



# Removing eyelid lesions

Lumps in the eyelids (eyelid lesions) are very common and have a variety of causes, ranging from harmless (benign) cysts to cancerous (malignant) cells. You may need to have your lesion surgically removed for functional (e.g. to improve your vision) or to identify the cause of the lesion. If there is anything you do not understand or you have further questions after reading this leaflet, please do not hesitate to speak to a member of the team treating you.

## Types of surgery

There are three ways in which eye lesions can be surgically removed:

**Punch biopsy:** a circular blade is used to punch a small hole in the skin of the eyelid to remove a cylindrical core of tissue. The removed tissue is then examined to identify the nature and cause of the lesion. Punch biopsies are a type of **incisional biopsy**, where a small area of tissue is removed during surgery to identify the makeup of the lesion.

**Excisional biopsy:** a small knife (scalpel) is used to remove the entire eyelid lesion and a portion of surrounding normal skin. The normal and abnormal (lesion) skin later examined to identify the exact area

affected by the lesion and its underlying cause.

## Mohs micrographic surgery (MMS):

MMS is a special type of surgery used to remove cancerous cells in areas of the body, such as near the eyes, where it is important to remove as little skin as possible. The surgery involves the removal of the lesion and a small area of surrounding skin. The removed tissue is checked under a microscope for cancerous cells. This process is repeated until the entire lesion has been removed. MMS reduces the amount of healthy tissue that is removed and post-surgery scarring while ensuring the complete removal of cancerous eyelid lesions. In most of the cases, the eyelid is later reconstructed by the surgeon.

## Your treatment at Moorfields

At your initial appointment at Moorfields, you will be seen in the outpatient clinic by an ophthalmologist (a doctor specialising in eyes) who is specially trained to carry out plastic and reconstructive surgery on the eye socket and eyelids. He or she will talk to you about the different surgical options available to you.

Sometimes a biopsy on the eyelid can be performed in the outpatient clinic. In



most cases, however, a surgical procedure in an operating theatre is required. If you decide to have an operation following your consultation, you will need to have a pre-operative assessment. This is usually completed by a nurse at a pre-arranged time either in person or over the phone.

### Before surgery

You should stop taking any medicines containing aspirin, clopidogrel or ibuprofen 14 days before the operation. If you take warfarin, you will need to stop taking it three days before the operation. **Please talk to your GP or anticoagulation specialist before you stop taking your medication to check that it is safe for you to do so.**

### On the day of your surgery

Eyelid surgery to remove lesions is usually performed as a day case under local anaesthetic. This means you will be awake during the operation, however you will be given an injection into the affected eyelid to numb the area before the surgery and eye drops to make you feel more comfortable. If it is decided that you require a general anaesthetic, you will be asleep for the entire operation. Your surgery will be performed or supervised by an experienced eyelid surgeon.

### How long will I be in hospital for?

You should expect to spend half a day in hospital, but you will be free to go home once you have recovered from your anaesthetic.

### Should I drive to the hospital for my operation?

We advise you not to drive to the hospital for your operation. After the surgery, a pad will be placed over the affected eye which will affect your vision. Please try and arrange for a friend or family member to take you to and from the hospital.

### After your surgery: removing the eye pad

You can usually remove the eye pad one day after your operation. It is important that you wash your hands with soap and water before removing the pad and that you put the pad in the bin once you are finished with it.

Before leaving the hospital, you will be given gauze, normal saline and eye ointment. After removing the eye pad, gently bathe the affected eye with the gauze and normal saline.

### Medication

You will be given an eye ointment (chloramphenicol ointment) to apply to the operated eye four times a day (during waking hours) for 10 days. To apply the ointment, put approximately 1cm of the eye ointment on a clean fingertip and gently apply to the area where the stitches are or place directly on the wound. You should also apply the ointment into the eye(s) that have been operated on.

Please carry on using any other eye drops that you were prescribed before the surgery unless the doctor treating you has advised you to stop.



## Removing the stitches

After a biopsy, the wound is usually left open until it is confirmed that all abnormal tissue has been removed. If you have had reconstructive surgery on your eyelid, the stitches are usually removed in the outpatient clinic two weeks after the operation.

## What are the risks of this procedure?

- bruising and swelling usually occurs around the operated eyelid. This usually goes away within one to two weeks.
- bleeding and infection.
- scarring, depending on the extent of tissue removed.
- **damage to the eyeball, nerves in the eye and other surrounding structures in the eye can occur, although this is very rare.**

## When to seek help

If you experience any problems with your eye following your operation, such as bleeding, increasing pain or worsening vision, please go to Moorfields A&E department in City Road immediately (open 24/7 for eye emergencies only). Alternatively, you can go to your local A&E department to be seen. You can also contact the Moorfields Direct telephone helpline for advice (please see details at the end of this leaflet).

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**[www.moorfields.nhs.uk](http://www.moorfields.nhs.uk)**

## Moorfields Direct telephone helpline

Phone: 020 7566 2345  
Monday-Friday, 8.30am-9pm  
Saturday, 9am-5pm  
Information and advice on eye conditions and treatments from experienced ophthalmic-trained nurses.

## Patient advice and liaison service (PALS)

Phone: 020 7566 2324/ 020 7566 2325  
Email: [moorfields.pals@nhs.net](mailto:moorfields.pals@nhs.net)  
Moorfields' PALS team provides confidential advice and support to help you with any concerns you may have about the care we provide, guiding you through the different services available at Moorfields. The PALS team can also advise you on how to make a complaint.

## Your right to treatment within 18 weeks

Under the NHS constitution, all patients have the right to begin consultant-led treatment within 18 weeks of being referred by their GP. Moorfields is committed to fulfilling this right, but if you feel that we have failed to do so, please contact our patient advice and liaison service (PALS) who will be able to advise you further (see above). For more information about your rights under the NHS constitution, visit [www.nhs.uk/choiceinthenhs](http://www.nhs.uk/choiceinthenhs)