

Information for patients and carers

Entropion

What is entropion?

Entropion is a condition in which your eyelid, usually the lower one, is turned inward so that your eyelashes rub against your eyeball. As a result, your eye can become:

- Sore, red and irritated
- Watery

Entropion mainly affects the lower eyelid and can occur in one or both eyes. It is not usually serious, but it can be uncomfortable. If the condition is left untreated, it can lead to ulcers (sores on the eye surface), infections and scarring of the surface of the eye.

What causes entropion?

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

How can we treat entropion?

Temporary relief of entropion can be achieved by using lubricant eye drops and taping the lower lid into the correct position.

It is also possible to temporarily treat entropion with Botox injections. Small amounts of Botox are injected into the muscles of the lower eye lid. This weakens the muscle and helps turn the eyelid out. This is not a permanent solution but can last up to 4 months.

For a long-term solution, surgery is usually recommended.

Entropion repair surgery

Surgical treatment involves a minor operation to turn the lid outwards to its normal position. The operation usually takes around 60 minutes and is performed as a day case, so you will not have to stay in hospital overnight.

The procedure is normally done under a local anaesthetic injection to numb the eyelid. This means you will be awake but will not be able to feel anything. It is also possible to have this procedure with a sedating medicine given into a vein to relax you. The operation is rarely performed while asleep under general anaesthetic.

It is normal for the eyelid to be bruised and swollen for 1-2 weeks after the operation. Also, tenderness at the outer corner of the eyelid can last for several weeks

Benefits and risks of surgery

All surgery carries risks and benefits. It is important that you consider both before deciding to proceed.

Benefits include:

- Correction of the abnormal position of the eyelid
- Improved symptoms of excessive tearing, crusting of the eyelid discharge and eye discomfort
- Reduced chances of corneal infection

Risks can include:

- Bleeding
- Bruising-it is normal for the eyelid to be bruised and swollen for 1-2 weeks after the operation
- Pain

- Tenderness at the outer corner of the eyelid. This can last for several weeks
- Scarring
- Infection
- Eye Irritation
- Watery eye
- Recurrence of entropion
- Over or under correction of eyelid position
- Asymmetry
- Eye or orbital damage with loss of vision (rare-less than 0.1%)

Follow up care

You may be prescribed ointment to put onto the wound to keep it comfortable and reduce the chance of an infection.

You may be given some cold compresses to use for the first few days.

Patients may resume clerical, or light physical work one week after surgery but it is advisable to wait longer if your work is more active or strenuous.

You will be seen 1-2 weeks after the surgery. The operation involves small sutures. Some types of suture need removing 1 week after the surgery, some will dissolve on their own

Contact details

Should you require further advice or information please contact:

Lancashire Eye Centre Oculoplastic secretaries:

01257 245058 or 01772 521392

If you have an urgent sight-threatening problem, please telephone our nurse triage line between 09:00-16:30 on **01257 245346**.

Outside of these hours, please attend the hospital emergency department.

Sources of further information

www.lancsteachinghospitals.nhs.uk

www.nhs.uk

www.accessable.co.uk

www.patient.co.uk

<https://bepartofresearch.nihr.ac.uk/>

www.bopss.co.uk

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Our patient information group review our leaflets regularly, if you feel you would like to feedback on this information or join our reading group please contact on email address:

patientexperienceandinvolve@LTHTR.nhs.uk

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