

Transcript

Indication

Xiidra® (lifitegrast ophthalmic solution) 5% is indicated for the treatment of signs and symptoms of dry eye disease (DED).

Important Safety Information

- Xiidra is contraindicated in patients with known hypersensitivity to lifitegrast or to any of the other ingredients.
- In clinical trials, the most common adverse reactions reported in 5-25% of patients were instillation site irritation, dysgeusia, and reduced visual acuity. Other adverse reactions reported in 1% to 5% of the patients were blurred vision, conjunctival hyperemia, eye irritation, headache, increased lacrimation, eye discharge, eye discomfort, eye pruritis, and sinusitis.
- To avoid the potential for eye injury or contamination of the solution, patients should not touch the tip of the single-use container to their eye or to any surface.
- Contact lenses should be removed prior to the administration of Xiidra and may be reinserted 15 minutes following administration.
- Safety and efficacy in pediatric patients below the age of 17 years have not been established.

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

Please see Full Prescribing Information at Xiidra-ecp.com

Hi, everyone. Thank you for attending this program [with] me, Rolando Toyos, from Toyos Clinic. I see myself as a LASIK, cataract, and dry eye specialist. This educational program is sponsored by Bausch and Lomb and I've received compensation from Bausch and Lomb to present this program. Please note that this is not an accredited CME. Today, we're going to review a patient case which is well suited for Xiidra® (lifitegrast ophthalmic solution) 5%, specifically a dry eye patient with systemic inflammation. So let's get started.

So this is a patient of mine. It's a 55-year-old female who came in complaining of visual fluctuations, eye pain, irritation. It was stopping her from completing her normal activities of daily life, like her job. She has a history of rheumatoid arthritis with chronic eye discomfort for several years and she's a bookkeeper, new patient, presenting to my office for the first time. Again, a history of rheumatoid arthritis with eye discomfort, visual fluctuation, and chronic discomfort of both eyes. She complains of gritty sensation, redness, burning, and eye pain. She has occasional joint stiffness

and fatigue, but no recent RA flare-ups. Currently, she's only using preserved tears every two to three hours without relief. She's on a disease-modifying therapy, methotrexate, and some low-dose corticosteroids for her RA.

[Her] visual acuity is 20/40 in both eyes. Slit lamp examination [shows] she has moderate conjunctival hyperemia. And as you can see in the picture, she has some fluorescein staining, which is more diffuse inferiorly. She had very low Schirmer scores. And she had positive InflammDry tests, with elevated matrix metalloproteinase-9, MMP-9.

My strategy when I see new patients with dry eye disease and medical history of autoimmune disorders such as rheumatoid arthritis, I educate them to better understand the association between dry eye disease and autoimmune diseases and lifestyle modifications that could help. For patients with RA, it's important for them to understand that rheumatoid arthritis can lead to aqueous deficient dry eye. Managing RA effectively is critical to controlling systemic inflammation and supporting overall ocular health. Warm compresses, lid scrubs, and dry eye nutraceuticals are straightforward and foundational recommendations in dry eye disease.

After providing patient education and establishing basic self-care, what do you think is your next recommended step for this patient? Xiidra® (lifitegrast ophthalmic solution) 5%, twice a day in both eyes. Preservative-free artificial tears that she could use as needed. Intense pulsed light therapy.

So the prevalence of dry eye disease in the US population is about 5% to 17%, but in RA, that jumps up to 19% to 31%.¹⁻³ In rheumatoid arthritis, similar to DED, more females than males have the disease, 60% to 75%, and it mainly becomes a problem after the fourth decade.^{2,3}

Dry eye disease and rheumatoid arthritis are intimately connected through underlying systemic inflammation.⁴ This inflammation, a hallmark of autoimmune conditions such as RA, rosacea, Sjogren's, type 1 diabetes, celiac disease, and MS, not only contribute to but can significantly exacerbate dry eye by impacting the delicate ocular surface and compromising essential function of the lacrimal glands, which are vital for tear production.^{4,5}

The manifestation and severity of dry eye symptoms frequently correlate directly with systemic inflammatory activity.⁴

Since rheumatoid arthritis, along with other autoimmune conditions, is in part mediated by T-cells⁶, I believe it only makes sense to treat a T-cell-mediated disease with a T-cell immunomodulator.

As I mentioned, this was a new presentation, so we started with Xiidra. We didn't try everything at once, but instead started with the regimen of Xiidra.

