



Having surgery to treat a droopy upper eyelid (ptosis)

Ophthalmology department

Information for Patients

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What is ptosis?

Ptosis is the name used to describe the drooping of the upper eyelid. This can happen in one or both eyes.





What are the symptoms?

A drooping upper eyelid (ptosis) may affect your appearance but it can also affect your vision if it covers the upper part of your eye. A few people may get eyebrow ache, eye strain or tiredness, especially towards the end of the day.

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What causes ptosis?

Ptosis can be present at birth (congenital) or appearlater in life. It can be happen because of

- injury,
- infection or inflammation,
- long-term contact lens use,
- problems with nerves or muscles due to aging or injury,
- an underlying nerve or muscle problem.

What is the treatment for ptosis?

- If the drooping of the lid (ptosis) is mild, it does not need treatment.
- If it is more severe, surgery may help. Your surgeon will tell you if an operation is advisable in your case. Ptosis surgery may not be recommended in some eye conditions.
- In cases where people cannot have, or do not want, surgery, a ptosis prop may
 be offered. This is a simple thin plastic arm which attaches to a pair of glasses.
 When the glasses are put on it gently pushes the eyelid upwards and can work
 well at keeping the eyelid out of the vision.

What is the aim of ptosis surgery?

Ptosis surgery aims to

- restore the normal appearance of the eyelid,
- increase the field of vision by lifting the eyelid up,
- making it look similar to the other eyelid.

What does ptosis surgery involve?

- Ptosis surgery usually involves making a cut through the skin of the top eyelid and shortening the tendons or muscles which raise the eyelid.
- Sometimes the surgery is done through the underside of the top eyelid.
- In some people the muscles are too weak to lift the lid and instead a thread of artificial material is passed under the skin to attach the eyelid to the stronger muscles of the forehead. This is called a brow suspension operation.

Your surgeon will talk to you about the type of operation that is best for you. It
will depend on the cause for the drooping eyelid and the general health of the
eye.

What type of anesthetic will be used?

In adults, surgery is usually done with a local anesthetic (freezing the eyelid while you are awake) as this will allow adjustment of the eyelid position during the operation. You may even be asked to sit up during the procedure so that the height of the eyelid can be checked. However, local anesthetic with sedation, or general anesthetic can also be used. In children, ptosis surgery is usually done while they are asleep under a general anesthetic.

What happens after the operation?

- Ptosis operations are usually done as a day case, so you will be able to go home after the surgery. You will usually need about 1 or 2 weeks off work. You cannot drive.
- You may need to wear a pad over your eye after the operation. This can be removed the next morning.
- Expect some bruising and swelling, which may last for a few weeks. Ice packs
 used regularly for the first 2 or 3 days can help to reduce swelling.
- Sleeping sitting up a little (at a 45 degree angle) and not sleeping on the side that was operated on.
- Pain is usually fairly mild after a ptosis operation. Simple painkillers such as paracetamol will usually control it.
- You will have stitches in the eyelid. These will usually be dissolving (absorbable). They can be gently rubbed out with a facecloth after 2 or 3 weeks.
- Try to keep the area operated on dry for the first 5 days. You can have a shower and gently pat the lid dry afterwards.
- Swimming and eye make up is not advised for about 2 weeks.
- Contact lenses should not be worn for the first 6 weeks. They may increase the risk of the lid drooping again if you carry one wearing them. Please ask the eye specialist if this applies to you.
- You will be given eye drops and ointment to use.
- A clinic appointment will be made for a check-up.

What are the risks of ptosis surgery?

There is no guarantee of success with any operation and ptosis surgery is no different. The following are possible complications of ptosis surgery:

- Bruising and swelling of the eyelids (common).
- Scarring (usually hidden in the skin fold of the eyelid).
- Over-correction (eyelid too high) or under-correction (eyelid still too low), which may need further surgery (around 7% in our hospital).
- Poor contour of the upper lid or uneven eyelids.
- Worsening of any dry eye symptoms because the eye is wider open. You may need to use drops more frequently.
- Incomplete eyelid closure, which may leave the eye slightly open at night with a
 risk of the front surface of the eye becoming dry. This will need treatment with
 tear supplements and ointments until things settle.
- Wound infection which will need treatment with antibiotics.

Very rarely, there is a risk to vision because of bleeding behind the eye in the first few hours after the operation.

If you have

- severe pain,
- worsening vision,
- swelling and a sensation that the eyeball is pushing forward you must return to the ward immediately.

Contact details

If you have any concerns please call your ocular plastics team on 0116 204 7971 or if you have any urgent queries please contact Eye Emergency department on 0116 258 6273

Make a note of any questions you want to ask here:
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