

### Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/medical-industry-feature/examining-a-dry-eye-disease-therapy-how-it-works-and-who-its-for/32267/>

### ReachMD

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### Examining a Dry Eye Disease Therapy: How It Works and Who It's for

#### Dr. Rowen:

Let's dive into the topic of evaporative dry eye disease and why cases are on the rise.

#### Dr. Periman:

Absolutely. We're seeing a rise in cases due to various factors including increased device use, lifestyle choices, and environmental influences. And we know that excessive tear evaporation is a leading driver of dry eye disease, and that sets off a vicious cycle of desiccating stress, tissue damage, and inflammation. And that results in symptoms such as eye dryness, burning, and blurred vision. It's a perpetual cycle we need to address.

#### Dr. Rowen:

And what's concerning is that the majority of patients with dry eye disease—around 86%—are grappling with excessive tear evaporation. So it's important to take this into consideration when we see patients with signs and symptoms of dry eye disease.

#### Dr. Periman:

That's where unique, targeted treatments like MIEBO come into play. MIEBO is composed of only 1 ingredient and is specifically designed to inhibit evaporation. I like to say "MIEBO Mimics Meibum," which means MIEBO works to reduce tear evaporation, just like natural meibum.

#### [On-screen text]

The exact mechanism of action for MIEBO in dry eye disease is not known.

#### Dr. Rowen:

And because its surface tension is much lower than water, MIEBO rapidly spreads across the ocular surface, forming an anti-evaporative layer at the air-liquid interface of the tear film. This promotes healing on the ocular surface, reducing ocular surface damage, and may also reduce friction.

I recall a patient, she's a computer programmer, basically on the computer all day as we see all the time. And she was telling me her vision was fluctuating all day long, so she would have to keep blinking her eyes to clear her vision. They were burning and tearing and stinging. She just was so miserable, it was hard for her to work.

#### Dr. Periman:

Similarly, I have a patient who had some office computer work, but also worked outdoors as a river raft tour guide. And so, the outdoor wind and desiccating stresses from those environmental factors really impacted her. So, I found myself reaching for MIEBO in that situation to good success.

#### Dr. Rowen:

I did the same thing because MIEBO is preventing evaporation. So, we're preserving the integrity of the tear film by just keeping it on the surface, so they don't feel that their eyes are drying out.

#### Dr. Periman:

I love it for those evaporative load patients particularly because of the excellent tolerability profile. I find myself reaching for it very frequently in my clinic.

#### [On-screen text]

In clinical trials, the most common ocular adverse reaction was blurred vision. Blurred vision and conjunctival redness were reported in 1% to 3% of patients.

**Dr. Rowen:**

And that's why it becomes my first choice.

**Dr. Periman:**

MIEBO is a great option because it's the only prescription eye drop that directly targets tear evaporation. In fact, a preclinical in vitro study has shown MIEBO to be significantly more effective at inhibiting evaporation than natural meibum lipids.

**[On-screen text]**

Significantly more effective vs meibum lipids from a single healthy volunteer. The clinical significance of this data has not been established. See study design at the end of this video.

**Dr. Rowen:**

I think we can agree that when it comes to treating evaporative dry eye disease, because of the way MIEBO works, it's an important treatment option for us to have in our dry eye disease armamentarium.

**Dr. Periman:**

Agreed and that's something we're definitely seeing eye to eye on.

**Announcer:**

### INDICATION

MIEBO® (perfluorohexyloctane ophthalmic solution) is indicated for the treatment of the signs and symptoms of dry eye disease.

### IMPORTANT SAFETY INFORMATION

- MIEBO should not be administered while wearing contact lenses. Contact lenses should be removed before use and for at least 30 minutes after administration of MIEBO
- Instruct patients to instill one drop of MIEBO into each eye four times daily
- The safety and efficacy in pediatric patients below the age of 18 have not been established
- The most common ocular adverse reaction was blurred vision (1% to 3% of patients reported blurred vision and conjunctival redness)

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch) or call 1-800-FDA-1088.

**Please see full Prescribing Information for MIEBO at [MIEBO-ECP.COM](http://MIEBO-ECP.COM).**