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## Distichia

### Issue Description

*A distichia is an eyelash that arises from an abnormal spot on the eyelid of a dog. Distichiae usually exit from the duct of the meibomian gland at the eyelid margin. They are usually multiple and sometimes more than one arises from a duct. They can affect either the upper or lower eyelid and are usually bilateral. The lower eyelids of dogs usually have no eyelashes.[1] Distichiae usually cause no symptoms because the lashes are soft, but they can irritate the eye and cause tearing, squinting, inflammation, and corneal ulcers and scarring.*

### Causes

In most dogs, the disorder is related to facial conformation to breed predisposition, or it is idiopathic.

### Symptoms

Eyelids of dogs can grow abnormal hairs. These hairs grow from the oil glands (Meibomian glands) of the lids and are called distichia if the hair protrudes from the oil gland opening onto the edge of the eyelid. Distichia are often irritating, especially if the hairs are long and stiff. Ectopic cilia are also hairs growing from oil glands on the eyelid, but the hair protrudes from the inner surface of the eyelid and is very painful, often causing corneal ulcers.

Dogs with distichiasis may or may not show signs of discomfort, ranging from slight intermittent squinting and/or rubbing of the eyes, to severe squinting and discomfort. Dogs with ectopic cilia are always uncomfortable. Most dogs with ectopic cilia are young adult dogs or older puppies.

An ectopic cilia is a special type of distichia. It is usually found in younger dogs. Commonly affected breeds include Poodles, Golden Retrievers, and Shih Tzus. The eyelash exits through the conjunctiva, usually at the middle of the upper eyelid. It can cause intense pain and corneal ulcers. Treatment is surgery or cryotherapy.

### Treatment

Distichiasis is asymptomatic in most animals, and no treatment is indicated. When symptomatic, distichia can be treated surgically by cryotherapy, electrocautery or electroepilation, or resection from the conjunctival surface. Lid splitting techniques should be avoided because postoperative scarring can predispose to cicatricial entropion and impaired lid function.

Ectopic cilia should be treated surgically with an en-bloc resection of the cilia and associated meibomian gland. Cryotherapy can be used as the sole treatment method or as an adjunct after surgical resection.

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