

Eyelid retraction

The Eye Unit Patient Information

This leaflet is for patients who are considering surgery for eyelid retraction and can help by answering some common questions.

What is Eyelid retraction?

Eyelid retraction is an abnormal eyelid position, where the eyelid margin is higher (upper lid) or lower (bottom lid) than normal. In many patients this causes no significant problems. If significant, it can lead to incomplete closure of the eyelids with dry, sore, irritated light sensitive eyes.

What are the causes?

The most common association is with thyroid orbitopathy. Other causes include trauma, facial fractures, cancer around the eye or previous surgery.

How is this condition managed?

The majority of patients have mild symptoms and only require lubricating eye drops.

Surgery may only be carried out on the NHS if certain strict criteria are met and your surgeon will tell you if you are eligible.

You **should not drive** to the hospital on the day of surgery. You will be asked to come to the hospital in good time so there may be a short wait. The surgery is usually done following a small numbing injection and takes 30 to 45 minutes. There is an incision in the eyelid skin crease and the eyelid muscle released to improve the lid position.

Often the eyelids are sutured together for a week to prevent recurrence.

You will have ointment applied to the wound and an eye pad and you can go home on the same day. Occasionally patients may require a general anaesthetic and an overnight stay in hospital.

When can I drive and go to work after the operation?

You may start driving and working again as soon as the dressing is removed as long as your vision is clear and you are not light sensitive, but avoid heavy lifting or dirty and dusty environments to reduce the risk of complications.

Are there any risks or side effects?

This surgery is not essential for your health and the treatment being offered is optional. If you choose to have surgery, serious, significant or frequently occurring risks are as follows:

- **common (up to 1 in 20)** - scarring, bruising, infection, under-correction, asymmetry, palpable lump, puckering of skin, loss of sensation, dry eye, discomfort
- **uncommon (up to 1 in 100)** - over-correction, redness, uneven lid contour, tingling. When applicable, shrinkage or failure of the graft and problems related to the donor site - infection, bleeding, scarring, wound gaping
- **rare (up to 1 in 1000)** - other e.g. double vision, tear gland damage
- **very rare (1 in 100,000)** - reaction to anaesthetic, severe or permanent vision loss

What to expect after the operation

A dressing will be applied over your eye. Your surgeon will advise you on when to remove it.

Make sure the wound is kept clean and dry, if necessary clean it gently using cooled, boiled water and clean gauze or tissues. Use a separate gauze or tissue for each eye to wipe the area.

You will be prescribed an eye ointment, which you should apply to the wound as directed, usually twice a day for seven days.

Scarring is rarely significant. You may improve the scar appearance by massaging the area with antibiotic or lubricating ointment e.g. Vaseline.

You will experience some degree of swelling and bruising - cold compresses and elevation of the head will help minimising it.

Bruising may take three or four weeks to disappear completely, although it can usually be concealed with make-up after seven days.

You can return to work when you wish but if you deal with the public, you may prefer to delay your return for around ten days because of bruising and swelling.

Do not swim for four weeks because of the risk of infection.

Avoid heavy lifting, running or strenuous gym work-outs for four weeks or you may exacerbate bruising or swelling.

You cannot wear contact lenses for at least two weeks after surgery, because the eyelids may be stiff and sore and your eyes may be dry.

Some people experience blurred vision or sensitivity to light for a few days.

There is a possibility that your eyelid malposition may not be fully corrected by the surgery, or recur later on requiring another operation.

When should I contact the department?

- you have any problems with your vision
- your eye becomes red or painful
- you cannot close your eye properly
- you have bleeding from the wound or a sticky discharge

Any problems or questions?

For further information and advice please contact:

Eye Emergency Helpline: 0300 019 4181

Mon-Sat: **8am-6pm** Sunday: **8:30am-2pm**. Bank Holidays: **8.30am-6pm**.

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