

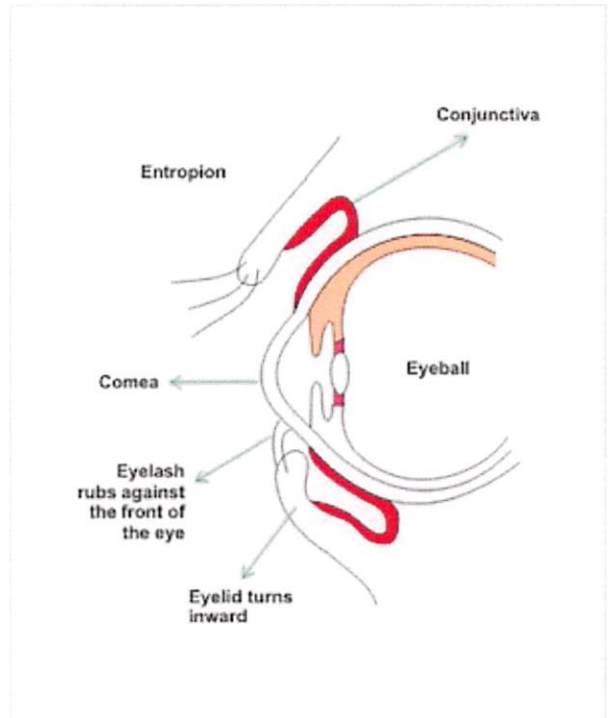
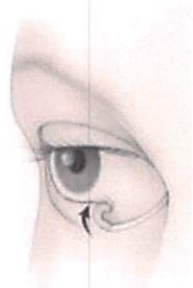
Department of Ophthalmology  
Outpatient Department: 01782 674100  
Emergency Eye Clinic: 01782 74300

## Information for Patients

### Entropion

#### **What is entropion?**

Entropion is inward turning of the eyelid. It causes the lashes and lid skin to rub the surface of the eye. This causes discomfort, watering and redness of the eye. If untreated it can lead to ulceration of the surface of the eye, followed by scarring which could cause loss of vision.



#### **What are the causes of entropion?**

- Lower lid entropion is usually due to ageing changes in the eyelid making it lax and prone to flip inwards. To begin with the entropion is intermittent but it often becomes constant later on.
- Entropion, especially if it occurs in the upper lid, can be due to scarring on the inside of the lid caused by infection, disease or injury.

#### **What is the treatment for entropion?**

Entropion is treated by lid surgery which is generally done under local anaesthetic as a day case.

Temporary treatments until surgery takes place include:

- Taping the lid skin to prevent the lid turning in. The doctor or nurse can show you how to do this.
- If your eye is sticky or infected, antibiotic drops will keep this under control until the operation can be carried out.
- Botulinum toxin injections to weaken the muscles that are pushing the lid inwards

#### **What types of operation are there for lower lid entropion?**

- **Everting Sutures**

Stitches are placed in the lid to stiffen it and stop it turning in. This is a quick operation, which can be carried out on both lower lids at the same visit. You will lie down on a couch

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and numbing drops will be put in your eyes. The lids are cleaned with an iodine-containing antiseptic solution. Local anaesthetic is injected in the lid which stings for a short while. The lid is then numb. The stitching only takes a few minutes. The stitches are absorbable and will dissolve and fall out over the next few weeks. At the end of the operation the antiseptic is washed off. Ointment is put in the eye and an eye pad may be put on. You will be taken to a comfortable chair to rest before you go home. You will be offered a drink and given ointment or drops to use for some days. You should rest at home for the rest of the day and not drive until you eye feels comfortable again. You will be seen in clinic a few weeks later.

- **Quickert's Procedure**

This is a bigger operation for entropion and is the one usually recommended if the entropion has returned after everting sutures. It takes about 45 minutes. You will be given a date for surgery as soon as possible.

