

# Pre-Treatment Tear Film and Meibomian Gland Parameters as Predictors of Response to Intense Pulsed Light Therapy in MGD Patients

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**Purpose:** Intense Pulsed Light (IPL) is effective for meibomian gland dysfunction (MGD). This study retrospectively analyzed pre-treatment differences in tear film and meibomian gland parameters between IPL responders and non-responders.

**Methods:** Patients who received  $\geq 3$  IPL treatments for MGD at Itoh Clinic (2022–2023), had complete data, and were followed for over three months were included (N=872). Parameters analyzed included SPEED score, plugging, lid margin vascularity, meibum grade, fluorescein tear break-up time (FBUT), corneal/conjunctival staining (CFS), non-contact meibography findings, and Schirmer values. IPL was considered effective if SPEED improved by  $\geq 4$  and meibum grade by  $\geq 1$ .

**Results:** Seventy-three patients (mean age: 52.5 years, 26 males, 47 females) were included. The effective group (n=116) had lower plugging and vascularity grades but higher upper eyelid meibum grades and meiboscores than the ineffective group (n=30) (P=0.008, <0.001, 0.001, 0.011). Dropout and extreme thinning on non-contact meibography were significantly more frequent in the upper than lower eyelid in the effective group (P<0.05). No significant differences were found in FBUT, CFS, or Schirmer values.

**Conclusion:** Meibography is essential for predicting IPL treatment prognosis. Severe gland dropout and thinning in the upper eyelids are key predictors of IPL efficacy for MGD.

## Title and Abstract

<b>Title</b> (maximum of 20 words)	Pre-Treatment Tear Film and Meibomian Gland Parameters as Predictors of Response to Intense Pulsed Light Therapy in MGD Patients
<b>Abstract</b> (maximum of 200 words)	<p>Purpose: Intense Pulsed Light (IPL) is effective for meibomian gland dysfunction (MGD). This study retrospectively analyzed pre-treatment differences in tear film and meibomian gland parameters between IPL responders and non-responders.</p> <p>Methods: Patients who received <math>\geq 3</math> IPL treatments for MGD at Itoh Clinic (2022–2023), had complete data, and were followed for over three months were included (N=872). Parameters analyzed included SPEED score, plugging, lid margin vascularity, meibum grade, fluorescein tear break-up time (FBUT), corneal/conjunctival staining (CFS), non-contact meibography findings, and Schirmer values. IPL was considered effective if SPEED improved by <math>\geq 4</math> and meibum grade by <math>\geq 1</math>.</p> <p>Results: Seventy-three patients (mean age: 52.5 years, 26 males, 47 females) were included. The effective group (n=116) had lower plugging and vascularity grades but higher upper eyelid meibum grades and meiboscores than the ineffective group (n=30) (P=0.008, &lt;0.001, 0.001, 0.011). Dropout and extreme thinning on non-contact meibography were significantly more frequent in the upper than lower</p>

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Conclusion: Meibography is essential for predicting IPL treatment prognosis.

Severe gland dropout and thinning in the upper eyelids are key predictors of IPL efficacy for MGD.