Supplementary Online Content

Saldanha IJ, Petris R, Han G, Dickersin K, Akpek EK. Research questions and outcomes prioritized by patients with dry eye. *JAMA Ophthalmol*. Published online August 16, 2018. doi:10.1001/jamaophthalmol.2018.3352

eAppendix 1. Steps of Our Study Identifying and Prioritizing Research Questions and Outcomes for Dry Eye From the Patient Perspective

eAppendix 2. Sample View of Survey Portion Pertaining to 1 of the 12 Research Questions Presented to Patients for Rating in Round 1 of the Delphi Survey in Qualtrics **eAppendix 3.** Sample View of Survey Portion Pertaining to 1 of the 18 Outcomes Presented to Patients for Rating in Round 1 of the Delphi Survey in Qualtrics **eAppendix 4.** References to All 158 studies Identified as Existing Research for Dry Eye (ie, Systematic Reviews, Published Clinical Trials, and Trials Registered on ClinicalTrials.gov)

eAppendix 5. All 109 Unique Outcome Domains Examined in Existing Research Addressing Interventions for Dry Eye (ie, Systematic Reviews, Clinical Trials Included in the Systematic Reviews, and National Eye Institute [NEI]-Funded Trials Registered on ClinicalTrials.gov)

eAppendix 6. Number of Studies in Existing Research Addressing Interventions for Dry Eye (ie, Systematic Reviews, Clinical Trials Included in the Systematic Reviews, and National Eye Institute (NEI)-Funded Trials Registered on ClinicalTrials.gov) That Examined Each of the 28 Outcomes Rated by 420 Patients in Round 2 of the Delphi Survey

eAppendix 7. Comparison of Ratings of Importance of Outcomes in Rounds 1 and 2 of the Delphi Survey

This supplementary material has been provided by the authors to give readers additional information about their work.

eAppendix 1. Steps of Our Study Identifying and Prioritizing Research Questions and Outcomes for Dry Eye From the Patient Perspective

Step 1: Selecting research questions to be prioritized by patients

In a prior study, we translated all clinical recommendations from the 2013 American Academy of Ophthalmology (AAO) Preferred Practice Patterns (PPP) on dry eye tinto answerable questions. We then conducted a two-round survey of clinicians managing patients with dry eye, identifying 24 important questions. We selected the 12 most important questions for rating by patients in the current study.

Step 2: Selecting outcomes to be prioritized by patients

We identified the 109 unique outcomes examined in the 20 systematic reviews, 134 published clinical trials, and four National Eye Institute (NEI)-funded trials registered on ClinicalTrials.gov addressing dry eye. We determined whether each outcome was "popular" (i.e., ≥10% of studies examined it; n=18 outcomes) or "unpopular" (i.e., <10% of studies examined it; 91 outcomes) in existing research.

Step 3: Identifying survey participants (patients with dry eye)

We identified subscribers to *KeratoScoop* (R.P.'s weekly newsletter) as appropriate recipients of the two-round Delphi survey. We restricted participation in this study to subscribers who were current or former patients or caregivers of patients with dry eye.

Step 4: Delphi Round 1

We asked patients to assign the 12 research questions and 18 popular outcomes an importance rating of 0 (low) to 10 (high) in Round 1. We also asked patients to indicate whether they considered any of the 91 unpopular outcomes was important. Round 1 of the survey was completed by 622 patients.

Step 5: Delphi Round 2

We asked patients to re-rate the importance of each of the 18 popular outcomes, this time after reviewing the distribution of ratings and anonymized comments by their peers from Round 1. We also asked for specific ratings of importance of the top-10 unpopular outcomes. Round 2 of the survey was completed by 420 patients.

Step 6: Designating and ranking important research questions and outcomes

We considered a given question/outcome to be "important" if \geq 75% of all patients assigned a rating of 6 or greater. We considered a given question/outcome to be "moderately important" if \geq 75% of all patients assigned a rating of 5 or greater. For questions, we analyzed the Round 1 ratings as final, and for outcomes, we analyzed the Round 2 ratings as final.

We identified eight questions and 26 outcomes as important to patients with dry eye.

^{*} Saldanha IJ, Dickersin K, Hutfless ST, Akpek EK. Gaps in current knowledge and priorities for future research in dry eye. *Cornea* 2017;36(12):1584-1591.

^{**} American Academy of Ophthalmology Cornea/External Disease Panel. Preferred Practice Pattern® Guidelines. Dry Eye Syndrome. San Francisco, CA: American Academy of Ophthalmology; 2013. Available at: www.aao.org/ppp. Last accessed May 9, 2018.

eAppendix 2. Sample View of Survey Portion Pertaining to 1 of the 12 Research Questions Presented to Patients for Rating in Round 1 of the Delphi Survey in Qualtrics

For each of the 12 questions, we asked patients to "rate the importance of having an answer from research" for that question. Responses were analyzed using an 11-point Likert-type scale from 0 ("Not important at all") to 10 ("Highly important"). For each question, patients could elect to not provide a rating by selecting "No judgement".

	On a scale of 0-10, please rate the importance of having an answer from research for the following research question.											
Research patients v				. Are	environme	ntal	modifi	cation	s effe	ective in t	reating	
Note: Examples of environmental modifications include: (1) use of moisture chamber glasses/sunglasses, and (2) reduction of air drafts and low-humidity environments.												
Not important at all (0)	1	2	3	4	Moderately important (5)	6	7	8	9	Highly important (10)	No udgement	
0	0	0	0	0	0	0	0	0	0	0	0	
Comment or	n the a	ibove re	search	quest	ion. (Optional)						

Appendix 3. Sample View of Survey Portion Pertaining to 1 of the 18 Outcomes Presented to Patients for Rating in Round 1 of the Delphi Survey in Qualtrics

For each of the 18 outcomes, we asked patients how "important" the outcome was to them. Responses were analyzed using an 11-point Likert-type scale from 0 ("Not important at all") to 10 ("Highly important"). For each question, patients could elect to not provide a rating by selecting "No judgement". We also asked patients about when they would like the outcome to be measured if they were participating in a hypothetical clinical trial for a new treatment for dry eye.

Outcome 2 of 18: Burning/stinging of the eye											
On a scale	of 0-10	, how <u>in</u>	nportan	t is thi	s outcome to	you?					
Not important at all (0)	1	2	3	4	Moderately important (5)	6	7	8	9	Highly important (10)	. No judgement
0	0	0	0	0	0	0	0	0	0	0	0
If you were to participate in a clinical study testing a new treatment for dry eye, and if the above outcome were being measured in you in the study, when would you like the outcome to be measured? (Select all that apply) Fewer than 3 months after the test treatment begins 3-6 months after the test treatment begins 7-12 months after the test treatment begins More than 12 months after the test treatment begins All of the above None of the above because I answered "Not important at all (0)" or "No judgement" to the previous question.											
The state of the s					he above out			ommen	t may	pertain to it	es .

eAppendix 4. References to All 158 studies Identified as Existing Research for Dry Eye (ie, Systematic Reviews, Published Clinical Trials, and Trials Registered on ClinicalTrials.gov)

Systematic reviews (N=20)

