

## **What is Ptosis (Blepharoptosis):**

Drooping of the upper eyelid below its normal position is called ptosis.

### **Why does ptosis occur:**

The commonest cause is weakening of the muscle that lifts the eye lid. This can be due to age related weakening, long term contact lens wear, trauma, paralysis or some other neurological conditions or mechanical reasons etc. It can also be due to a birth abnormality.

### **What is the treatment for ptosis:**

This depends on the underlying cause and is often surgical. There are some situations where treatment may not be possible.

### **Ptosis surgery:**

The main idea of the surgery is to shorten or advance the muscle that lifts the eye lid thereby raising the level of the open eye lid higher.

Most commonly an incision is made in the skin of the upper eyelid. The outer muscle layer is divided and the deeper muscle that lifts the lid is identified, separated and re-attached in usual position with or without shortening thereby elevating the eyelid to the correct position. The operation is commonly performed under a local anaesthetic. During the surgery the patient will still be able to move the eye and eyelid and will be asked to look up and down to try and help the surgeon get the eyelid in the correct position.

Post-operatively the eye is patched overnight . There may be need for some pain relief for the first 24 hours or so. The stitches in the skin are generally left to dissolve on their own. Patients need to use some eye drops/gel and apply an ointment on the lid wound for a few weeks. Bruising and swelling generally settle in a few weeks. Occasionally the lid height may need to be adjusted within a week or so. If there is Ptosis of both upper eyelids then it is likely that each operation will be done on separate occasions.

**Complications:**

Bruising and swelling is normal and will resolve in a couple of weeks. It is quite common for the eyes to feel gritty and uncomfortable in the first few weeks.

There is small risk of bleeding in the first 48 hours or so.

There is also a small risk of infection and scarring although the scar is in the normal skin crease and tends to fade with time.

Post-operatively the height of the eyelid may not be exactly at the desired position despite all precautions being taken. In some cases further surgery may be required either to elevate the eyelid further or bring it down from an overly high position.

Over time in the following weeks and months the eye lid may drop slightly and in the longer term there is a risk of recurrence of ptosis. Immediately after ptosis surgery, the un-operated opposite lid may drop somewhat. This is due to neurological factors and may change over time.