Once again the surgery is done under local anaesthetic as described previously. Your whole face will be cleaned with antiseptic and sterile drapes put round your face. The lid is tightened by a small part of it being removed and the cut ends being stitched together. Everting sutures are also put in. The stitches do not need to be removed – they will dissolve and fall out. Ointment will be put in the lid and an eye pad put on.

Problems after Quickert's procedure are similar to those after everting sutures but can be a little more severe. It is rare for entropion to come back afterwards but if it does a Jones procedure is likely to help.

- **Jones Procedure**

Preparation for this operation is similar to that described previously. It takes about 45 minutes. A cut is made in the skin of the lid and deep stitches put in to tighten the muscle, which opens the lid (the lid retractor). All the stitches are absorbable. Aftercare and post-operative problems are similar to that for Quickert's procedure.

### **What types of operation are there for upper lid entropion?**

- **Anterior Lamellar Reposition**

A cut is made in the skin of the upper lid several absorbable stitches are put in to turn the edge of the lid outwards. Aftercare is similar to that for Quickert's procedure. The lid may look red and sore for some while afterwards but will settle back to a normal appearance after a few months. The operation takes about 45 minutes.

### **What about consent for the operation?**

Before your operation, usually on the day of surgery, you will be asked to sign a consent form. The form is signed both by you and the doctor. It is a permanent record to show that your operation and the type of anaesthetic have been discussed with you. When you sign the consent form you are indicating that you want to go ahead with the operation. If you are not happy with anything on the form you should not sign it until you have had your worries discussed and resolved. You can refuse any operation. Remember that you may need to bring your reading glasses into hospital with you to help you read the form. If your sight is poor you can ask the doctor or a relative to read it to you and check it before you sign.



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### *What happens after the operation?*

Leave the eye pad on for at least 2 hours - this will help to reduce bruising. Do not worry if there is some blood on the eye pad when you remove it. Clean the eyelids gently with cooled, boiled water and cotton wool or tissues. It is normal for the eyelids to appear swollen and bruised for the first week or so.

If your eyelid feels sore when the anaesthetic wears off, take painkillers like Paracetamol or Ibuprofen. The discomfort usually settles within one or two days. Use the ointment in the eye and on the stitches as instructed. If you have severe pain, not relieved by simple painkillers, please ring the Emergency Eye clinic (0178274300) for advice.

The surgeon will normally use dissolving stitches in your eyelid. These do not need to be removed and will drop out over several weeks.

### *What are the risks of entropion surgery?*

- Discomfort and bruising in the lids
- Occasionally the stitches irritate the eye and if necessary they could be removed in clinic.
- Infection of the eyelids. This is not common but if it does occur the stitches may loosen so that sometimes a gap develops in the lid. The lid will often still heal well especially if antibiotic tablets are given but may take longer to settle down.
- Recurrence of the entropion after months or years. This may be because the aging changes in your eyelid have continued. If it does occur your GP can refer you back to hospital for a further operation to be arranged.
- Eyelid scarring
- Rarely, the lid starts to turn outwards after the operation. Removing the stitches early may help this settle, but if they have already disappeared another operation may be needed to correct the position of the lid.

### **Contact Details:**

Please ask our staff any questions you may have about your treatment.

Should you have any further problems or queries please ring:

Ophthalmology Outpatient Department: 01782 674100  
Emergency Eye Clinic: 01782 74300

Alternatively, you can phone the main hospital switchboard on 01782 715 444 and ask to speak to your consultant's secretary.

### **Additional Sources of Information:**

To find out more about conditions relating to the eyes you can contact NHS Direct, Telephone 0845 4647 or visit them on the Internet at <http://www.nhsdirect.nhs.uk>

### **Dear Patient**

We welcome your views on suggestions for how things could be improved at this hospital. If you would like to tell us and others about your experience, make a comment or a complaint please contact:

- PALS - Patient Advice and Liaison Service 01782 552 814/552 317
- ICAS – Independent Complaints Advisory Service – contact details available from PALS