- 1. Doughty MJ, Glavin S. Efficacy of different dry eye treatments with artificial tears or ocular lubricants: a systematic review. Ophthalmic & physiological optics: the journal of the British College of Ophthalmic Opticians (Optometrists). 2009;29(6):573-83.
- 2. Ervin AM, Wojciechowski R, Schein O. Punctal occlusion for dry eye syndrome. The Cochrane database of systematic reviews. 2010(9):Cd006775.
- 3. Ramos-Casals M, Tzioufas AG, Stone JH, Siso A, Bosch X. Treatment of primary Sjogren syndrome: a systematic review. Jama. 2010;304(4):452-60.
- 4. Akpek EK, Lindsley KB, Adyanthaya RS, Swamy R, Baer AN, McDonnell PJ. Treatment of Sjogren's syndrome-associated dry eye an evidence-based review. Ophthalmology. 2011;118(7):1242-52.
- 5. Lee MS, Shin BC, Choi TY, Ernst E. Acupuncture for treating dry eye: a systematic review. Acta ophthalmologica. 2011;89(2):101-6.
- 6. Feng Y, Yu J, J. S, Wang Q. Meta-analysis of randomized controlled clinical trial in the effect of hinge location on dry eye syndrome after LASIK. Chin J Exp Ophthalmol. 2012;30(9):847-52.
- 7. Lee SY, Tong L. Lipid-containing lubricants for dry eye: a systematic review. Optometry and vision science: official publication of the American Academy of Optometry. 2012;89(11):1654-61.
- 8. Luo H, Li X, Liu J, Andrew F, George L. Chinese Herbal Medicine in Treating Primary Sjogren's Syndrome: A Systematic Review of Randomized Trials. Evidence-based complementary and alternative medicine: eCAM. 2012;2012:640658.
- 9. Alves M, Fonseca EC, Alves MF, Malki LT, Arruda GV, Reinach PS, et al. Dry eye disease treatment: a systematic review of published trials and a critical appraisal of therapeutic strategies. The ocular surface. 2013;11(3):181-92.
- 10. Doughty MJ. Fluorescein-tear breakup time as an assessment of efficacy of tear replacement therapy in dry eye patients: a systematic review and meta-analysis. The ocular surface. 2014;12(2):100-11.
- 11. Liu A, Ji J. Omega-3 essential fatty acids therapy for dry eye syndrome: a meta-analysis of randomized controlled studies. Medical science monitor: international medical journal of experimental and clinical research. 2014;20:1583-9.
- 12. Sacchetti M, Mantelli F, Lambiase A, Mastropasqua A, Merlo D, Bonini S. Systematic review of randomised clinical trials on topical ciclosporin A for the treatment of dry eye disease. The British journal of ophthalmology. 2014;98(8):1016-22.
- 13. Zhou XQ, Wei RL. Topical cyclosporine A in the treatment of dry eye: a systematic review and metaanalysis. Cornea. 2014;33(7):760-7.
- 14. Zhu W, Wu Y, Li G, Wang J, Li X. Efficacy of polyunsaturated fatty acids for dry eye syndrome: a meta-analysis of randomized controlled trials. Nutrition reviews. 2014;72(10):662-71.
- 15. Martins AC, Rosa AM, Costa E, Tavares C, Quadrado MJ, Murta JN. Ocular Manifestations and Therapeutic Options in Patients with Familial Amyloid Polyneuropathy: A Systematic Review. BioMed research international. 2015;2015:282405.
- 16. Wan KH, Chen LJ, Young AL. Efficacy and Safety of Topical 0.05% Cyclosporine Eye Drops in the Treatment of Dry Eye Syndrome: A Systematic Review and Meta-analysis. The ocular surface. 2015;13(3):213-25.
- 17. Wu D, Chen WQ, Li R, Wang Y. Efficacy and safety of topical diquafosol ophthalmic solution for treatment of dry eye: a systematic review of randomized clinical trials. Cornea. 2015;34(6):644-50.
- 18. Pucker AD, Ng SM, Nichols JJ. Over the counter (OTC) artificial tear drops for dry eye syndrome. The Cochrane database of systematic reviews. 2016;2:Cd009729.
- 19. Pan Q, Angelina A, Marrone M, Stark WJ, Akpek EK. Autologous serum eye drops for dry eye. The Cochrane database of systematic reviews. 2017;2:Cd009327.
- 20. Kim BH, Kim MH, Kang SH, Nam HJ. Optimizing acupuncture treatment for dry eye syndrome: a

systematic review. BMC complementary and alternative medicine. 2018;18(1):145.

Published clinical trials (N=134)

- 1. Fox RI, Chan R, Michelson JB, Belmont JB, Michelson PE. Beneficial effect of artificial tears made with autologous serum in patients with keratoconjunctivitis sicca. Arthritis and rheumatism. 1984;27(4):459-61.
- 2. Drosos AA, Skopouli FN, Costopoulos JS, Papadimitriou CS, Moutsopoulos HM. Cyclosporin A (CyA) in primary Sjogren's syndrome: a double blind study. Annals of the rheumatic diseases. 1986;45(9):732-5.
- 3. Nelson JD, Farris RL. Sodium hyaluronate and polyvinyl alcohol artificial tear preparations. A comparison in patients with keratoconjunctivitis sicca. Archives of ophthalmology (Chicago, Ill: 1960). 1988;106(4):484-7.
- 4. Gobbels M, Spitznas M. Effects of artificial tears on corneal epithelial permeability in dry eyes. Graefe's archive for clinical and experimental ophthalmology = Albrecht von Graefes Archiv fur klinische und experimentelle Ophthalmologie. 1991;229(4):345-9.
- 5. Grene RB, Lankston P, Mordaunt J, Harrold M, Gwon A, Jones R. Unpreserved carboxymethylcellulose artificial tears evaluated in patients with keratoconjunctivitis sicca. Cornea. 1992;11(4):294-301.
- 6. Kruize AA, Hene RJ, Kallenberg CG, van Bijsterveld OP, van der Heide A, Kater L, et al. Hydroxychloroquine treatment for primary Sjogren's syndrome: a two year double blind crossover trial. Annals of the rheumatic diseases. 1993;52(5):360-4.
- 7. Laibovitz RA, Solch S, Andriano K, O'Connell M, Silverman MH. Pilot trial of cyclosporine 1% ophthalmic ointment in the treatment of keratoconjunctivitis sicca. Cornea. 1993;12(4):315-23.
- 8. Gunduz K, Ozdemir O. Topical cyclosporin treatment of keratoconjunctivitis sicca in secondary Sjogren's syndrome. Acta ophthalmologica. 1994;72(4):438-42.
- 9. Marner K, Mooller PM, Dillon M, Rask-Pedersen E. Viscous carbomer eye drops in patients with dry eyes. Efficacy and safety. A randomized, open, cross-over, multicentre study. Acta ophthalmologica Scandinavica. 1996;74(3):249-52.
- 10. Brodwall J, Alme G, Gedde-Dahl S, Smith J, Lilliedahl NP, Kunz PA, et al. A comparative study of polyacrylic acid (Viscotears) liquid gel versus polyvinylalcohol in the treatment of dry eyes. Acta ophthalmologica Scandinavica. 1997;75(4):457-61.
- 11. Sullivan LJ, McCurrach F, Lee S, Taylor HR, Rolando M, Marechal-Courtois C, et al. Efficacy and safety of 0.3% carbomer gel compared to placebo in patients with moderate-to-severe dry eye syndrome. Ophthalmology. 1997;104(9):1402-8.
- 12. Bron AJ, Daubas P, Siou-Mermet R, Trinquand C. Comparison of the efficacy and safety of two eye gels in the treatment of dry eyes: Lacrinorm and Viscotears. Eye (London, England). 1998;12 (Pt 5):839-47.
- 13. Bron AJ, Mangat H, Quinlan M, Foley-Nolan A, Eustace P, Fsadni M, et al. Polyacrylic acid gel in patients with dry eyes: a randomised comparison with polyvinyl alcohol. European journal of ophthalmology. 1998;8(2):81-9.
- 14. Donshik PC, Nelson JD, Abelson M, McCulley JP, Beasley C, Laibovitz RA. Effectiveness of BION tears, Cellufresh, Aquasite, and Refresh Plus for moderate to severe dry eye. Advances in experimental medicine and biology. 1998;438:753-60.
- 15. Nepp J, Wedrich A, Akramian J, Derbolav A, Mudrich C, Ries E, et al. Dry eye treatment with acupuncture. A prospective, randomized, double-masked study. Advances in experimental medicine and biology. 1998;438:1011-6.
- 16. Shiozawa S, Tanaka Y, Shiozawa K. Single-blinded controlled trial of low-dose oral IFN-alpha for the treatment of xerostomia in patients with Sjogren's syndrome. Journal of interferon & cytokine research: the official journal of the International Society for Interferon and Cytokine Research.

