Moorfields Eye Hospital NHS Foundation Trust

Patient information – adnexal

Entropion

What is entropion of the eyelid?

Entropion is a condition in where the eyelid turns inward, resulting in the eyelashes being directed towards the surface of the eye causing discomfort. If left untreated, it can cause excessive watering, crusting of the lid, discharge, irritation and infections. Serious inflammation of the surface of the eye could cause permanent damage and impair sight. Both eyelids can be affected, although the condition more commonly affects the lower lids.

Why do the eyelids turn inwards?

Entropion most commonly occurs due to changes in muscles and other tissues around the eye as a result of ageing. Occasionally, scarring of the inner lining of the eyelid due to infections, injury or inflammation can also cause the lid to turn in.

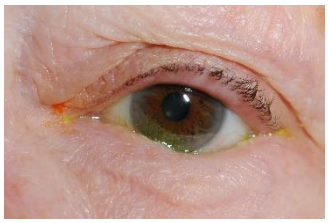

Image of entropion

How will I know if I have entropion?

When the lid turns inward, the skin and lashes rub on the surface of the eye. You may feel that something is in the eye, or notice excessive watering, crusting of the eyelid or discharge.

How is entropion diagnosed?

Entropion can be diagnosed by a routine eye examination with an optician or ophthalmologist. Special tests are not usually necessary.

Is entropion a serious condition?

If left untreated, entropion can lead to sensitivity, scratches and infections of the surface of the eye which could be sight threatening. If entropion is present, it is important to have the condition treated before permanent damage occurs to the eye.

How can entropion be treated?

Temporary relief of entropion can be achieved by taping the eyelid or by having an injection to weaken the muscle that causes the lid to turn in. This usually happens before a small operation can be performed for more permanent relief.

How do I tape the eyelid?

Ensure that the skin around the eye is clean and dry. Apply a strip of special tape (bought from a chemist e.g.

Blenderm/Micropore) from below the edge of the eyelid towards the cheek.

Image of eyelid taping

The tape holds the lid in its normal position. It might be necessary to change the tape daily but must be left undisturbed once in place. It is important that once the tape is in place, you are able to close the eye without squeezing to prevent the eye from becoming dry.

What happens when I come to hospital?

When you are first referred to Moorfields, an eye doctor (oculoplastic specialist ophthalmologist) will see you in the outpatient clinic.

After we have discussed your options and you have decided to have the operation, you will need to have a pre-assessment.
This is usually done over the phone at a nurse at a pre-booked appointment.

What kind of anaesthetic is necessary?

This procedure is usually performed as a day case under local anaesthetic. This means you will be awake during the operation but will have an injection into your eyelid to numb the area beforehand.
You will also been given eye drops to make you feel more comfortable.

On the day of surgery

You are allowed to eat and drink on the day of surgery and take your tablets as normal apart for any anticoagulants such as Aspirin, Clopidogrel and Warfarin.
You must stop Aspirin and Clopidogrel 14 days before surgery and Warfarin for three days before, ONLY if your GP or anticoagulation specialist tells you that it is safe to stop them. You can start taking them again the day after the surgery.
If you are on Warfarin, you will need to have an INR blood test within seven days before surgery. Please bring the yellow anticoagulant book with the results with you on the day of surgery.

What does the operation involve?

The operation involves tightening and repositioning the affected tissues at the outer edge of the eyelid along with some stitches to stop the lid turning in, so that the eyelid rests in a normal position. Stitches are also used to close the wound at the end of the operation.
A pad will be placed over the eye at the end of the operation.

Is the operation effective?

The problem will resolve for the majority of the patients shortly after the surgery is completed, with only temporary discomfort. After your eyelids have

healed, your eye will feel comfortable and you will no longer have the risks of infections, scarring or loss of vision.

Who will perform the operation? An experienced eyelid surgeon will carry out the operation or will supervise a fellow, who also performs some operations.

Does the operation have any risks?

Bruising or swelling could occur around the area operated on but is likely to go away in one to two weeks. Bleeding and infection, which are potential risks with any surgery, are uncommon. Occasionally, the condition could reoccur over time or the lid position could be over-corrected, which might require a further operation. Where incisions are made there will be scarring which is usually placed in a natural wrinkle line and should be minimally visible. Very rarely damage to surrounding structures, including the globe (eyeball), and nerves can occur.

Should I drive to the hospital for the operation?

We advise you not to drive to this appointment because a pad is placed over the eye at the end of the procedure, meaning that you will not have full vision. It is advisable to bring a friend or family member with you to help you get home after the operation.

How long will I be in hospital for?

The operation takes around 45 minutes per eyelid. You should expect to spend half a day in hospital but will be free to go home an hour or so after the procedure.

AFTERCARE

When can I remove the pad?

The pad is usually removed the day after the operation.
Before removing the pad, please wash your hands then remove your eye pad and discard it. Bathe the eye gently with the gauze and saline solution provided to you by the nurse prior your discharge from hospital. Put some of your eye ointment (approximately 1 cm) on a clean finger-tip or directly on the wound and gently apply to the area where the stitches are. Also apply the ointment into the eye(s) that have been operated on.

Please carry on with any other eye drops you were prescribed before the surgery, unless the surgeon advised you to stop them.

What happens to the stitches?

The wound is closed with stitches that are usually removed in the outpatient clinic two weeks after the operation. This appointment will be made for you after your surgery.

If you experience any problems such as increasing pain, worsening vision or bleeding following your operation, please call your local Eye clinic or our telephone advice line on 020 7566 2345, open Monday to Friday from 9am to 9pm and 9am-5pm on Saturdays. At all other times please contact your GP,

or visit our 24-hour specialist A&E department at our City Road hospital.

FOLLOW UP APPOINTMENT

……..

……

Author: Mr. George Saleh and Sister Crina Guarino
Revision number: 3
Approved date: May 2021
Review date: May 2024

Moorfields Eye Hospital NHS Foundation Trust
City Road, London EC1V 2PD
Phone: 020 7253 3411
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
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