

How to Deal with Dry Eyes – Treatment Options and Ways to Prevent Symptoms

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STORY AT-A-GLANCE

- › More than half of U.S. adults experience dry eye symptoms, but only a small fraction have received a formal diagnosis or treatment
- › Common symptoms include burning, stinging, gritty sensations, blurred vision, and eye fatigue, often worse at night or with prolonged screen use
- › Environmental and lifestyle factors – including digital device use, indoor HVAC, contact lenses, and certain medications – are major drivers of dry eye disease
- › Remedies range from simple lifestyle changes and home routines (blink breaks, warm compresses, humidifiers) to over-the-counter drops, prescription medications, and device therapies
- › Ignoring persistent symptoms increases the risk of corneal damage, chronic inflammation, and permanent vision changes, making professional evaluation necessary

Dry eye, meaning the eye does not produce enough tears or the tears evaporate too quickly, is characterized by irritation (like there's something in your eye), redness, blurry vision, and sometimes a stinging or burning pain. For some, it worsens at night or after long periods staring at digital screens.

Left unaddressed, dry eye not only affects quality of life but also raises the risk of corneal damage and chronic inflammation, which can permanently impair vision. Researchers and clinicians now view it as a widespread public health problem, not just a

nuisance.

Dry Eye Is So Common — but Why Is It So Undertreated?

Research presented during the 43rd Congress of the European Society of Cataract and Refractive Surgeons (ESCRS) found that over half of the population in the U.S. and Europe experience dry eyes — yet only a small fraction sought professional help and were formally diagnosed with this condition.¹

- **The data was based on two separate surveys conducted on thousands of participants** — In the U.S., the findings were based on a survey involving 2,003 adults conducted in April 2024.

Meanwhile, the European data came from an ongoing study including over 5,000 adults from the U.K., Germany, France, Poland, and Saudi Arabia, dubbed the "Needs Unmet in Dry Eye: Symptoms, Treatment and Severity" (NESTS) study, it included data from 2,580 adults in the general population and 2,572 dry eye sufferers taken in June 2025.

- **The researchers found that more than half of Americans and Europeans report dry eye symptoms** — Based on the U.S. survey, it affects 50% of American respondents, while the NESTS study found that 58% of Europeans deal with this condition. Yet only 17% (U.S.) to 20% (European) of patients have ever received a professional diagnosis or treatment. According to Dr. Piotr Wozniak, a refractive surgeon and dry eye specialist based in Warsaw, Poland:²

"Results from our studies reveal a substantial group of patients suffering without help. The European questionnaire explored why people don't seek treatment. Many see dry eye as a normal part of aging and something to endure."

As a medical doctor, I find this particularly concerning because a simple eye drop could offer significant relief – but many people aren't even asking for help."

- **The surveys show that many individuals delay seeking care for months or even years** – According to the NESTS study, 60% of Europeans with dry eyes waited at least four months before going to their healthcare provider, while 20% waited over a year before consulting a professional about their symptoms. As reported by Science Daily:

"Many sufferers stopped driving at night (17%), no longer wore makeup (14.8%), or reduced their use of heat or air conditioning (15.2%) due to their uncontrolled dry eye symptoms. One in three sufferers (34%) reported that their symptoms had worsened in the past year and only 9% said there had been an improvement."

- **The U.S. respondents were not so different** – Despite 80% saying they experienced dry eye symptoms like fatigue and itchy or watery eyes, the survey found that 67% waited six months or more to consult with an eye specialist, while 31% waited two or more years.
- **One reason for undertreatment is that dry eye presents with subtle and variable symptoms** – You might feel burning or stinging one day and blurry vision the next, making it easy to dismiss the problem as temporary fatigue or allergies. Many people self-treat with over-the-counter drops, but these products are not always matched to the underlying cause – This leads to a cycle of trial and error without meaningful relief, which discourages further action.
- **Another factor is the complexity of dry eye itself** – The condition stems from two primary mechanisms. The first is evaporative dry eye, most commonly due to meibomian gland dysfunction (MGD). When the tiny oil glands along your eyelids become blocked or inflamed, the protective lipid layer of the tear film breaks down, and tears evaporate too quickly.

