

Information for patients and carers

Ectropion

What is ectropion?

Ectropion is a condition in which the lower eyelid turns outward and no longer touches the eye. This can expose the surface of the eye and lead to:

- Watery eyes
- Redness and irritation
- Grittiness or dryness
- Increased sensitivity to light
- Discharge or crusting

If left untreated, ectropion can increase the risk of infection, corneal damage or ulcers.

What causes ectropion?

The most common cause is age-related weakening of the eyelid's supporting tissues. Other possible causes include:

- Facial nerve palsy (e.g., Bell's palsy)
- Previous eyelid surgery or trauma
- Skin conditions that cause scarring
- Long-term sun damage
- Tumours near the eyelid (rare)

How can we treat ectropion?

Lubricant eye drops or ointments can provide short-term relief by protecting the eye surface and easing discomfort. Taping the eyelid may help temporarily.

However, in most cases, a surgical procedure is recommended to correct the position of the eyelid and prevent further problems.

Ectropion repair surgery

Surgical repair is a short procedure (usually 30–60 minutes) performed as a day case, meaning you can go home the same day.

The operation is most often done using a local anaesthetic injection to numb the area. You may also be offered a mild sedative to help you relax. General anaesthetic is rarely required.

The specific surgical technique used will depend on the cause of the ectropion but typically involves tightening the eyelid and repositioning its attachments to restore normal alignment.

Benefits and risks of surgery

As with all surgery, there are potential risks and benefits you should consider before deciding to proceed.

Benefits include:

- · Restoring the normal position of the eyelid
- Relief of symptoms such as eye watering, irritation, and discharge

- Improved eye protection and reduced risk of corneal damage or infection
- Enhanced cosmetic appearance

Risks can include:

- Bruising and swelling (common and short-term)
- Mild pain or tenderness, especially near the outer corner of the eye
- Bleeding
- Infection
- Scarring
- Over- or under-correction of eyelid position
- Recurrence of ectropion
- Asymmetry or a change to the shape of the eyelid
- Watering of the eye
- Rare risk of damage to the eye or surrounding structures causing loss of vision (less than 0.1%)
- Enhanced cosmetic appearance

Follow up care

After surgery, you may be prescribed an ointment to keep the wound moist and reduce the risk of infection.

- Avoid strenuous activity for the first two weeks
- You may be able to return to light work (such as office-based jobs) after a week

· Use cold compresses to reduce swelling during the first few days

You will be seen in clinic 1–2 weeks after surgery. Any stitches you have may dissolve on their own or be removed at this visit.

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:

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