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# Quantum molecular resonance electrotherapy (Rexon-Eye) for recalcitrant dry eye in an Asian population

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**Objectives:** To assess the safety, efficacy, patients' satisfaction and acceptability of Rexon-Eye electrotherapy in treating Asian severe dry eye disease (DED) patients.

**Methods:** Prospective parallel-arm pilot study recruiting 40 DED Chinese patients with >moderate recalcitrant DED (Contact Lens Research Unit [CCLRU] > grade 2). Subjects were randomized into 2 groups, undergoing four weekly treatment sessions each: group 1 received full treatment power; group 2 received control treatment (power 1 treatment). Non-invasive tear break-up time (NIBUT), cornea fluorescein staining graded via CCLRU and Schirmer's I test were compared pre- and 2 months post-treatment. The SPEED and QUEST questionnaires that evaluated subjective symptoms and treatment satisfaction, respectively, at baseline and 2 weeks post-treatment were carried out. Tear cytokine levels in both groups were examined at 2 weeks post-treatment.

**Results:** The amount of improvement in post-treatment corneal staining in the inferior corneal zone was significant in Group 1 ( $p = 0.038$ ) but not in Group 2 ( $p = 0.832$ ). Group 1 eyes with worse baseline staining (total score >9.8) had a significantly greater reduction of corneal staining than those with better baseline staining ( $-11.7 \pm 1.98$  vs.  $-4.6 \pm 2.89$ ,  $p < 0.001$ ). There were no other significant differences in NIBUT, Schirmer's 1 and cornea fluorescein staining grading within or between the groups.: Group 1 ( $n = 24$ ) had improved subjective dryness scores compared to Group 2 ( $n = 16$ ) (SPEED score:  $6.38 + 4.16$  vs.  $10.0 + 6.36$ ,  $p = 0.04$ ). No significant differences were seen in 11 tear cytokine levels at 2 weeks post-treatment between the 2 groups.

**Conclusion:** In Asian DED patients treated with Rexon-Eye, inferior cornea staining showed significant improvement compared to placebo, and eyes with greater cornea staining at baseline achieved a greater improvement in staining. There were no other significant improvements in NIBUT and Schirmer's 1. Rexon-Eye also improved subjective DED scores in 41.7% of eyes without any adverse effects.

## KEYWORDS

tear disorder, ocular disease, dry eye, therapeutics, clinical trial