The second is aqueous-deficient dry eye, where the lacrimal glands fail to produce enough watery tears to keep the eyes moist. In many cases, both processes occur together, creating a mixed presentation that requires more than one type of remedy.³

- **Environmental and lifestyle trends amplify the problem** — Prolonged screen use reduces blink rate, indoor HVAC systems lower humidity, and widespread contact lens wear increases tear instability. Hormonal changes, especially in postmenopausal women, further raise the risk. Medications such as antihistamines, antidepressants, and blood pressure drugs also dry the eyes, yet patients rarely connect these side effects with their eye symptoms.⁴

What Brings Fast Relief for Dry Eyes?

When your eyes feel gritty, sore, or tired, the right daily habits often make the biggest difference. These dry eyes treatment options are simple to apply and can break the cycle of dryness if you stay consistent. Each addresses a specific cause of [dry eye](#), whether it's reduced blinking, poor air quality, or clogged eyelid glands.

- **Have blink breaks and follow the 20-20-20 rule** — Digital devices are one of the strongest triggers for dry eye. The National Eye Institute (NEI) explains that prolonged screen use lowers blink rate, leaving the tear film unstable and prone to evaporation. To counter this, follow the 20-20-20 rule — Every 20 minutes, look at something 20 feet away for 20 seconds, and add three to five full, slow blinks. This resets the tear layer and reduces eye strain.
- **Positioning matters, too** — Keeping screens slightly below eye level also helps reduce tear evaporation, while maintaining at least an arm's length distance prevents fatigue. Adjusting device settings — like increasing text size or using darker backgrounds — reduces the need to squint and stare, both of which worsen dryness.

- **Adjust room humidity and airflow** — Indoor environments often make dryness worse, especially if you're using heating or air conditioning. Low humidity causes tears to evaporate quickly, leaving the eye surface unprotected. Aim to keep indoor humidity between 40% and 50%.
- **Avoid direct airflow blowing into your eyes from car vents, desk fans, or office HVAC systems** — If you can't control airflow in shared spaces, reposition yourself or adjust the vent angle. In winter or in heavily air-conditioned environments, consider using a cool-mist humidifier for dry eyes — it restores balance and provides noticeable relief.
- **Eyelid hygiene** — Your eyelids house the meibomian glands, which secrete oils that keep tears from evaporating too quickly. When these glands are blocked, evaporative dry eye becomes more severe. A once-daily routine will support gland function — massage your lids with clean fingers after a warm shower, then follow with gentle lid wipes or a diluted cleanser designed for eyelid use.

People with greasy, flaky, or inflamed lids benefit most from this routine. Avoid heavy makeup along the lash line, which clogs the glands and worsens irritation. Consistency matters — results typically show after several weeks, not overnight.

Will Using a Warm Compress for Dry Eyes Actually Help?

Warm compresses are considered a first-line remedy for evaporative dry eye caused by MGD. Heat softens the oils in the glands, making them easier to express. This restores a healthy lipid layer to the tear film and slows evaporation.⁵ Follow this simple routine:

The 5-Step Warm Compress Routine

1. **Heat** — Soak a clean washcloth in warm water. Always test the temperature on your wrist to prevent burns.
2. **Apply** — Close your eyes and rest the compress gently on your lids for five to 10 minutes

3. **Massage** — With clean fingers, roll from the top lid downward and the bottom lid upward toward the lash line to help clear blocked glands.
 4. **Cleanse** — Use a cotton pad or wipe to remove any oil or debris along the lid margins.
 5. **Lubricate** — Apply artificial tears right after the compress, when the oils are flowing and the eye surface is primed to retain moisture. (National Eye Institute)
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Artificial Tears vs. Lubricating Drops — How Do You Choose the Right One?

