

# Ectropion repair

To improve eye lid position

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## Information for patients

Ophthalmology - Ocular Plastics



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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 an ectropion?**

An ectropion is when the lower eyelid becomes loose, and turns outwards away from the eye. This causes the inner lining (conjunctiva) to become dry and sore. The front part of the eye (cornea) also becomes exposed and could become damaged.

## **What causes an ectropion?**

The main cause is due to weakening of muscles within the eyelid. Therefore it is more common in older people. Other causes can include previous scarring or trauma on or near the eyelid, or a weakness in the facial muscles (facial palsy).

## **What are the problems associated with an ectropion?**

The main things you may experience are:

- Sore and red conjunctiva and cornea
- Watering of the eye
  - tears pool inside the drooping lid and cannot drain away as normal
  - these excessive tears can irritate the skin around the eye
- Stickiness and discharge from the eye

## **This can lead to:**

- Damage to the cornea
  - the lids may not close sufficiently to keep the eye protected
  - this can eventually cause scarring, permanently affecting your eyesight

## **How can it be treated?**

The only way to permanently correct an ectropion is with a minor operation. Usually this involves making one or more small incisions in the outer and/or inner corners of the lower eyelid. The eyelid is then put back into a better position using stitches. This prevents the eyelid from rolling outwards.

Occasionally, a small skin graft may be required. Your doctor will tell you if you need a skin graft. The skin used for the graft is usually taken from your upper eyelid (if there is enough excess skin available), or from behind or in front of your ear.

## **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
  - settles within a few days
- Scarring after surgery
  - this usually fades away over a few weeks

## **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
- Development of a granuloma (benign lumpy growth that forms near a stitch)
- Failure to improve 'watery eye' symptoms

## **Sometimes further surgery may be required:**

- Re-occurrence of the ectropion - the lid may droop outwards again
- Under-correction - lid may not be tight enough
- Over-correction - lid may be too tight (this may relax over time without further surgery)

## **Sometimes there may be a slight asymmetry between the eyelids or an altered appearance of the lid:**

- 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 unfortunately will not improve without an operation. Your symptoms may vary over time. However, continued exposure of the cornea can cause severe damage which can result in reduced vision. Soreness of the conjunctiva and eye is also likely to persist, and can worsen over time if left untreated.

## **What can I do to reduce irritation to my eye before my operation?**

To protect your eye and reduce symptoms you can try using artificial tears.

### **Artificial tears moisturise the cornea and can reduce the irritation:**

- See your GP or pharmacist for an appropriate eye lubricant
- Use the lubricants several times a day for best effect

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)



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