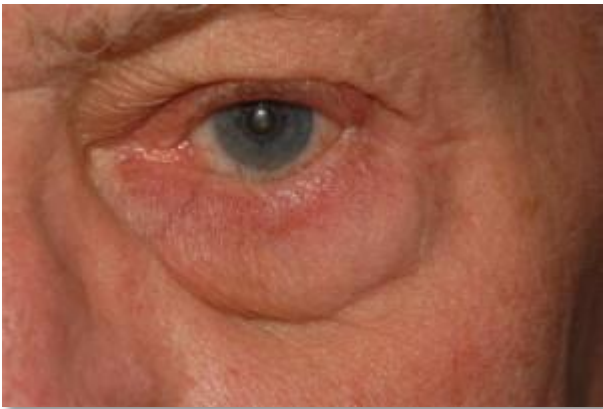


ENTROPION REPAIR-PATIENT INFORMATION

What is an entropion?

An entropion refers to a condition in which the margin of the upper or lower eyelid turns inwards against the surface of the eye. This may cause discomfort as the lashes often rub on the surface of the eye. A mild entropion may cause occasional irritation, whilst a severe entropion may be sight-threatening. A lower lid entropion is more common than an upper lid entropion.



What are the causes of entropion?

The most common cause of a lower eyelid entropion is an age-related instability of the eyelid. Other less common causes of a lower eyelid entropion include previous trauma, chemical injuries, and inflammatory disorders of the conjunctiva on the inner aspects of the eyelids.

The most common cause of an upper eyelid entropion, on the other hand, are disorders causing shrinkage of the inside surface of the eyelid such as trachoma, and a rare inflammatory disease called cicatricial pemphigoid.

What are the symptoms of entropion?

An entropic eyelid irritates the eyeball, as the eyelashes are rubbing on the eye. This can lead to a cycle of ocular irritation, eyelid squeezing, and further entropion. Thus, symptoms of upper lid entropion include ocular irritation, watering, redness, and sore eyes.

Can entropion pose a risk to the eye and vision?

Untreated upper lid entropion carries a significant risk of injury to the cornea, which is the front 'window' of the eye. Complications of entropion include the following:

- Corneal abrasions (causing ocular irritation, watering and redness)
- Corneal ulcers (leading to more significant symptoms, which can include blurred vision, increased pain, sensitivity to light, and severe watering)

Treatment

The management of entropion depends on its cause, but it frequently requires an operation to turn the eyelid margin and eyelashes away from the eye. In the lower eyelid, an entropion is often corrected with tightening of the outermost part of the lid and either stitches to evert the lid, or a horizontal incision in the skin beneath the eyelashes similar to the upper lid. The procedure is usually performed in theatre as a day case, under local anaesthesia, and takes about 60 minutes. As in all cases, where there has been previous injury or surgery, the procedure may be more complex, but can usually still be performed under local anaesthetic, although sedation may also be required.

What can I do to relieve the symptoms of entropion, and protect the eye in the meantime?

Daily cleaning of the eyelids, and bland lubricants (such as Viscotears and Lacrilube ointment) can help to relieve any irritation, redness or soreness. Whilst waiting for surgery you may be advised to use some micropore tape to hold the lower lid down, consequently relieving the symptoms. Sometimes, Botulinum toxin can be injected to the eyelid to prevent the eyelid turning in. This is effective usually for 2-3 months. This is not however a permanent solution for entropion, but it can help to improve the symptoms and helps to break the cycle of eye irritation and lid squeezing.

What precautions are required after surgery?

After surgery, your eye will be padded overnight to help to reduce swelling and bruising. Once the pad has been removed, it is important not to rub or touch the eyelid, but to instill antibiotic drops as instructed, typically 4 times each day with an ointment at bedtime for two weeks. Swimming should be avoided for 2 – 3 weeks after surgery, but it is safe to fly within a few days.

A follow-up appointment is usually made within 10 – 14 days to monitor healing of the eyelid(s), and to check the vision and front surface of the eye. Although the stitches are dissolvable, these are often removed to reduce skin irritation.

What are the complications of entropion surgery?

Unfortunately, no operation is entirely without risk. Following correction of upper lid entropion, minor bruising and some redness – particularly along the lid margin, often occur. Other infrequent, but significant complications following surgery include:

- 1. Infection, Scarring:* incisions are 'hidden' in the upper lid skin crease or the rhytids ('laughter lines') at the outer corner of the eye, and tend not to be noticeable.
- 2. Recurrence of the entropion*
- 3. Irritation from the sutures, or from preservatives in the eye drops*