

[PubMed](#)**Format:** Abstract ▾[Arch Soc Esp Oftalmol.](#), 2000 Nov;75(11):751-756.

[Nonpreserved topical steroids and lacrimal punctal occlusion for severe keratoconjunctivitis sicca].

[Article in Spanish]

Sainz De La Maza Serra M¹, Simón Castellvi C, Kabbani O.**Author information****Abstract**

PURPOSE: To analyze the efficacy of topical nonpreserved steroids before punctal occlusion in the treatment of severe keratoconjunctivitis sicca associated with Sjögren's syndrome.

METHODS: We performed a prospective study including 15 patients, 30 eyes, (group 1) treated with topical nonpreserved steroids for 2 weeks and then punctal occlusion, and 15 patients, 30 eyes, (group 2) treated directly with punctal occlusion. Symptom severity (0-3+) and corneal fluorescein staining (0-9+) were evaluated after a week and after two months, and results were statistically compared between both groups with the t Student test.

RESULTS: Symptom severity was negative in 67% of patients of group 1 and in 27% of patients of group 2 ($p=0.0001$) after a week, and in 80% of patients in group 1 and in 33% of patients of group 2 ($p=0.0003$) after 2 months. Corneal fluorescein staining was negative in 67% (OD) and 73% (OI) of patients of group 1 and in 33% (AO) of patients of group 2 ($p=0.0001$, AO) after a week, and in 80% (AO) of patients of group 1 and in 60% of patients of group 2 (AO) ($p=0.0001$, AO) after 2 months. There were no patients with side effects or complications.

CONCLUSIONS: Topical nonpreserved steroid therapy for two weeks before punctal occlusion is effective in controlling symptoms and corneal fluorescein staining in patients with severe keratoconjunctivitis sicca associated with Sjögren's syndrome.

PMID: 11151264

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