- 1998;18(4):255-62.
- 17. Vivino FB, Al-Hashimi I, Khan Z, LeVeque FG, Salisbury PL, 3rd, Tran-Johnson TK, et al. Pilocarpine tablets for the treatment of dry mouth and dry eye symptoms in patients with Sjogren syndrome: a randomized, placebo-controlled, fixed-dose, multicenter trial. P92-01 Study Group. Archives of internal medicine. 1999;159(2):174-81.
- 18. Avisar R, Robinson A, Appel I, Yassur Y, Weinberger D. Diclofenac sodium, 0.1% (Voltaren Ophtha), versus sodium chloride, 5%, in the treatment of filamentary keratitis. Cornea. 2000;19(2):145-7.
- 19. lester M, Orsoni GJ, Gamba G, Taffara M, Mangiafico P, Giuffrida S, et al. Improvement of the ocular surface using hypotonic 0.4% hyaluronic acid drops in keratoconjunctivitis sicca. Eye (London, England). 2000;14(Pt 6):892-8.
- 20. Sall K, Stevenson OD, Mundorf TK, Reis BL. Two multicenter, randomized studies of the efficacy and safety of cyclosporine ophthalmic emulsion in moderate to severe dry eye disease. CsA Phase 3 Study Group. Ophthalmology. 2000;107(4):631-9.
- 21. Stevenson D, Tauber J, Reis BL. Efficacy and safety of cyclosporin A ophthalmic emulsion in the treatment of moderate-to-severe dry eye disease: a dose-ranging, randomized trial. The Cyclosporin A Phase 2 Study Group. Ophthalmology. 2000;107(5):967-74.
- 22. Nepp J, Schauersberger J, Schild G, Jandrasits K, Haslinger-Akramian J, Derbolav A, et al. The clinical use of viscoelastic artificial tears and sodium chloride in dry-eye syndrome. Biomaterials. 2001;22(24):3305-10.
- 23. Tananuvat N, Daniell M, Sullivan LJ, Yi Q, McKelvie P, McCarty DJ, et al. Controlled study of the use of autologous serum in dry eye patients. Cornea. 2001;20(8):802-6.
- 24. Aragona P, Papa V, Micali A, Santocono M, Milazzo G. Long term treatment with sodium hyaluronate-containing artificial tears reduces ocular surface damage in patients with dry eye. The British journal of ophthalmology. 2002;86(2):181-4.
- 25. Fife RS, Chase WF, Dore RK, Wiesenhutter CW, Lockhart PB, Tindall E, et al. Cevimeline for the treatment of xerostomia in patients with Sjogren syndrome: a randomized trial. Archives of internal medicine. 2002;162(11):1293-300.
- 26. Goto E, Shimazaki J, Monden Y, Takano Y, Yagi Y, Shimmura S, et al. Low-concentration homogenized castor oil eye drops for noninflamed obstructive meibomian gland dysfunction. Ophthalmology. 2002;109(11):2030-5.
- 27. McDonald CC, Kaye SB, Figueiredo FC, Macintosh G, Lockett C. A randomised, crossover, multicentre study to compare the performance of 0.1% (w/v) sodium hyaluronate with 1.4% (w/v) polyvinyl alcohol in the alleviation of symptoms associated with dry eye syndrome. Eye (London, England). 2002;16(5):601-7.
- 28. Petrone D, Condemi JJ, Fife R, Gluck O, Cohen S, Dalgin P. A double-blind, randomized, placebo-controlled study of cevimeline in Sjogren's syndrome patients with xerostomia and keratoconjunctivitis sicca. Arthritis and rheumatism. 2002;46(3):748-54.
- 29. Theander E, Horrobin DF, Jacobsson LT, Manthorpe R. Gammalinolenic acid treatment of fatigue associated with primary Sjogren's syndrome. Scandinavian journal of rheumatology. 2002;31(2):72-9.
- 30. Avunduk AM, Avunduk MC, Varnell ED, Kaufman HE. The comparison of efficacies of topical corticosteroids and nonsteroidal anti-inflammatory drops on dry eye patients: a clinical and immunocytochemical study. American journal of ophthalmology. 2003;136(4):593-602.
- 31. Barabino S, Rolando M, Camicione P, Ravera G, Zanardi S, Giuffrida S, et al. Systemic linoleic and gamma-linolenic acid therapy in dry eye syndrome with an inflammatory component. Cornea. 2003;22(2):97-101.
- 32. Cummins MJ, Papas A, Kammer GM, Fox PC. Treatment of primary Sjogren's syndrome with low-dose human interferon alfa administered by the oromucosal route: combined phase III results. Arthritis and rheumatism. 2003;49(4):585-93.
- 33. Farrell J, Patel S, Grierson DG, Sturrock RD. A clinical procedure to predict the value of temporary occlusion therapy in keratoconjunctivitis sicca. Ophthalmic & physiological optics: the journal of the British College of Ophthalmic Opticians (Optometrists). 2003;23(1):1-8.

- 34. Khurshudian AV. A pilot study to test the efficacy of oral administration of interferon-alpha lozenges to patients with Sjogren's syndrome. Oral surgery, oral medicine, oral pathology, oral radiology, and endodontics. 2003;95(1):38-44.
- 35. Nava-Castaneda A, Tovilla-Canales JL, Rodriguez L, Tovilla YPJL, Jones CE. Effects of lacrimal occlusion with collagen and silicone plugs on patients with conjunctivitis associated with dry eye. Cornea. 2003;22(1):10-4.
- 36. Tsifetaki N, Kitsos G, Paschides CA, Alamanos Y, Eftaxias V, Voulgari PV, et al. Oral pilocarpine for the treatment of ocular symptoms in patients with Sjogren's syndrome: a randomised 12 week controlled study. Annals of the rheumatic diseases. 2003;62(12):1204-7.
- 37. Christensen MT, Cohen S, Rinehart J, Akers F, Pemberton B, Bloomenstein M, et al. Clinical evaluation of an HP-guar gellable lubricant eye drop for the relief of dryness of the eye. Current eye research. 2004;28(1):55-62.
- 38. Di Pascuale MA, Goto E, Tseng SC. Sequential changes of lipid tear film after the instillation of a single drop of a new emulsion eye drop in dry eye patients. Ophthalmology. 2004;111(4):783-91.
- 39. Gronlund MA, Stenevi U, Lundeberg T. Acupuncture treatment in patients with keratoconjunctivitis sicca: a pilot study. Acta ophthalmologica Scandinavica. 2004;82(3 Pt 1):283-90.
- 40. Lee S, Dausch S, Maierhofer G, Dausch D. [A new therapy concept for the treatment of dry eye--the usefulness of phospholipid liposomes]. Klinische Monatsblatter fur Augenheilkunde. 2004;221(10):825-36.
- 41. Mariette X, Ravaud P, Steinfeld S, Baron G, Goetz J, Hachulla E, et al. Inefficacy of infliximab in primary Sjogren's syndrome: results of the randomized, controlled Trial of Remicade in Primary Sjogren's Syndrome (TRIPSS). Arthritis and rheumatism. 2004;50(4):1270-6.
- 42. Noble BA, Loh RS, MacLennan S, Pesudovs K, Reynolds A, Bridges LR, et al. Comparison of autologous serum eye drops with conventional therapy in a randomised controlled crossover trial for ocular surface disease. The British journal of ophthalmology. 2004;88(5):647-52.
- 43. Ono M, Takamura E, Shinozaki K, Tsumura T, Hamano T, Yagi Y, et al. Therapeutic effect of cevimeline on dry eye in patients with Sjogren's syndrome: a randomized, double-blind clinical study. American journal of ophthalmology. 2004;138(1):6-17.
- 44. Papas AS, Sherrer YS, Charney M, Golden HE, Medsger TA, Jr., Walsh BT, et al. Successful Treatment of Dry Mouth and Dry Eye Symptoms in Sjogren's Syndrome Patients With Oral Pilocarpine: A Randomized, Placebo-Controlled, Dose-Adjustment Study. Journal of clinical rheumatology: practical reports on rheumatic & musculoskeletal diseases. 2004;10(4):169-77.
- 45. Pflugfelder SC, Maskin SL, Anderson B, Chodosh J, Holland EJ, De Paiva CS, et al. A randomized, double-masked, placebo-controlled, multicenter comparison of loteprednol etabonate ophthalmic suspension, 0.5%, and placebo for treatment of keratoconjunctivitis sicca in patients with delayed tear clearance. American journal of ophthalmology. 2004;138(3):444-57.
- 46. Pillemer SR, Leakan RA, Sankar V, Manny J, Baum BJ, Smith J, et al. Prominent adverse effects of thalidomide in primary Sjogren's syndrome. Arthritis and rheumatism. 2004;51(3):505-6.
- 47. Sankar V, Brennan MT, Kok MR, Leakan RA, Smith JA, Manny J, et al. Etanercept in Sjogren's syndrome: a twelve-week randomized, double-blind, placebo-controlled pilot clinical trial. Arthritis and rheumatism. 2004;50(7):2240-5.
- 48. Tauber J, Davitt WF, Bokosky JE, Nichols KK, Yerxa BR, Schaberg AE, et al. Double-masked, placebocontrolled safety and efficacy trial of diquafosol tetrasodium (INS365) ophthalmic solution for the treatment of dry eye. Cornea. 2004;23(8):784-92.
- 49. Zandbelt MM, de Wilde P, van Damme P, Hoyng CB, van de Putte L, van den Hoogen F. Etanercept in the treatment of patients with primary Sjogren's syndrome: a pilot study. The Journal of rheumatology. 2004;31(1):96-101.
- 50. Altan-Yaycioglu R, Gencoglu EA, Akova YA, Dursun D, Cengiz F, Akman A. Silicone versus collagen plugs for treating dry eye: results of a prospective randomized trial including lacrimal scintigraphy. American journal of ophthalmology. 2005;140(1):88-93.
- 51. Aragona P, Bucolo C, Spinella R, Giuffrida S, Ferreri G. Systemic omega-6 essential fatty acid treatment and pge1 tear content in Sjogren's syndrome patients. Investigative ophthalmology &