In cases like this one where ocular surface inflammation is observed, initiating an immunomodulator such as Xiidra® (lifitegrast ophthalmic solution) 5% can help reduce inflammation and alleviate symptoms.

Xiidra® (lifitegrast ophthalmic solution) 5% has been available in the US for nearly 10 years and now has been a proven dry eye treatment.⁷ I have a lot of success across a broad range of patients. Patients with autoimmune diseases are common in my practice—typically a woman in her 60s or older. Upon examination, corneal staining together with post-menopause suggest possible underlying ocular surface inflammation.

Xiidra was specifically designed to inhibit dry eye inflammation.^{7*}

It delivers early symptom relief in as little as two weeks and continues to improve over time.^{7*†} The safety and efficacy of Xiidra were assessed in 4 multicenter, randomized, prospective, double-masked, placebo-controlled studies involving 2,133 patients.

The most common adverse reactions reported in 5% to 25% of patients were instillation site irritation, altered taste sensation, dysgeusia, and reduced visual acuity.⁷⁻¹¹

With proper patient education and clear treatment expectations, many of my patients return and remain on Xiidra.

*The exact mechanism of Xiidra in dry eye disease are not known.

†Xiidra significantly reduced symptoms of eye dryness at 2 weeks in 2 of 4 studies, with improvements observed at 6 and 12 weeks in all 4 studies.

So the patient in this case started using Xiidra after the first visit. At eight-week follow-up after Xiidra twice daily initiation and rheumatoid arthritis management, we saw significant improvement in symptoms of dry eye, decreased symptoms of vision fluctuation, [and] increased comfort.

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I think this case really shows a very typical patient with a systemic inflammatory disease and ocular surface disease. And what we want to do in those patients is treat the inflammation. And in this case, the Xiidra did improve the signs and symptoms of her dry eye disease. Thank you.

References

1. Dana R, Bradley JL, Guerin A, et al. Estimated Prevalence and Incidence of Dry Eye Disease Based on Coding Analysis of a Large, All-age United States Health Care System. *Am J Ophthalmol*. 2019;202:47-54. doi:10.1016/j.ajo.2019.01.026
2. Stapleton F, Alves M, Bunya VY, et al. TFOS DEWS II Epidemiology Report. *Ocul Surf*. 2017;15(3):334-365. doi:10.1016/j.jtos.2017.05.003
3. Ma W, Wang G, Li X, Wu H, Liu Z, Dong N, Li C. Study of Factors Influencing Dry Eye in Rheumatoid Arthritis. *J Ophthalmol*. 2020;2020:5768679. doi: 10.1155/2020/5768679
4. Shan H, Liu W, Li Y, Pang K. The Autoimmune Rheumatic Disease Related Dry Eye and Its Association with Retinopathy. *Biomolecules*. 2023;13(5):724. doi: 10.3390/biom13050724
5. Golden MI, Meyer JJ, Zeppieri M, Patel BC. Dry Eye Syndrome. 2024 Feb 29. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2025 Jan-. PMID: 29262012
6. Yap HY, Tee SZ, Wong MM, Chow SK, Peh SC, Teow SY. Pathogenic Role of Immune Cells in Rheumatoid Arthritis: Implications in Clinical Treatment and Biomarker Development. *Cells*. 2018;7(10):161. doi: 10.3390/cells7100161
7. Xiidra. Prescribing information. Bausch & Lomb Inc.
8. Semba CP, Gadek TR. Development of lifitegrast: a novel T-cell inhibitor for the treatment of dry eye disease. *Clin Ophthalmol*. 2016;10:1083-94. doi: 10.2147/OPHTH.S110557
9. Sheppard JD, Torkildsen GL, Lonsdale JD, et al. Lifitegrast ophthalmic solution 5.0% for treatment of dry eye disease: results of the OPUS-1 phase 3 study. *Ophthalmology*. 2014 ;121(2):475–483.
10. Tauber J, Karpecki P, Latkany R, et al. Lifitegrast ophthalmic solution 5.0% versus placebo for treatment of dry eye disease: results of the randomized phase III OPUS-2 study. *Ophthalmology*. 2015;122(12): 2423–2431.
11. Holland EJ, Luchs J, Karpecki PM, et al. Lifitegrast for the Treatment of Dry Eye Disease: Results of a Phase III, Randomized, Double-Masked, Placebo-Controlled Trial (OPUS-3). *Ophthalmology*. 2017;124(1):53-60. doi: 10.1016/j.ophtha.2016.09.025