

Staged excision and reconstruction of eyelid tumours



Information for patients

Ophthalmology (Ocular Plastics)



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You have been listed for surgery to remove a cancerous tumour from your eye lid. Your surgery will be in 2 or more separate stages, usually 3 days apart. This leaflet explains what happens at each stage. You will come in for a pre-operative assessment with a nurse to check your health and confirm your surgery dates.

Your surgeon:

Stage 1 - removal of tumour

Theatres:	
Location:	
Day:	
Date:	
Time:	

Stage 2 - reconstruction

Theatres:	
Location:	
Day:	
Date:	
Time:	

Stage 2+ - reconstruction

Theatres:	
Location:	
Day:	
Date:	
Time:	

How could this tumour affect my eyelids?

The upper and lower eye lids protect your eye. They do this by:

- Distributing tears to moisturise the surface of your eye
- Cleaning the front 'window' of the eye - the cornea
- Keeping dust and dirt out
- Protecting your eye when sleeping

The tumour may change the shape of your eyelid, or affect the surrounding tissue. This can cause irritation to the eye. If left untreated, the tumour can become larger, and cause further problems, such as affecting the eyeball, or deeper tissues in the eye socket.

How is a skin tumour removed?

Cancers of the skin can be removed by relatively minor surgery, usually whilst you are awake.

When a surgeon removes a cancerous tumour from the skin they need to be sure to also remove a clear margin of healthy skin from all the way around it. This helps avoid leaving any cancer cells behind.

Why do I need more than one operation?

To help ensure complete removal of the tumour, we need our laboratories to examine the skin we take away in detail. This usually takes 2-3 days, so therefore the stages are necessary.

Will this be done while I am awake or asleep?

Normally all stages are done under local anaesthetic. This means you are awake, but the area being operated on is numbed. Any stages after the first may be done with sedation (a relaxant) or general anaesthetic (completely asleep).

Stage 1: removal of the tumour

At stage one the surgeon will remove the tumour. They will also take a surrounding margin of healthy skin. These are sent to the laboratory for a detailed analysis by a specialist pathologist, using a microscope.

Your wound is sometimes left unstitched. We will put a lot of antibiotic ointment on the wound and secure a dressing over your eye.

Between stages - care at home

You do not need to change your dressing. Leave it in place until you return for your further stage/stages. Your wound may be uncomfortable: we recommend you have simple painkillers available at home.

Your wound should not bleed between stages: please phone us (contact numbers at the end of this booklet) for advice if it does. If you have any problems with your dressing please phone us or contact your GP.

Please note:

- Because your eye will be covered for several days you need to think how this may affect what you normally do
- You will probably find it harder to do everyday things such as walk about, cook, and go to the shops
- This is especially important if your vision is already limited
- You may wish to arrange for a friend or relative to help you
- We strongly recommend you do not drive

Stage 2+: reconstruction

Between stages, the pathologist will examine the tumour. They will send your surgeon a report stating whether the tumour removal was complete, and if an adequate margin of healthy skin was achieved.

Your surgeon will decide what to do next based upon this:

- If some cancer was missed, your surgeon will remove more skin
- If all the cancer was removed there is no need to remove any further skin

NB: Occasionally some patients require a third stage of surgery to ensure all the affected skin is removed. This would delay the reconstruction by 2-3 days.

Reconstruction of your eye lid can now take place. How this is done will depend on how much skin has been removed. Some patients may only need a few stitches; others may need more complex surgery, sometimes involving a skin graft. Your surgeon will discuss this with you on the day.

When reconstruction is complete your wound will be stitched. You will be sent home with an eye dressing in place.

Care after stage 2

You can usually remove your eye dressing the next day. You will be given antibiotic ointment to apply to the wound for a few days. You will also need to bathe your wound to keep it clean. Your surgeon and nurse will advise you about this, and give you an information leaflet about after care.

Any bruising or swelling will gradually settle. An ice pack wrapped in a clean cloth can help to reduce this swelling. You can take simple painkillers if you experience any discomfort.

You will usually have a follow-up appointment in clinic 2 to 3 weeks after your operation. Your stitches are usually removed at this time.

What are the risks associated with this operation?

All operations have some level of risk. 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
 - this usually 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 usually settles within a few days
- Scarring after surgery
 - this gradually fades away over a few weeks

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 to prevent this
 - you may require oral antibiotics if an infection develops
- The eye may become watery, especially if the tear duct is involved
- Development of a granuloma (benign lumpy growth that forms near a stitch)
- Skin graft complications (if you require a skin graft, your surgeon will explain the risks to you)

Sometimes further surgery may be required:

- As this procedure involves removal of skin from your eye lid, there may be an altered appearance of your lid. This depends on the extent of your surgery, the size of the tumour removed, and how your skin tends to heal. You may notice:
 - changed lid position
 - distortion or notching of the lid
 - loss of eyelashes
 - asymmetry between the eyelids
- NB: The NHS will not do cosmetic surgery, so further surgery may be declined in such cases. This would be assessed on an individual basis.
- Occasionally the tumour may re-occur, some months or years later. This would require further surgery to remove this.

Hopefully this leaflet has answered your questions about this procedure.

You will have the chance to discuss it further with your nurse at your pre-operative assessment.

Your assessment nurse:

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Who should I contact if I have any concerns?

If you have any queries or problems after your surgery, please contact us on these telephone numbers:

Oculoplastics team (including assessment nurses):

- **0114 226 8964** or **0114 271 2365**

Monday to Friday, 8.00am - 5.00pm

- **0114 271 1727**

Monday to Wednesday, 8.00am - 5.00pm

Emergency eye centre (problems after surgery):

- **0114 271 2726**

Monday to Friday, 8.00am to 5.00pm

Out of hours emergencies only:

Ward I1 (weekends and bank holidays):

- **0114 271 2540**



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