- visual science. 2005;46(12):4474-9.
- 52. Aragona P, Stilo A, Ferreri F, Mobrici M. Effects of the topical treatment with NSAIDs on corneal sensitivity and ocular surface of Sjogren's syndrome patients. Eye (London, England). 2005;19(5):535-9.
- 53. Barber LD, Pflugfelder SC, Tauber J, Foulks GN. Phase III safety evaluation of cyclosporine 0.1% ophthalmic emulsion administered twice daily to dry eye disease patients for up to 3 years. Ophthalmology. 2005;112(10):1790-4.
- 54. Brignole F, Pisella PJ, Dupas B, Baeyens V, Baudouin C. Efficacy and safety of 0.18% sodium hyaluronate in patients with moderate dry eye syndrome and superficial keratitis. Graefe's archive for clinical and experimental ophthalmology = Albrecht von Graefes Archiv fur klinische und experimentelle Ophthalmologie. 2005;243(6):531-8.
- 55. Gescuk B, Wu AJ, Whitcher JP, Daniels TE, Lund S, Fye K, et al. Lamivudine is not effective in primary Sjogren's syndrome. Annals of the rheumatic diseases. 2005;64(9):1326-30.
- 56. Kojima T, Ishida R, Dogru M, Goto E, Matsumoto Y, Kaido M, et al. The effect of autologous serum eyedrops in the treatment of severe dry eye disease: a prospective randomized case-control study. American journal of ophthalmology. 2005;139(2):242-6.
- 57. Wang ZL, He HQ, Huang D, Shi CG. [Effect of integral syndrome differentiation acupuncture on the tear film stability in the patient of xerophthalmia]. Zhongguo zhen jiu = Chinese acupuncture & moxibustion. 2005;25(7):460-3.
- 58. Creuzot C, Passemard M, Viau S, Joffre C, Pouliquen P, Elena PP, et al. [Improvement of dry eye symptoms with polyunsaturated fatty acids]. Journal francais d'ophtalmologie. 2006;29(8):868-73.
- 59. Noda-Tsuruya T, Asano-Kato N, Toda I, Tsubota K. Autologous serum eye drops for dry eye after LASIK. Journal of refractive surgery (Thorofare, NJ: 1995). 2006;22(1):61-6.
- 60. Perry HD, Doshi-Carnevale S, Donnenfeld ED, Solomon R, Biser SA, Bloom AH. Efficacy of commercially available topical cyclosporine A 0.05% in the treatment of meibomian gland dysfunction. Cornea. 2006;25(2):171-5.
- 61. Salib GM, McDonald MB, Smolek M. Safety and efficacy of cyclosporine 0.05% drops versus unpreserved artificial tears in dry-eye patients having laser in situ keratomileusis. Journal of cataract and refractive surgery. 2006;32(5):772-8.
- 62. Sall KN, Cohen SM, Christensen MT, Stein JM. An evaluation of the efficacy of a cyclosporine-based dry eye therapy when used with marketed artificial tears as supportive therapy in dry eye. Eye & contact lens. 2006;32(1):21-6.
- Tseng KL, Liu HJ, Tso KY, Woung LC, Su YC, Lin JG. A clinical study of acupuncture and SSP (silver spike point) electro-therapy for dry eye syndrome. The American journal of Chinese medicine. 2006;34(2):197-206.
- 64. Wu CH, Hsieh SC, Lee KL, Li KJ, Lu MC, Yu CL. Pilocarpine hydrochloride for the treatment of xerostomia in patients with Sjogren's syndrome in Taiwan--a double-blind, placebo-controlled trial. Journal of the Formosan Medical Association = Taiwan yi zhi. 2006;105(10):796-803.
- 65. Khanal S, Tomlinson A, Pearce EI, Simmons PA. Effect of an oil-in-water emulsion on the tear physiology of patients with mild to moderate dry eye. Cornea. 2007;26(2):175-81.
- 66. Mansour K, Leonhardt CJ, Kalk WW, Bootsma H, Bruin KJ, Blanksma LJ. Lacrimal punctum occlusion in the treatment of severe keratoconjunctivitis Sicca caused by Sjogren syndrome: a uniocular evaluation. Cornea. 2007;26(2):147-50.
- 67. Moon JW, Lee HJ, Shin KC, Wee WR, Lee JH, Kim MK. Short term effects of topical cyclosporine and viscoelastic on the ocular surfaces in patients with dry eye. Korean journal of ophthalmology: KJO. 2007;21(4):189-94.
- 68. Pinheiro MN, Jr., dos Santos PM, dos Santos RC, Barros Jde N, Passos LF, Cardoso Neto J. [Oral flaxseed oil (Linum usitatissimum) in the treatment for dry-eye Sjogren's syndrome patients]. Arquivos brasileiros de oftalmologia. 2007;70(4):649-55.
- 69. Roberts CW, Carniglia PE, Brazzo BG. Comparison of topical cyclosporine, punctal occlusion, and a combination for the treatment of dry eye. Cornea. 2007;26(7):805-9.
- 70. Seitsalo H, Niemela RK, Marinescu-Gava M, Vuotila T, Tjaderhane L, Salo T. Effectiveness of low-dose

- doxycycline (LDD) on clinical symptoms of Sjogren's syndrome: a randomized, double-blind, placebo controlled cross-over study. Journal of negative results in biomedicine. 2007;6:11.
- 71. Simmons PA, Vehige JG. Clinical performance of a mid-viscosity artificial tear for dry eye treatment. Cornea. 2007;26(3):294-302.
- 72. Yoon KC, Heo H, Im SK, You IC, Kim YH, Park YG. Comparison of autologous serum and umbilical cord serum eye drops for dry eye syndrome. American journal of ophthalmology. 2007;144(1):86-92.
- 73. Burgess PI, Koay P, Clark P. SmartPlug versus silicone punctal plug therapy for dry eye: a prospective randomized trial. Cornea. 2008;27(4):391-4.
- 74. Christensen MT. Corneal staining reductions observed after treatment with Systane Lubricant Eye Drops. Advances in therapy. 2008;25(11):1191-9.
- 75. Dass S, Bowman SJ, Vital EM, Ikeda K, Pease CT, Hamburger J, et al. Reduction of fatigue in Sjogren syndrome with rituximab: results of a randomised, double-blind, placebo-controlled pilot study. Annals of the rheumatic diseases. 2008;67(11):1541-4.
- 76. Hartkamp A, Geenen R, Godaert GL, Bootsma H, Kruize AA, Bijlsma JW, et al. Effect of dehydroepiandrosterone administration on fatigue, well-being, and functioning in women with primary Sjogren syndrome: a randomised controlled trial. Annals of the rheumatic diseases. 2008;67(1):91-7.
- 77. Johnson ME, Murphy PJ, Boulton M. Carbomer and sodium hyaluronate eyedrops for moderate dry eye treatment. Optometry and vision science: official publication of the American Academy of Optometry. 2008;85(8):750-7.
- 78. Kokke KH, Morris JA, Lawrenson JG. Oral omega-6 essential fatty acid treatment in contact lens associated dry eye. Contact lens & anterior eye: the journal of the British Contact Lens Association. 2008;31(3):141-6; quiz 70.
- 79. Leung KC, McMillan AS, Wong MC, Leung WK, Mok MY, Lau CS. The efficacy of cevimeline hydrochloride in the treatment of xerostomia in Sjogren's syndrome in southern Chinese patients: a randomised double-blind, placebo-controlled crossover study. Clinical rheumatology. 2008;27(4):429-36.
- 80. Willen CM, McGwin G, Liu B, Owsley C, Rosenstiel C. Efficacy of cyclosporine 0.05% ophthalmic emulsion in contact lens wearers with dry eyes. Eye & contact lens. 2008;34(1):43-5.
- 81. Xiao Q, Hu Y, Chen F, Chen X. A comparative assessment of the efficacy of carbomer gel and carboxymethyl cellulose containing artificial tears in dry eyes. Journal of Huazhong University of Science and Technology Medical sciences = Huazhong ke ji da xue xue bao Yi xue Ying De wen ban = Huazhong keji daxue xuebao Yixue Yingdewen ban. 2008;28(5):592-5.
- 82. Dumbleton K, Woods C, Fonn D. An investigation of the efficacy of a novel ocular lubricant. Eye & contact lens. 2009;35(3):149-55.
- 83. Forsblad-d'Elia H, Carlsten H, Labrie F, Konttinen YT, Ohlsson C. Low serum levels of sex steroids are associated with disease characteristics in primary Sjogren's syndrome; supplementation with dehydroepiandrosterone restores the concentrations. The Journal of clinical endocrinology and metabolism. 2009;94(6):2044-51.
- 84. Guzey M, Karaman SK, Satici A, Ozardali I, Sezer S, Bozkurt O. Efficacy of topical cyclosporine A in the treatment of severe trachomatous dry eye. Clinical & experimental ophthalmology. 2009;37(6):541-9.
- 85. Kim EC, Choi JS, Joo CK. A comparison of vitamin a and cyclosporine a 0.05% eye drops for treatment of dry eye syndrome. American journal of ophthalmology. 2009;147(2):206-13.e3.
- 86. Sugai S, Takahashi H, Ohta S, Nishinarita M, Takei M, Sawada S, et al. Efficacy and safety of rebamipide for the treatment of dry mouth symptoms in patients with Sjogren's syndrome: a double-blind placebo-controlled multicenter trial. Modern rheumatology. 2009;19(2):114-24.
- 87. Altiparmak UE, Acar DE, Ozer PA, Emec SD, Kasim R, Ustun H, et al. Topical cyclosporine A for the dry eye findings of thyroid orbitopathy patients. Eye (London, England). 2010;24(6):1044-50.
- 88. Baiza-Duran L, Medrano-Palafox J, Hernandez-Quintela E, Lozano-Alcazar J, Alaniz-de la OJ. A comparative clinical trial of the efficacy of two different aqueous solutions of cyclosporine for the treatment of moderate-to-severe dry eye syndrome. The British journal of ophthalmology.

