

# Ptosis repair

To improve eye lid position

---



## Information for patients

Ophthalmology (Ocular Plastics)



Large Print

**PROUD TO MAKE A DIFFERENCE**

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST



This leaflet explains about the problem you have, and how surgery can be used to treat it.

You have been given a separate booklet about the treatment centre you will be attending. Please refer to it for information about:

- Your anaesthetic
- How you need to prepare
- Where you need to go
- What happens after the procedure

Please read this booklet carefully before you come in. You may want to read it with a friend or relative.

## **What is ptosis?**

Ptosis is the term used for drooping of one or both upper lids. This can mean the lid covers part of the pupil, resulting in a restricted field of vision.

## **What is it caused by?**

Sometimes ptosis may be present at birth.

More often it develops later in life. This may be caused by an injury, or due to some conditions (such as a facial palsy). The most common reason is weakening of the muscle which raises the upper lid. This occurs in some people with age.

## **What are the problems associated with ptosis?**

The main things you may experience are:

- Reduced field of vision due to the eyelid partly covering your pupil.
- Tired eyes or headaches from straining to hold your eyes wider open to see more.

## **What does ptosis surgery involve?**

There are several techniques for repairing ptosis. The most common approach is to shorten the weak muscle in the eye lid. This results in raising the position of the upper eye lid.

Before starting the operation, the surgeon will take some measurements of your eyelid. They can then calculate how much they need to shorten the muscle by.

A small incision is made along the natural skin crease in the upper eyelid. They can then shorten the muscle, and re-stitch it into its new position.

## **How long does the procedure usually take?**

Typically it takes about 45 - 60 minutes.

## **Will I have stitches?**

Yes. You will have a follow up appointment in clinic usually 2-3 weeks after surgery to have these removed, and to assess the results of the surgery.

## **What are the risks of this operation?**

All operations have some level of risk.

The risks for this operation are detailed below. The surgeon will discuss these with you when you sign the consent form before your operation.

There are some common effects of the surgery, which normally settle gradually:

- Bleeding from the wound
  - settles within a few hours
- Bruising and swelling of the eyelids
  - your eyelids may initially appear uneven or too high due to this swelling
  - the swelling settles within a few days
- Scarring after surgery
  - this gradually fades away over a few weeks
  - the scar lies in the natural crease of your upper eyelid

There is often a continued improvement in the appearance of your eyelid for several months.

## **There can occasionally be some problems after the surgery, which may require further attention:**

- Infection of the wound
  - we provide you with an antibiotic cream to use after surgery which helps prevent this
  - you may require oral antibiotics if an infection develops
- May exacerbate an existing dry eye problem, or cause a new problem of dry eye
  - may require use of artificial tears
- Poor closure of the eye, especially when sleeping

## **Sometimes further surgery may be required** for the following reasons:

- Over-correction or under-correction, or the eye may not close fully when sleeping
- Problems to the cornea caused by incomplete closure of the eye.
- Re-occurrence of the ptosis

If the eyelid is unable to close completely, the cornea (the clear part of the front of the eye) may be affected. This may cause some blurred vision, and in extreme cases, loss of vision.

Sometimes there may be a slight asymmetry between the eyelids or poor contour (shape of upper lid not correct):

- NB: Please note the NHS will not do cosmetic surgery, so further surgery is likely to be declined in such cases

## **If I choose not to have surgery what could happen?**

The position of your eyelid will not improve without an operation. Your symptoms may vary over time, but they will not resolve fully.

If the lid droop worsens this may continue to reduce your visual field. This may affect your driving. For some patients, this may also make getting about problematic, and increase the risk of falling.

## **Are there any alternatives to surgery?**

For some patients, an alternative can be to wear specially adapted glasses which support the eyelids. This raises them slightly. However these can be uncomfortable to wear for long periods of time. This is not a permanent solution.

If you have any further questions you can contact the oculoplastic team on:

**0114 271 1727** (Monday to Wednesday)

**0114 226 8964** or **271 2365** (Monday to Friday)



**Sheffield  
Hospitals  
Charity**

To help support your local hospitals visit  
[sheffieldhospitalscharity.org.uk](https://sheffieldhospitalscharity.org.uk)

Registered Charity No. 1165762



**Yes I donate**  
ORGAN DONATION

**Alternative formats can be available on request.**

**Please email: [alternativeformats@sth.nhs.uk](mailto:alternativeformats@sth.nhs.uk)**

**© Sheffield Teaching Hospitals NHS Foundation Trust 2019**

Re-use of all or any part of this document is governed by copyright and the "Re-use of Public Sector Information Regulations 2005" SI 2005 No.1515. Information on re-use can be obtained from the Information Governance Department, Sheffield Teaching Hospitals. Email [infogov@sth.nhs.uk](mailto:infogov@sth.nhs.uk)