaporeans and Thais do not recognise their risk.

“Patients who suffer from frequent types of irritation and discomfort in their eyes should not ignore their symptoms,” said Dr Lee Hung Ming, Senior Consultant and Medical Director of Lee Hung Ming Eye Centre. “Often, these symptoms not only can affect daily life, but they can also be a sign of underlying chronic eye conditions such as MGD, which can be managed best with early diagnosis.”

Treatment for MGD Symptoms

When asked how Singaporeans and Thais treat their symptoms, the most common self-care treatments were the use of store-bought eyedrops (48% in Singapore, 33% in Thailand) or simply limiting their screen time (37% in Singapore, 42% in Thailand). These methods offer temporary relief from symptoms, but do not treat the primary cause of MGD – blocked meibomian glands. Only a minority (12% in Singapore, 27% in Thailand) sought professional advice or treatment from an expert such as a pharmacist or eyecare professional.

Of the respondents who reported turning to self-care methods for relief of symptoms that could be related to MGD, a small number (11% in Singapore, 17% in Thailand) reported finding them effective. On the other hand, more (21% in Singapore, 33% in Thailand) patients who chose to seek professional help for their symptoms reported finding their treatment highly effective.

“Our eyesight is the most precious of our senses. However, it is threatened by conditions and diseases such as MGD, which is a leading cause of Dry Eye Disease. MGD has been found to be twice as prevalent in Asians, posing a real threat to our sight,” said Mr Christoph Vonwiller, Regional Vice President, Surgical Vision, Asia-Pacific and Japan, at Johnson and Johnson Vision.

“Johnson and Johnson Vision’s aim is to change the trajectory of eye health, and our hope in sharing the results from the survey at the APAO is to raise the public’s understanding of MGD and equip both Singaporeans and Thais with knowledge they need to protect their sight,” added Mr Vonwiller.

Patients seeking professional help are diagnosed by eye doctors to assess frequency and severity of symptoms, as well as help track progression over time.

The doctors may then recommend treatments, depending on the patient condition and potential co-existing illnesses. Some of the treatments that can be administered in the Doctor’s clinic include:

- Vectored Thermal pulsation: Meibomian glands function is improved by liquifying the gland contents and gently and simultaneously evacuating the liquified contents out of the glands.
- Other in office treatments such as Meibomian Gland probing: The main ducts of the meibomian gland are pierced using a surgical instrument.

Doctors may also recommend home treatments in combination with or prior to prescribing in-office treatments. Some of them include:

- Daily or twice daily application of warm compress and/or eyelid hygiene
- Omega-3 supplements
- Eye drops to manage inflammation

“Patients are advised to have their eye health checked as part of their routine checkups to lower their risk of eye disease. With eye conditions such as MGD, advancements in medical technology have made diagnosis and treatment immensely efficient. In fact, through proper advice and care from an eyecare professional, patients can experience relief from symptoms like eye discomfort and dry eye,” said Dr Nattawut Wanumkarng, Director of At Eye Clinic and Ophthalmologist at Bumrungrad International.

MGD is Prevalent in Asia

MGD has been found to be highly prevalent in Asian countries reporting an incidence rate of between 46% to 70%. The high prevalence rate of MGD is a cause for concern, considering that it is the leading cause of DED.