- 2010;94(10):1312-5.
- 89. Benelli U, Nardi M, Posarelli C, Albert TG. Tear osmolarity measurement using the TearLab Osmolarity System in the assessment of dry eye treatment effectiveness. Contact lens & anterior eye: the journal of the British Contact Lens Association. 2010;33(2):61-7.
- 90. Chen M, Gong L, Sun X, Xie H, Zhang Y, Zou L, et al. A comparison of cyclosporine 0.05% ophthalmic emulsion versus vehicle in Chinese patients with moderate to severe dry eye disease: an eight-week, multicenter, randomized, double-blind, parallel-group trial. Journal of ocular pharmacology and therapeutics: the official journal of the Association for Ocular Pharmacology and Therapeutics. 2010;26(4):361-6.
- 91. Craig JP, Purslow C, Murphy PJ, Wolffsohn JS. Effect of a liposomal spray on the pre-ocular tear film. Contact lens & anterior eye: the journal of the British Contact Lens Association. 2010;33(2):83-7.
- 92. Davitt WF, Bloomenstein M, Christensen M, Martin AE. Efficacy in patients with dry eye after treatment with a new lubricant eye drop formulation. Journal of ocular pharmacology and therapeutics: the official journal of the Association for Ocular Pharmacology and Therapeutics. 2010;26(4):347-53.
- 93. Khaireddin R, Schmidt KG. [Comparative investigation of treatments for evaporative dry eye]. Klinische Monatsblatter fur Augenheilkunde. 2010;227(2):128-34.
- 94. Larmo PS, Jarvinen RL, Setala NL, Yang B, Viitanen MH, Engblom JR, et al. Oral sea buckthorn oil attenuates tear film osmolarity and symptoms in individuals with dry eye. The Journal of nutrition. 2010;140(8):1462-8.
- 95. Meijer JM, Meiners PM, Vissink A, Spijkervet FK, Abdulahad W, Kamminga N, et al. Effectiveness of rituximab treatment in primary Sjogren's syndrome: a randomized, double-blind, placebo-controlled trial. Arthritis and rheumatism. 2010;62(4):960-8.
- 96. Rao SN. Topical cyclosporine 0.05% for the prevention of dry eye disease progression. Journal of ocular pharmacology and therapeutics: the official journal of the Association for Ocular Pharmacology and Therapeutics. 2010;26(2):157-64.
- 97. Shin MS, Kim JI, Lee MS, Kim KH, Choi JY, Kang KW, et al. Acupuncture for treating dry eye: a randomized placebo-controlled trial. Acta ophthalmologica. 2010;88(8):e328-33.
- 98. Virkki LM, Porola P, Forsblad-d'Elia H, Valtysdottir S, Solovieva SA, Konttinen YT. Dehydroepiandrosterone (DHEA) substitution treatment for severe fatigue in DHEA-deficient patients with primary Sjogren's syndrome. Arthritis care & research. 2010;62(1):118-24.
- 99. Wang TJ, Wang IJ, Ho JD, Chou HC, Lin SY, Huang MC. Comparison of the clinical effects of carbomer-based lipid-containing gel and hydroxypropyl-guar gel artificial tear formulations in patients with dry eye syndrome: a 4-week, prospective, open-label, randomized, parallel-group, noninferiority study. Clinical therapeutics. 2010;32(1):44-52.
- 100. Brignole-Baudouin F, Baudouin C, Aragona P, Rolando M, Labetoulle M, Pisella PJ, et al. A multicentre, double-masked, randomized, controlled trial assessing the effect of oral supplementation of omega-3 and omega-6 fatty acids on a conjunctival inflammatory marker in dry eye patients. Acta ophthalmologica. 2011;89(7):e591-7.
- 101. Creuzot-Garcher C, Baudouin C, Labetoulle M, Pisella PJ, Mouriaux F, Meddeb-Ouertani A, et al. [Efficacy assessment of Nutrilarm(R), a per os omega-3 and omega-6 polyunsaturated essential fatty acid dietary formulation versus placebo in patients with bilateral treated moderate dry eye syndrome]. Journal francais d'ophtalmologie. 2011;34(7):448-55.
- 102. Demiryay E, Yaylali V, Cetin EN, Yildirim C. Effects of topical cyclosporine a plus artificial tears versus artificial tears treatment on conjunctival goblet cell density in dysfunctional tear syndrome. Eye & contact lens. 2011;37(5):312-5.
- 103. Garcia-Lazaro S, Belda-Salmeron L, Ferrer-Blasco T, Cervino A, Montes-Mico R. Comparison of two artificial tear formulations for dry eye through high-resolution optical coherence tomography. Clinical & experimental optometry. 2011;94(6):549-56.
- 104. Jackson MA, Burrell K, Gaddie IB, Richardson SD. Efficacy of a new prescription-only medical food supplement in alleviating signs and symptoms of dry eye, with or without concomitant cyclosporine A. Clinical ophthalmology (Auckland, NZ). 2011;5:1201-6.

- 105. Lee JH, Ahn HS, Kim EK, Kim TI. Efficacy of sodium hyaluronate and carboxymethylcellulose in treating mild to moderate dry eye disease. Cornea. 2011;30(2):175-9.
- 106. Rao SN. Reversibility of dry eye deceleration after topical cyclosporine 0.05% withdrawal. Journal of ocular pharmacology and therapeutics: the official journal of the Association for Ocular Pharmacology and Therapeutics. 2011;27(6):603-9.
- 107. Su MY, Perry HD, Barsam A, Perry AR, Donnenfeld ED, Wittpenn JR, et al. The effect of decreasing the dosage of cyclosporine A 0.05% on dry eye disease after 1 year of twice-daily therapy. Cornea. 2011;30(10):1098-104.
- 108. Wojtowicz JC, Butovich I, Uchiyama E, Aronowicz J, Agee S, McCulley JP. Pilot, prospective, randomized, double-masked, placebo-controlled clinical trial of an omega-3 supplement for dry eye. Cornea. 2011;30(3):308-14.
- 109. Baeyens V, Bron A, Baudouin C. Efficacy of 0.18% hypotonic sodium hyaluronate ophthalmic solution in the treatment of signs and symptoms of dry eye disease. Journal français d'ophtalmologie. 2012;35(6):412-9.
- 110. Baudouin C, Cochener B, Pisella PJ, Girard B, Pouliquen P, Cooper H, et al. Randomized, phase III study comparing osmoprotective carboxymethylcellulose with sodium hyaluronate in dry eye disease. European journal of ophthalmology. 2012;22(5):751-61.
- 111. Kamiya K, Nakanishi M, Ishii R, Kobashi H, Igarashi A, Sato N, et al. Clinical evaluation of the additive effect of diquafosol tetrasodium on sodium hyaluronate monotherapy in patients with dry eye syndrome: a prospective, randomized, multicenter study. Eye (London, England). 2012;26(10):1363-8.
- 112. Kim TH, Kang JW, Kim KH, Kang KW, Shin MS, Jung SY, et al. Acupuncture for the treatment of dry eye: a multicenter randomised controlled trial with active comparison intervention (artificial teardrops). PloS one. 2012;7(5):e36638.
- 113. Liew SH, Nichols KK, Klamerus KJ, Li JZ, Zhang M, Foulks GN. Tofacitinib (CP-690,550), a Janus kinase inhibitor for dry eye disease: results from a phase 1/2 trial. Ophthalmology. 2012;119(7):1328-35.
- 114. Matsumoto Y, Ohashi Y, Watanabe H, Tsubota K. Efficacy and safety of diquafosol ophthalmic solution in patients with dry eye syndrome: a Japanese phase 2 clinical trial. Ophthalmology. 2012;119(10):1954-60.
- 115. Prabhasawat P, Tesavibul N, Mahawong W. A randomized double-masked study of 0.05% cyclosporine ophthalmic emulsion in the treatment of meibomian gland dysfunction. Cornea. 2012;31(12):1386-93.
- 116. Schrell C, Cursiefen C, Kruse F, Jacobi C. [Topical cyclosporine A 0.05% in the treatment of keratoconjunctivitis sicca]. Klinische Monatsblatter fur Augenheilkunde. 2012;229(5):548-53.
- 117. Shi JL, Miao WH. [Effects of acupuncture on lactoferrin content in tears and tear secretion in patients suffering from dry eyes: a randomized controlled trial]. Zhong xi yi jie he xue bao = Journal of Chinese integrative medicine. 2012;10(9):1003-8.
- 118. Takamura E, Tsubota K, Watanabe H, Ohashi Y. A randomised, double-masked comparison study of diquafosol versus sodium hyaluronate ophthalmic solutions in dry eye patients. The British journal of ophthalmology. 2012;96(10):1310-5.
- 119. Urzua CA, Vasquez DH, Huidobro A, Hernandez H, Alfaro J. Randomized double-blind clinical trial of autologous serum versus artificial tears in dry eye syndrome. Current eye research. 2012;37(8):684-8
- 120. Bhargava R, Kumar P, Kumar M, Mehra N, Mishra A. A randomized controlled trial of omega-3 fatty acids in dry eye syndrome. International journal of ophthalmology. 2013;6(6):811-6.
- 121. Comez AT, Tufan HA, Kocabiyik O, Gencer B. Effects of lubricating agents with different osmolalities on tear osmolarity and other tear function tests in patients with dry eye. Current eye research. 2013;38(11):1095-103.
- 122. Kangari H, Eftekhari MH, Sardari S, Hashemi H, Salamzadeh J, Ghassemi-Broumand M, et al. Short-term consumption of oral omega-3 and dry eye syndrome. Ophthalmology. 2013;120(11):2191-6.
- 123. Kawakita T, Kawabata F, Tsuji T, Kawashima M, Shimmura S, Tsubota K. Effects of dietary supplementation with fish oil on dry eye syndrome subjects: randomized controlled trial. Biomedical