Many people use the terms artificial tears and lubricating drops interchangeably, but there are subtle differences worth noting. Artificial tears are typically designed to mimic natural tears by restoring moisture and stabilizing the tear film, making them the most common first-line product for dry eyes. Lubricating drops, by contrast, are usually formulated to last longer on the eye and may contain thicker or gel-like agents that coat the surface more effectively.

Artificial tears are not all the same, and matching the drop to your symptoms and usage pattern is key to relief. Some products are thin and watery, others are thicker and longer-lasting, and some are designed specifically for people with sensitive eyes or contact lenses. Using the wrong formulation can lead to wasted money and persistent irritation. Here's a guide to help you find the best eye drops for dry eyes:^{6,7,8}

Choosing the Right Artificial Tears

Situation	What to try	Why
Occasional dryness (daytime use)	Low-viscosity preserved drops	Preservatives keep multidose bottles safe from contamination, which is fine when used only a few times per day. Overuse may irritate the eyes.
Frequent use or sensitive eyes	Preservative-free eye drops (single-use vials)	Reduce the risk of preservative-induced irritation or toxicity when drops are used often.
Nighttime dryness	Lubricating ointments or gels	Thicker formulas coat the eye overnight, preventing dryness while you sleep, though they blur vision temporarily.
Contact lens wear	Rewetting drops labeled for contact lenses	Formulated to hydrate safely without damaging lenses or trapping preservatives against the eye.
Evaporative dry eye / MGD pattern	Lipid-containing artificial tears, often paired with warm compresses	Replenish the lipid layer of the tear film and slow evaporation, especially helpful when meibomian gland dysfunction is present.

Can Nutrition and Supplements Help Dry Eye?

Your diet plays a direct role in the quality and stability of your tear film. Tears are made of three distinct layers — oil, water, and mucus — and imbalances in any of these can cause discomfort. By improving the quality of these layers through specific nutrients, you'll be able to reduce the frequency and intensity of dry eye symptoms. Here are some considerations to remember:

- **Boost your omega-3s for dry eyes and other eye-related conditions** — In one study involving more than 32,000 female participants between 45 and 84 years old, those with the lowest ratio of omega-6 to omega-3 (4-to-1 ratio or less) had a significantly lower risk of developing dry eye syndrome. Those with the highest ratio of omega-6 to omega-3 had a significantly higher risk.^{9,10}

Wild-caught fatty fish such as salmon, sardines, and anchovies provide bioavailable omega-3 fats that directly improve tear quality. Krill oil is another option. Krill oil has a unique combination — it not just offers omega-3 fats but is also high in astaxanthin as well.

- **Astaxanthin is also beneficial for eye health** — Astaxanthin, a carotenoid produced by a form of microalgae, offers natural protection against ultraviolet light. It also acts as a powerful antioxidant that protects your eyes against macular degeneration, blindness, and cataracts.¹¹ Astaxanthin also boosts your immune system, decreases biomarkers linked to DNA oxidative damage, and protects against inflammation.¹²

Remember, however, that food-first is always the better strategy; supplements are best reserved for cases where diet alone cannot meet your needs.

- **You can get vitamin A from healthy foods** — This nutrient supports the ocular surface and the health of mucous membranes. Deficiency increases the risk of dry eye, making it important to include foods rich in vitamin A such as grass fed animal liver, pastured eggs, raw dairy, carrots, sweet potatoes, and leafy greens.

- **N-acetyl-cysteine (NAC)** is a **valuable nutrient as well** — A derivative of the amino acid L-cysteine, NAC has antioxidant properties and is widely used to reduce the viscosity (consistency) of secretions in bronchopulmonary disorders.¹³
Ophthalmologists use it to treat corneal abrasions and ulcers, and dry eye.

Nutrition is not a quick fix, but it strengthens the foundation of your ocular health. By consistently supporting your tear film from within, you make every other remedy for dry eye — whether drops, compresses, or medical treatments — far more effective.

