

ENTROPION – EYELIDS THAT TURN IN



What is entropion?

Entropion is a condition in which an eyelid turns inward, rubbing against the eye, making it red, irritated, and sensitive to light and wind. If it is not treated, the condition can lead to excessive tearing, crusting of the eyelid, mucous discharge,

and irritation of the eye. A serious inflammation could result in damage to the eye. Entropion can be diagnosed with a routine eye exam. Special tests are usually not necessary.

What are the causes?

The condition occurs primarily as a result of advancing age with the consequent weakening of certain eyelid muscles. Laxity of the eyelid tendons, combined with weakening of these muscles results in the eyelid turning in. Entropion may also occur as a result of trauma, scarring, or other surgeries.

What are the symptoms?

When the lid turns inward, the lashes and skin rub on the eye. You may have a feeling that something is in the eye, or there may be excessive tearing, crusting of the eyelid, or mucous discharge. Irritation of the cornea (the clear part of the eye that allows light to enter the eye) may develop from lashes rubbing on the eye.

Is entropion serious?

A chronically turned in eyelid can result in acute sensitivity to light and wind, and may lead to eye infections, corneal abrasions, or corneal ulcers. If entropion exists, it is important to have a doctor repair the condition before permanent damage occurs to the eye.

What are the treatments?

Prior to surgery, the eye can be protected by taping the lower lid down and using lubricating drops and ointment.

There are a number of surgical techniques for successfully treating entropion and each surgeon will have a preferred method. The usual treatment for entropion involves tightening of the eyelid and its attachments to restore the lid to its normal position.

A non-incisional entropion repair, known as a Quickert procedure, may be performed as an in-office procedure under local anesthesia with little, if any, discomfort. This procedure requires two or three strategically placed sutures that will evert the eyelid. Although there is a significant chance of recurrence of the entropion after the Quickert procedure, it is an excellent treatment for patients who are not suitable for surgery, or until more definitive surgery can be performed.

The surgery to repair entropion is usually performed as an outpatient procedure under local anesthesia, and with the patient lightly sedated with oral and/or intravenous medications. You may have a patch overnight and then you will commonly use an antibiotic ointment for about a week.

What are the risks and complications?

In addition to the removal of the sutures, minor bruising or swelling may be expected and will likely go away in one to two weeks. Bleeding and infection, which are potential risks with any surgery, are very uncommon. As with any medical procedure, there may be other inherent risks that should be discussed with your surgeon.

Is the surgery effective?

Most patients experience immediate resolution of the problem once surgery is completed with little, if any, post-operative discomfort. After your eyelids heal, your eye will feel comfortable and you will not longer have the risk of corneal scarring, infection, and loss of vision.

Who performs the surgery?

Patients are most commonly treated by ophthalmic plastic and reconstructive surgeons who specialize in diseases and problems of the eyelids, tear drain, and orbit (the area around the eye).

You should look for a doctor who has completed an American Society of Ophthalmic Plastic and Reconstructive Surgery (ASOPRS) fellowship. This indicates your surgeon is not only a board certified ophthalmologist, but also has had extensive training in ophthalmic plastic surgery. When you are ready, you will be in experienced hands. Your surgery will be in the surgeon's office, an outpatient facility, or at a hospital depending on your surgical needs.

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