- research (Tokyo, Japan). 2013;34(5):215-20.
- 124. Olenik A, Jimenez-Alfaro I, Alejandre-Alba N, Mahillo-Fernandez I. A randomized, double-masked study to evaluate the effect of omega-3 fatty acids supplementation in meibomian gland dysfunction. Clinical interventions in aging. 2013;8:1133-8.
- 125. Ong NH, Purcell TL, Roch-Levecq AC, Wang D, Isidro MA, Bottos KM, et al. Epithelial healing and visual outcomes of patients using omega-3 oral nutritional supplements before and after photorefractive keratectomy: a pilot study. Cornea. 2013;32(6):761-5.
- 126. Shimazaki-Den S, Iseda H, Dogru M, Shimazaki J. Effects of diquafosol sodium eye drops on tear film stability in short BUT type of dry eye. Cornea. 2013;32(8):1120-5.
- 127. Tomlinson A, Madden LC, Simmons PA. Effectiveness of dry eye therapy under conditions of environmental stress. Current eye research. 2013;38(2):229-36.
- 128. Aguilar AJ, Marquez MI, Albera PA, Tredicce JL, Berra A. Effects of Systane((R)) Balance on noninvasive tear film break-up time in patients with lipid-deficient dry eye. Clinical ophthalmology (Auckland, NZ). 2014;8:2365-72.
- 129. Barabino S, Rolando M, Nardi M, Bonini S, Aragona P, Traverso CE. The effect of an artificial tear combining hyaluronic acid and tamarind seeds polysaccharide in patients with moderate dry eye syndrome: a new treatment for dry eye. European journal of ophthalmology. 2014;24(2):173-8.
- 130. Cohen S, Martin A, Sall K. Evaluation of clinical outcomes in patients with dry eye disease using lubricant eye drops containing polyethylene glycol or carboxymethylcellulose. Clinical ophthalmology (Auckland, NZ). 2014;8:157-64.
- 131. Hwang HS, Sung YM, Lee WS, Kim EC. Additive Effect of preservative-free sodium hyaluronate 0.1% in treatment of dry eye syndrome with diquafosol 3% eye drops. Cornea. 2014;33(9):935-41.
- 132. Pinto-Bonilla JC, Del Olmo-Jimeno A, Llovet-Osuna F, Hernandez-Galilea E. A randomized crossover study comparing trehalose/hyaluronate eyedrops and standard treatment: patient satisfaction in the treatment of dry eye syndrome. Therapeutics and clinical risk management. 2015;11:595-603.
- 133. Simmons PA, Carlisle-Wilcox C, Vehige JG. Comparison of novel lipid-based eye drops with aqueous eye drops for dry eye: a multicenter, randomized controlled trial. Clinical ophthalmology (Auckland, NZ). 2015;9:657-64.
- 134. Simmons PA, Liu H, Carlisle-Wilcox C, Vehige JG. Efficacy and safety of two new formulations of artificial tears in subjects with dry eye disease: a 3-month, multicenter, active-controlled, randomized trial. Clinical ophthalmology (Auckland, NZ). 2015;9:665-75.

Clinical trials registered on ClinicalTrials.gov (N=4)

- 1. rhDNase eye drops in patients with ocular graft-vs.- host disease (NCT02702518)
- 2. Dry Eye Assessment and Management Study (DREAM) (NCT02128763)
- 3. Dry Eye Assessment and Management: Feasibility Study (DREAM) (NCT01102257)
- 4. Dry eye disease in the vitamin D and omega-3 trial (VITAL) (NCT01880463)

eAppendix 5. All 109 Unique Outcome Domains Examined in Existing Research Addressing Interventions for Dry Eye (ie, Systematic Reviews, Clinical Trials Included in the Systematic Reviews, and National Eye Institute [NEI]-Funded Trials Registered on ClinicalTrials.gov)

Serial Number	Category of Outcome	Subcategories and Outcome Domains
1	Symptoms	Patient's overall assessment of ocular surface symptoms
2]	Ocular itching
3	- 	Ocular burning/stinging
4	- 	Ocular foreign body sensation
5		Ocular gritty/sandy sensation
6	- 	Ocular dryness
7		Ocular tiredness/fatigue
8		Ocular discomfort
9	- 	Ocular pain
10	- 	Photosensitivity/photophobia
11	-	Intolerance to air drafts
12	-	Intolerance to smoke
13	<u> </u> -	Eyelid/eyelash crusting
14	_	Eyes stuck shut
15	<u> </u> -	Inability/difficulty with opening eyes in light/after sleeping
16	_	Inability/difficulty with sleeping
17	_	Watery eyes/tearing/mucus
_*	_	Patient's overall assessment of visual symptoms
18	-	Fluctuating vision
19	-	Blurred vision
20	-	Difficulty with reading
21	<u>-</u>	Patient's overall assessment of dryness
22	-	Dryness of the mouth/Xerostomia
23	-	Dryness of the tongue
24	<u>-</u>	Reduced feeling/sensation of the mouth
25	- 	Inability/difficulty with speaking
26	- 	Inability/difficulty with swallowing
27	- 	Mouth discomfort/comfort
28	- 	Dryness of the skin
29	- 	Dryness of the vagina
30	- 	Dryness of the nose/nasal passage
_*	- 	General symptoms
31	- 	General body fatigue
32	1	General body pain
33	1	Muscle pain or myalgia
34	1	Joint pain or arthralgia
35	1	Depressive mood
_*	Signs/Clinical	Ocular surface- and tear film-related signs/clinical testing
36	testing	Ocular surface staining
_*	1	Conjunctiva-related signs/clinical testing
37	1	Conjunctival hyperemia/erythema/injection/redness

20	1	Conjugatival staining
38	-	Conjunctival staining
39	4	Conjunctival swelling/edema/chemosis
40	-	Conjunctival discharge/foam
41	-	Conjunctival wetting
42	-	Lid parallel conjunctival fold (LIPCOF)
_*	-	Cornea-related signs/clinical testing
43	-	Corneal punctate erosions/superficial keratitis
44	-	Corneal staining
45	-	Corneal sensitivity
46	-	Corneal surface topography/corneal fluorophotometry
47	-	Corneal epithelial permeability
48	-	Corneal filaments
_*	-	Tear film-related signs/clinical testing
49		Tear film lipid layer structure/thickness
50		Tear film lipid layer spread time
51		Tear production/volume/secretion (Schirmer Test/Fluorophotometry
52		Tear osmolarity
53		Tear film meniscus height /volume
54		Tear film stability (Tear Film Break Up Time/ Tear film thinning time)
55		Tear interference
56		Tear evaporation
57		Tear drainage/clearance/flow
_*		Eyelid-related signs/clinical testing
58		Eyelid edema
59		Eyelid/eyelid margin erythema/injection/inflammation
60		Meibomian gland plugging
-*		Vision-related signs/clinical testing
61		Visual acuity
62		Contrast sensitivity
63		Mean refractive spherical equivalent (MSE)
_*	Laboratory	Ocular surface- and tear film-related laboratory measurements
64	measurements	Corneal epithelial cell nucleus/cytoplasm ratio
65		Tear lysozyme
66		Tear lactoferrin
67		Tear matrix metalloprotein-9 (MMP-9)
68	1	Tear extracellular DNA (eDNA)
69	1	Tear cell count
70	1	Tear cytokine
71	1	Tear mucin 5a (MUC 5a)
72	1	Tear prostaglandin E
73	1	Goblet cell density
74	1	Conjunctival impression cytology
75	1	Conjunctival human leukocyte antigen D-related (HLA-DR)
76	1	Conjunctival epithelial cell morphology
77	1	Conjunctival CD11a- and CD3-positive lymphocytes (i.e., activated
		lymphocytes)
_*	1	Saliva/salivary gland measurements
78	1	Salivary production
79	1	Salivary flow/drainage/clearance
80	1	Salivary pH
	<u> </u>	1 - 22 - 2 7 622

