



PATIENT INFORMATION

Lower Eyelid Entropion (Inward Turning)

WHAT IS ENTROPION?

Entropion is the medical term used to describe an inward turning of the lower eyelid. The majority of entropion are due to laxity of the tissues of the eyelid as a result of the ageing process. The eyelid becomes unstable and can turn inwards causing the eyelashes to rub on the front surface of the eye. This can be very uncomfortable and therefore needs treatment.

Occasionally, scarring of the inside of the lid can pull the eyelid inwards. This is quite rare.

WHAT ARE THE SYMPTOMS?

Entropion can lead to a foreign body sensation in the eye, excessive tearing, redness and mucous discharge. There is also a chance of damage to the surface of the eye.

WHAT IS THE TREATMENT FOR ENTROPION?

An operation is usually needed to fix an entropion. The surgery lasts between 45 to 60 minutes and is performed with “freezing injections” (local anesthesia) as a day case procedure.

This operation will involve tightening of the lower lid, which will correct the lid laxity. You may have a small incision of 10-15mm with a few stitches at the outer corner of the eye or extending down from the edge of the eyelid. In combination with this, there may be other procedures performed depending on the cause of the entropion.

Sometimes a watery eye may persist after successful entropion surgery as the tear ducts may not be functioning and this may be corrected with further surgery if necessary.

WHAT SHOULD I DO IN PREPARATION FOR SURGERY?

Blood thinning medications such as aspirin, clopidogrel, rivaroxiban and warfarin can make bleeding more likely during and after surgery. If you are taking these drugs your doctor will tell you if and when to stop these medications prior to surgery.

You should also stop anti-inflammatory drugs like ibuprofen (Nurofen), fish oil, ginger, ginseng and garlic containing supplements 2 weeks before surgery.

WHAT HAPPENS AFTER THE OPERATION?

The eye will be padded after surgery and you can then return home to rest. You will be instructed when to remove the dressing over the eye. If no skin graft has been used the eye pad is usually removed the next day. If a skin graft is present then the dressing may need to remain in place for a few days. You will also be given a post-operative care leaflet that describes how to clean the eye and apply the medication that you will be given.

It is advisable to keep the operated area relatively dry for 7 days although showering is permitted once the dressings are removed.

Do not swim, wear your contact lenses or eye make-up for 2 weeks, and longer if the eye remains red.

You will usually need about one week off work.

WHAT IS THE FOLLOW-UP TREATMENT?

You will be given a clinic appointment for one to two weeks after surgery when the skin stitches will be removed by one of our nurses.

If a skin graft has been used then we may organise to see you in 2-3 days to remove the dressing.

WHAT ARE THE MAIN COMPLICATIONS FOLLOWING ENTROPION SURGERY?

1. **Recurrence:** Entropion surgery is generally very successful with 95% of patients corrected with one operation. A few people may require a second procedure some months later if the initial surgery fails to correct the lid position.
2. **Scarring:** this is normally hidden in the natural skin crease of the eyelid. Stitches may be visible for the first week, then, when they are removed, a faint scar is visible. The scar may seem a bit thickened & red for 6 to 12 weeks, becoming almost invisible after that period. Not every scar heals equally well. A thickened or reddened scar can be improved with silicone scar remodelling gel, but the treatment needs to be continued for months to have a good result.
3. **Infection:** this is very rare; occasionally the stitches may have an infective or inflammatory response, which settles with oral antibiotics or antibiotic ointment.
4. **Wound problems:** Wound healing issues such as the wounds splitting or coming apart are uncommon and can be managed by either letting the wound heal in by itself or by stitching the wound.

5. **Bleeding/Bruising** : If you experience bleeding from the wound or eye use an ice pack (or frozen peas are a good alternative) wrapped in a towel to apply firm pressure (without releasing) to the eye for 15 minutes by the clock and then repeat if the bleeding continues. Almost all cases of bleeding will settle with pressure. Infection is rare and is associated with a marked increase in pain, tenderness, swelling and redness. Most infections can be easily treated with a course of antibiotics.
6. **Corneal abrasion**: Very rarely an internal stitch may rub against the surface of the eye causing an intense scratching pain every time the eye is moved. If this fails to settle, put some of the antibiotic eye ointment in the eye and contact the eye clinic to be seen within a day.
7. ***Theoretical risk to vision***: any eyelid surgery carries the risk that an undiagnosed infection or bleed could damage the optic nerve. This is incredibly rare.
8. **Asymmetry of eyelid shape**: this is rare, but can occur.