When to See an Eye Doctor for Dry Eyes

Most cases of dry eye respond to simple home strategies, but there are clear red flags that signal the need for professional care. The National Eye Institute (NEI) emphasizes that ignoring these warning signs not only prolongs discomfort but may also risk permanent damage to the ocular surface. Seek professional help if you experience any of the following:^{14,15}

- Symptoms persist despite incorporating lifestyle changes
- When using eye drops do not bring any relief
- Pain, such as a burning, scratchy, or stinging sensation, or watery eyes
- When dry eyes are causing problems performing normal activities
- Noticeable vision changes, such as fluctuating vision

Delaying evaluation can worsen the condition. Chronic, untreated dry eye may scar the cornea, increase infection risk, or cause vision changes. An optometrist or ophthalmologist can perform tests — such as measuring tear breakup time, assessing meibomian gland function, or using staining techniques — to identify the root cause and guide treatment.

If any item on the checklist applies, schedule an exam promptly. Addressing the issue early means faster relief, better outcomes, and a lower chance of complications.

Frequently Asked Questions (FAQs) on Dry Eyes Remedies

Q: Do warm compresses actually help dry eyes?

A: Yes. Warm compresses are a first-line treatment for evaporative dry eye caused by meibomian gland dysfunction (MGD). Heat softens the oils in the glands, making it easier to release them and restore a healthy lipid layer in the tear film. This slows evaporation and stabilizes the eye surface. For best results, follow a 5-step routine: heat, apply, massage, cleanse, and lubricate with drops right after. Daily use for 2 to 3 weeks often leads to noticeable improvement.

Q: What's the difference between artificial tears and lubricating drops?

A: Artificial tears are designed to mimic natural tears, replenishing moisture and stabilizing the tear film. They are usually thinner and better for quick daytime relief. Lubricating drops, on the other hand, tend to be thicker and longer-lasting, sometimes even in gel form. These are especially useful at night or for people with severe dryness. Choosing between them depends on when your symptoms occur and how long you need relief.

Q: Are preservative-free drops worth it?

A: Yes, especially if you use drops more than 4 to 6 times a day or if your eyes are sensitive. Preservatives in bottled drops prevent contamination but can irritate the cornea with frequent exposure. Preservative-free single-use vials reduce that risk and are safer for people who rely on drops daily.

Q: What are the best home remedies for dry eyes?

A: Simple daily habits bring the most relief:

- Follow the 20-20-20 rule with regular blink breaks to restore tear film stability.
- Keep indoor humidity around 40% to 50% and avoid air blowing directly on your eyes.
- Practice gentle eyelid hygiene to support meibomian gland function.
- Apply warm compresses to unclog blocked glands.
- Use artificial tears that match your needs (thin, gel, preservative-free, or lipid-enhanced).

These remedies work best when practiced consistently over time.

Q: Can omega-3s and other nutrients help?

A: Yes, nutrition plays a major role in eye health. Omega-3 fats from wild-caught salmon, sardines, and anchovies support tear quality. Studies suggest that lower omega-6 to omega-3 ratios are linked to a lower risk of dry eye syndrome. Vitamin A from liver, pastured eggs, raw dairy, carrots, and leafy greens protects the ocular surface and mucous membranes.

Other supportive nutrients include astaxanthin, a potent antioxidant that guards against UV damage, and N-acetyl-cysteine (NAC), which ophthalmologists sometimes use for corneal healing and dry eye. Food-first is the best approach, with supplements reserved for special cases.

Q: When should I see a doctor for dry eyes?

A: See an optometrist or ophthalmologist if:

- Your symptoms last more than a few weeks despite home remedies.

- Eye drops no longer bring relief.
- You feel pain, a burning or stinging sensation, or have watery eyes that interfere with daily activities.
- You notice vision changes like fluctuating blur.

Ignoring these warning signs risks permanent damage. Chronic dry eye can scar the cornea, increase infection risk, and impair vision. Professional evaluation ensures you get tailored treatment and avoid complications.

Sources and References

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