Serum/blood measurements Serum/blood measurements Serum immunoglobulin G (IgG) Serum immunoglobulin M (IgA) Serum erythrocyte sedimentation rate (ESR) Serum rheumatoid factor (RF) Serum B lymphocytes Serum B lymphocytes Serum Periodic Acid-Schiff (PAS) cells Red blood cell (RBC) membrane fatty acid Adverse events (Inon-ocular) Intraocular pressure General quality-of-life related outcomes 100 101 101 102 103 -* Other Outcomes Other Outcomes 104 105 106 107 108 109 100 100 101 101 -* Other Costs of treatment for the patient Treatment-related outcomes Need for additional medications, e.g., analgesics Adherence/compliance with treatment Response rate Patient preference	81		Salivary gland biopsy
Serum immunoglobulin A (IgA) Serum immunoglobulin A (IgA) Serum immunoglobulin M (IgM) Serum erythrocyte sedimentation rate (ESR) Serum rheumatoid factor (RF) Serum B lymphocytes Serum Poriodic Acid-Schiff (PAS) cells Red blood cell (RBC) membrane fatty acid Adverse events (type unspecified) Adverse events (coular) Adverse events (non-ocular) Intraocular pressure General quality-of-life related outcomes 100 101 102 103 Overall assessment of treatment effectiveness assessed by provider/researcher Impact of disease on patient's work Impact of disease on patient's work 105 106 107 108 Serum immunoglobulin A (IgA) Serum imunoglobulin A (IgA) Serum immunoglobulin A (IgA) Serum imunoglobulin A (IgA) Serum immunoglobulin A (IgA) Serum immunoglobule Serum immunoglobule Serum imunoglobule Serum imunoglotue Serum imunoglobule Serum imunoglotue Serum imunous in implesses Serum		-	
Serum immunoglobulin A (lgA) Serum immunoglobulin M (lgM) Serum erythrocyte sedimentation rate (ESR) Serum rheumatoid factor (RF) Serum hemoglobin Serum B lymphocytes Serum Apo 2.7+ cells Serum Apo 2.7+ cells Serum Periodic Acid-Schiff (PAS) cells Red blood cell (RBC) membrane fatty acid Adverse events (type unspecified) outcomes Adverse events (type unspecified) Adverse events (non-ocular) Intraocular pressure 97 Quality-of-life- related Outcomes Patient treatment acceptability/satisfaction with treatment Overall assessment of treatment effectiveness assessed by provider/researcher Impact of disease on patient's work Impact of disease on patient's work Impact of disease on patient's daily life -* Other Other Other Other Octors of treatment for the patient Treatment-related outcomes Adherence/compliance with treatment Response rate	82	-	·
Serum immunoglobulin M (IgM) Serum erythrocyte sedimentation rate (ESR) Serum hemoglobin Serum hemoglobin Serum B lymphocytes Serum C-reactive protein (CRP) Serum Apo 2.7+ cells Serum Periodic Acid-Schiff (PAS) cells Red blood cell (RBC) membrane fatty acid Adverse events (type unspecified) Adverse events (type unspecified) Adverse events (non-ocular) Intraocular pressure Quality-of-life-related outcomes Auticomes Quality-of-life-related outcomes Auticomes Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by provider/researcher Impact of disease on patient's work Impact of disease on patient's daily life Costs of treatment for the patient Treatment-related outcomes Artificial tear use Need for additional medications, e.g., analgesics Adherence/compliance with treatment Response rate		-	
Serum erythrocyte sedimentation rate (ESR) Serum rheumatoid factor (RF) Serum hemoglobin Serum B lymphocytes Serum C-reactive protein (CRP) Serum Periodic Acid-Schiff (PAS) cells Red blood cell (RBC) membrane fatty acid Adverse events (type unspecified) Adverse events (coular) Adverse events (ocular) Adverse events (non-ocular) Intraocular pressure General quality-of-life related outcomes Outcomes Patient treatment acceptability/satisfaction with treatment Overall assessment of treatment effectiveness assessed by provider/researcher Impact of disease on patient's work Impact of disease on patient's work Impact of disease on patient's work Impact of disease on patient's daily life -* Other outcomes Costs of treatment for the patient Treatment-related outcomes Adherence/compliance with treatment Response rate		-	
Serum rheumatoid factor (RF)		-	
Serum hemoglobin Serum B lymphocytes		-	, , , , , , , , , , , , , , , , , , ,
88 89 90 90 90 91 91 92 Serum Apo 2.7+ cells Serum Periodic Acid-Schiff (PAS) cells Red blood cell (RBC) membrane fatty acid Adverse events (type unspecified) outcomes Adverse events (non-ocular) Intraocular pressure General quality-of-life related outcomes Overall assessment of treatment effectiveness assessed by provider/researcher Impact of disease on patient's work Impact of disease on patient's work 105 Other Costs of treatment for the patient Treatment -* 105 106 107 108 108 108 109 109 109 109 109 109 109 109 109 109		-	, ,
Serum C-reactive protein (CRP) Serum Apo 2.7+ cells Serum Periodic Acid-Schiff (PAS) cells Red blood cell (RBC) membrane fatty acid Adverse events (type unspecified) outcomes Adverse events (ocular) Adverse events (ocular) Adverse events (non-ocular) Intraocular pressure General quality-of-life 98 related outcomes Patient treatment acceptability/satisfaction with treatment Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by provider/researcher Impact of disease on patient's work Impact of disease on patient's daily life * Other Other Costs of treatment for the patient -* 105 106 107 108 Serum Apo 2.7+ cells Serum Periodic Acid-Schiff (PAS) cells Red blood cell (RBC) membrane fatty acid Adverse events (ocular) Beautifical tear use Need for additional medications, e.g., analgesics Adherence/compliance with treatment		-	
Serum Apo 2.7+ cells Serum Periodic Acid-Schiff (PAS) cells Red blood cell (RBC) membrane fatty acid 93		-	, , , ,
Serum Periodic Acid-Schiff (PAS) cells		-	
Red blood cell (RBC) membrane fatty acid		-	,
93 Safety outcomes outcomes outcomes 94 Outcomes 95 Adverse events (type unspecified) Adverse events (non-ocular) Intraocular pressure 97 Quality-of-life-related outcomes 99 Outcomes 100 Patient treatment acceptability/satisfaction with treatment Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by provider/researcher Inpact of disease on patient's work Impact of disease on patient's daily life ** Other outcomes Costs of treatment for the patient Treatment-related outcomes Artificial tear use Need for additional medications, e.g., analgesics Adherence/compliance with treatment Response rate		-	` '
94 outcomes Adverse events (ocular) 95		_	, ,
Adverse events (non-ocular) Intraocular pressure		•	
96 Intraocular pressure 97 Quality-of-life-related outcomes Patient treatment acceptability/satisfaction with treatment 100 Overall assessment of treatment effectiveness assessed by patients 101 Overall assessment of treatment effectiveness assessed by provider/researcher 102 Impact of disease on patient's work 103 Impact of disease on patient's daily life -* Other Economic outcomes 104 -* 105 106 106 107 108 Need for additional medications, e.g., analgesics Adherence/compliance with treatment Response rate		outcomes	
97 Quality-of-life- 98 related outcomes 99 100 Overall assessment of treatment effectiveness assessed by patients 101 Overall assessment of treatment effectiveness assessed by provider/researcher 102 Impact of disease on patient's work 103 Impact of disease on patient's daily life -* Other outcomes 104 -* 105 Ino6 106 107 108 General quality-of-life Vision-related quality-of-life Patient Treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall assessment of treatment effectiveness assessed by patients Overall asse			· · ·
98 related outcomes Patient treatment acceptability/satisfaction with treatment 100 Overall assessment of treatment effectiveness assessed by patients 101 Overall assessment of treatment effectiveness assessed by provider/researcher 102 Impact of disease on patient's work 103 Impact of disease on patient's daily life -* Other Outcomes 104 Outcomes 105 Artificial tear use 106 Need for additional medications, e.g., analgesics 107 Adherence/compliance with treatment 108 Response rate			·
99 outcomes Patient treatment acceptability/satisfaction with treatment 100 Overall assessment of treatment effectiveness assessed by patients 101 Overall assessment of treatment effectiveness assessed by provider/researcher 102 Impact of disease on patient's work 103 Impact of disease on patient's daily life -* Other Outcomes 104 -* 105 Costs of treatment for the patient 106 Treatment-related outcomes 107 Artificial tear use 108 Need for additional medications, e.g., analgesics Adherence/compliance with treatment Response rate	97	-	General quality-of-life
100Overall assessment of treatment effectiveness assessed by patients101Overall assessment of treatment effectiveness assessed by provider/researcher102Impact of disease on patient's work103Impact of disease on patient's daily life-*Other outcomesEconomic outcomes104-*Costs of treatment for the patient-*Treatment-related outcomes105Artificial tear use106Need for additional medications, e.g., analgesics107Adherence/compliance with treatment108	98	related	·
101 Overall assessment of treatment effectiveness assessed by provider/researcher Impact of disease on patient's work Impact of disease on patient's daily life -* Other outcomes 104 -* Treatment-related outcomes Artificial tear use Need for additional medications, e.g., analgesics Adherence/compliance with treatment Response rate	99	outcomes	
provider/researcher 102	100		Overall assessment of treatment effectiveness assessed by patients
Impact of disease on patient's work	101		Overall assessment of treatment effectiveness assessed by
103			provider/researcher
-* Other outcomes 104 outcomes -* Treatment-related outcomes 105 Artificial tear use 106 Need for additional medications, e.g., analgesics 107 Adherence/compliance with treatment Response rate	102		Impact of disease on patient's work
104 -* 105 106 107 108 Costs of treatment for the patient Treatment-related outcomes Artificial tear use Need for additional medications, e.g., analgesics Adherence/compliance with treatment Response rate	103		Impact of disease on patient's daily life
-* Treatment-related outcomes Artificial tear use Need for additional medications, e.g., analgesics Adherence/compliance with treatment Response rate	_*	Other	Economic outcomes
105 Artificial tear use 106 Need for additional medications, e.g., analgesics 107 Adherence/compliance with treatment 108 Response rate	104	outcomes	Costs of treatment for the patient
106 Need for additional medications, e.g., analgesics 107 Adherence/compliance with treatment 108 Response rate	_*		Treatment-related outcomes
107 Adherence/compliance with treatment 108 Response rate	105]	Artificial tear use
108 Response rate	106		Need for additional medications, e.g., analgesics
108 Response rate	107		Adherence/compliance with treatment
109 Patient preference	108		Response rate
	109		Patient preference

