

Entropion

Information and advice for patients

Birmingham and Midland Eye Centre

Entropion

What is it?

Entropion is a condition in which the eyelid turns inward, causing the eyelashes to rub against the eye making it red, irritated, sore and watery. It can feel as if there is something in the eye.

Entropion can be diagnosed by a routine eye examination and special investigations are not needed.

What causes entropion?

The main cause of lower lid entropion is increased laxity of the eyelid due to advancing age but it may also occur as a result of trauma, scarring or other previous surgery.

The most common causes of upper lid entropion are disorders of the inside surface of the eyelid such as Trachoma and a rare inflammatory disease called Cicatricial Pemphigoid.

Is entropion serious?

A chronically in-turned eyelid can make the eye very sensitive to light and wind and may lead to abrasions of the eye surface and eye infections including corneal ulcers which could result in permanently damaged vision. The cornea is the clear part of the front of the eye that allows light to enter the eye.

How is entropion treated?

The treatment of entropion depends on the cause but usually involves an operation on the eyelid margin to turn the eyelid margin and eyelashes away from the eye surface.

Before any surgery, the eye may be protected by taping the lower lid into a 'more normal' position, and using eye lubricating drops and ointment.

Upper lid

In the upper lid, there is usually a horizontal incision in the skin crease (or fold) of the upper lid and adjustment of the relative position of the two layers of the eyelid. Absorbable sutures are placed to evert the lid.

Lower lid

There are many different ways of treating entropion of the lower lid:

- **Everting sutures**

Entropion may be corrected without cutting the eyelid in a procedure known as the Quickert procedure. This procedure may be performed under local anaesthetic as an outpatient treatment and you can go home shortly afterwards. In this procedure, 2 or 3 strategically

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placed everting sutures are placed in the lower lid to evert the lid, that is, to return the eyelid to a normal position to prevent any further damage or discomfort to the eye. This is an excellent treatment for patients who are not suitable for surgery or as a temporary measure until more definitive surgery can be performed. There is a significant risk of recurrence of the entropion with this procedure.

There are small risks associated with everting sutures. These include: bruising from the injection, scarring of the eyelid, infection, under or over-correction, and recurrence of the entropion. Afterwards, the eyelids may appear swollen, red or bruised for a couple of days or so. This is normal.

- **Surgery**

Surgery to repair lower lid entropion is usually performed as a day-case procedure in our operating theatre under local anaesthetic, sometimes with the patient lightly sedated with oral or intravenous medications. Usually this involves tightening and stabilising the lax lower lid, known as lower lid tightening. This usually also involves the use of sutures to help correct the position of the lower lid. The operation usually takes about 45 minutes. You may be given an eye patch to wear overnight to reduce swelling and bruising, and then you will commonly use antibiotic drops and/or ointment for 2 weeks.

Is the surgery effective?

Most patients experience immediate resolution of their symptoms after surgery with little, if any post-operative discomfort. After your eyelids have healed, there will no longer be a risk of corneal scarring, infection and loss of vision.

What are the risks of entropion surgery?

No operation is without risk. In addition to removal of sutures (which are not always removed and are often left until they fall out), minor swelling and bruising can be expected and may last for up to 2 weeks. Other risks include bleeding and infection, scarring, under or over correction, recurrence of the entropion and irritation from the stitches or from the preservative in the prescribed eye drops. These risks are very uncommon. Damage to the eye or eyesight, this risk is very small in the hands of a specialist oculoplastic surgeon.

What are the risks of not having the treatment?

The risks of not having the treatment include discomfort and soreness of the eye, abrasions from the eyelashes rubbing against the eye surface, and secondary infection, which could lead to permanently impaired vision. Other risks include: excessive tearing and sensitivity to light and wind.

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Are there any alternatives to this treatment/investigation?

Alternative options to surgery are unusual but may include taping the eyelid into a more normal position and ocular lubricants to soothe the eye. These are simple treatment method, which may be impractical in the long term.

During the treatment

How long does it take?

The operation usually takes about a half an hour.

After the treatment/investigation

Will the operation be painful?

There will inevitably be some discomfort after the operation but this may be managed with painkillers and usually subsides within 24-48 hours. Ocular lubricants in the form of eye drops and/or ointment are prescribed to soothe the eyes in the post-operative period.

When can I go home and resume my normal activities?

Usually patients are admitted on the day of surgery and discharged home the same day. When the eye pad is removed the morning after surgery, it is important not to rub the eyelid. Patients are advised to rest for a day or so before resuming their usual activities, including returning to school or work when they feel ready. Swimming however should be avoided for 2 to 3 weeks after surgery. It is safe to fly if needed, after a few days.

You will be asked to take medication after surgery including painkillers and eye drops and/or ointment until your post-operative clinic appointment.

You may gently clean the eyelids with cool boiled water. You can clean the rest of your face normally.

Will I be able to continue to drive?

If you have normal vision in your non-operated eye you can continue to drive as long as you can read a number plate from 20.5metres.

Follow-up

You will be given a post-operative follow-up appointment within 1 to 2 weeks to monitor wound healing. The stiches are absorbable but may be removed particularly if they are causing itching or irritation.

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Symptoms to report

If you have any concerns after your surgery including pain not relieved by simple painkillers (such as paracetamol or ibuprofen), bleeding or reduced vision, please contact your GP (General Practitioner), NHS Direct (Tel: 111 from any landline or mobile phone free of charge) or if symptoms are severe, the Eye Casualty on 0121 554 3801. The Eye Casualty team will be able to liaise with your Oculoplastic team to help you.

Will I require further surgery?

More than one operation is occasionally required.

Contact details

If you have any questions or are worried about any of the information in this leaflet, please contact the Oculoplastic nurse practitioner on 0121 507 6894 Monday to Friday 9.00am to 4.00pm.

Further information and support

British Oculoplastic Surgery Society

www.bopss.co.uk

For more information about our hospitals and services please see our website www.swbh.nhs.uk, or follow us on Twitter @SWBHnhs and Facebook www.facebook.com/SWBHnhs.

If you would like to suggest any amendments or improvements to this leaflet please contact the communications department on 0121 507 5303 or email: swb-tr.swbh-gm-patient-information@nhs.net



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