^{*}Rows that include a "-" in the Serial Number column pertain to subcategories that were added for organizational purposes only; these are <u>not</u> outcome domains examined in existing research.

eAppendix 6. Number of Studies in Existing Research Addressing Interventions for Dry Eye (ie, Systematic Reviews, Clinical Trials Included in the Systematic Reviews, and National Eye Institute (NEI)-Funded Trials Registered on ClinicalTrials.gov) That Examined Each of the 28 Outcomes Rated by 420 Patients in Round 2 of the Delphi Survey

Serial Number	Category of outcome	Outcome	Number of studies in existing research examining the outcome						
			Syste	matic	Clinic	cal trials	Tot	tal	
			reviews	(N=20)	(N=138)		(N=1	158)	
			n	%		n %	n	· %	
Outcom	es classified as "importa	nt" (i.e., ≥75% of all patients assigned a rating of 6 or high	er)						
1	Symptoms	Ocular burning/stinging	3	(15)	28	(20)	31	(20)	
2	Symptoms	Ocular discomfort	3	(15)	23	(17)	26	(17)	
3	Symptoms	Ocular pain*	1	(5)	10	(7)	11	(7)	
4	Symptoms	Ocular dryness	7	(35)	38	(28)	45	(29)	
5	Signs/Clinical testing	Visual acuity	4	(20)	14	(10)	18	(11)	
6	Quality-of-life-related	Impact of dry eye disease on patient's daily life*	1	(5)	2	(1)	3	(2)	
7	Quality-of-life-related	Vision-related quality-of-life*	3	(15)	2	(1)	5	(3)	
8	Quality-of-life-related	Patient's acceptability/satisfaction with treatment*	8	(40)	1	(1)	9	(6)	
9	Symptoms	Patient's overall assessment of ocular surface symptoms	13	(65)	47	(34)	60	(38)	
10	Symptoms	Ocular foreign body sensation	2	(10)	21	(15)	23	(15)	
11	Symptoms	Ocular gritty/sandy sensation*	1	(5)	12	(9)	13	(8)	
12	Signs/Clinical testing	Tear film stability	18	(90)	87	(63)	105	(67)	
13	Quality-of-life-related	Overall assessment of treatment effectiveness assessed by patients*	6	(30)	1	(1)	7	(4)	
14	Safety-related	Adverse events (ocular)	7	(35)	33	(24)	40	(25)	
15	Other	Artificial tear use	7	(35)	15	(11)	22	(14)	
16	Symptoms	Ocular tiredness/fatigue*	4	(20)	2	(1)	6	(4)	
17	Symptoms	Photosensitivity/photophobia*	13	(65)	1	(1)	14	(9)	
18	Symptoms	Intolerance to air drafts*	0	(0)	1	(1)	1	(1)	
19	Signs/Clinical testing	Tear production/volume	19	(95)	86	(62)	105	(67)	
20	Other	Costs of treatment*	0	(0)	1	(1)	1	(1)	
21	Signs/Clinical testing	Corneal staining	6	(30)	38	(28)	44	(28)	
22	Safety-related	Adverse events (non-ocular)	4	(20)	18	(13)	22	(14)	
23	Signs/Clinical testing	Conjunctival hyperemia	3	(15)	19	(14)	22	(14)	
24	Signs/Clinical testing	Ocular surface staining	11	(55)	46	(33)	57	(36)	
25	Signs/Clinical testing	Conjunctival staining	3	(15)	24	(17)	27	(17)	
26	Laboratory measurements	Conjunctival impression cytology	2	(10)	16	(12)	18	(11)	
Outcom		ortant" (i.e., <75% of all patients assigned a rating of 5 or h	igher)						
27	Symptoms	Dryness of the mouth	2	(10)	15	(11)	17	(11)	
28	Laboratory measurements	Salivary flow	4	(20)	17	(12)	21	(13)	



eAppendix 7. Comparison of Ratings of Importance of Outcomes in Rounds 1 and 2 of the Delphi Survey

			Rating as	ssigned	by ALL	Rating a	assigned	by ALL			
			622 PARTICIPANTS in			420 PA	RTICIPA	NTS in			
			ROUND 1			F	ROUND 2				
#	Category of outcome	Outcome	Median	(IQR)*	(Range)	Median	(IQR)*	(Range)			
Outco	Outcomes classified as "important" (i.e., at least 75% of ALL participants assigned a rating of 6 or higher)										
	Symptoms	Ocular burning/stinging		(9-10)	(0-10)		(10-10)	(2-10)			
	Symptoms	Ocular discomfort	10	(9-10)	(0-10)		(10-10)	(0-10)			
3	Symptoms	Ocular pain**		N/A		10	(10-10)	(0-10)			
4	Symptoms	Ocular dryness	10(10-10)	(3-10)	10	(10-10)	(0-10)			
5	Signs/Clinical testing	Visual acuity	10	(8-10)	(0-10)	10	(10-10)	(0-10)			
6	Quality-of-life-related	Impact of dry eye disease on patient's daily life**		N/A		10	(10-10)	(0-10)			
7	Quality-of-life-related	Vision-related quality-of-life**		N/A		10	(10-10)	(0-10)			
8	Quality-of-life-related	Patient's acceptability/satisfaction with treatment**		N/A		10	(10-10)	(0-10)			
9	Symptoms	Patient's overall assessment of ocular surface symptoms	10	(9-10)	(0-10)	10	(9-10)	(2-10)			
10	Symptoms	Ocular foreign body sensation	10	(8-10)	(0-10)	10	(9-10)	(0-10)			
11	Symptoms	Ocular gritty/sandy sensation**		N/A		10	(9-10)	(0-10)			
12	Signs/Clinical testing	Tear film stability	10	(9-10)	(0-10)	10	(9-10)	(0-10)			
13	Quality-of-life-related	Overall assessment of treatment effectiveness assessed by patients**		N/A		10	(9-10)	(0-10)			
	Safety-related	Adverse events (ocular)	10	(9-10)	(0-10)	10	(9-10)	(1-10)			
15	Other	Artificial tear use	10	(8-10)	(0-10)	10	(9-10)	(0-10)			
16	Symptoms	Ocular tiredness/fatigue**		N/A		10	(8-10)	(0-10)			
17	Symptoms	Photosensitivity/photophobia**		N/A		10	(8-10)	(0-10)			
18	Symptoms	Intolerance to air drafts**		N/A		10	(8-10)	(0-10)			
19	Signs/Clinical testing	Tear production/volume	10	(8-10)	(0-10)	10	(8-10)	(0-10)			
20	Other	Costs of treatment**		N/A		10	(8-10)	(0-10)			
21	Signs/Clinical testing	Corneal staining	10	(8-10)	(0-10)	9	(8-10)	(0-10)			
22	Safety-related	Adverse events (non-ocular)	10	(7-10)	(0-10)	9	(8-10)	(1-10)			
23	Signs/Clinical testing	Conjunctival hyperemia	9	(6-10)	(0-10)	9	(7-10)	(0-10)			
	Signs/Clinical testing	Ocular surface staining	9	(7-10)	(0-10)		(7-10)				
25	Signs/Clinical testing	Conjunctival staining	9	(7-10)	(0-10)	8	(7-10)	(0-10)			
		Conjunctival impression cytology	9	(6-10)	(0-10)	8	(7-10)	(0-10)			
Outco	mes classified as "not ir	nportant" (i.e., fewer than 75% of ALL participants assigned a rating o	of 5 or hig	her)							
27	Symptoms	Dryness of the mouth	7	(4-10)	(0-10)	5	(4-8)	(0-10)			
28	Laboratory measureme	Salivary flow	6	(3-9)	(0-10)	5	(3-8)	(0-10)			

^{*}IQR = Interquartile Range

^{**} Outcomes that were unpopular in existing research (i.e., examined in <10% of studies), but were rated as important by survey respondents.

Note that we participants did not provide ratings for unpopular outcomes in Round 1. Rather, participants selected them as "important" or "not important" from a list.