

BRIEF EXPLANATION ON DISORDERS OF EYELIDS

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Abstract

This paper describes about congenital anomalies and diseases of eyelids with their treatment.

Introduction

Eyelid is a very important structure of the eye. It mainly resurfaces the tear film which is optically very important. It is also useful for the ocular defense mechanism. The important factor for eyelid disorder is it can create misdirection of the eyelashes which can create corneal opacity, tear film breaks etc.

Congenital Anomalies of Eyelid

Symblepharon:

Here, Palpebral conjunctiva is attached to the Bulbar conjunctiva.

Ankyloblepharon:

Here, upper lid margin is attached to the lower lid margin.

Ectropion:

Here, eyelid margin are outwards. Simultaneously, eyelid direction will be changed. In this case, usually due to improper eyelid closing it can create Dry eye as Tear Film Break up Time will be reduced compared to normal range.

Entropion:

Here, eye lid margin are inwards. Simultaneously, eyelid direction will also be inwards. It can create corneal opacity and Dry eye also.

Trichiasis:

It means misdirection of the eyelashes. It mainly occurs due to abnormality of Eyelid margin. It may cause corneal opacity; Tear film break up also.

Coloboma:

Coloboma is incomplete closure of Embryonic Fissure of the particular organ. Means here of the eyelid.

Common Treatment Methodology for the Above Conditions are as Follows:

- Epilation
- Electrolysis
- Electrodiathermy
- Cryotherapy
- Permanent Destroy Hair Roots
- Soft Bandage Contact Lenses

Epilation:

Here, eyelashes are removed by the cilia forceps.

Electrolysis:

It is done under local anesthesia. 2 mAmp current is used. Here, fine needle is passed in the hair follicle.

Electrodiathermy:

Here, 30mAmp current is used and it is stayed up to 10 sec.

Cryotherapy:

Here, Cryo probe is used and temperature is used up to -20 degree Celsius.

Epicanthus:

It is semi lunar skin fold and it covers the “upper inner canthus.”

Blepharophimosis:

Here, Palpebral fissure is small horizontally and vertically.

Diseases

Ptosis:

It is a drooping of the upper eyelid beyond the normal position. It is also known as Blepharoptosis. It can be Congenital or Acquired. The main reason of Congenital Ptosis is weakening of Superior Rectus and LPS muscle. Main causes of Acquired Ptosis are:

- Neurogenic: Usually nerve oriented disorder
- Myogenic: Muscle oriented disorder
- Mechanical: Suppose upper eyelid tumour is present and due to heavy weight it can create Ptosis.
- Traumatic: Due to trauma or accident.

When diagnosing Ptosis, always Pseudo Ptosis should be first ruled out. The causes of Pseudo Ptosis are:

- Reduce orbital content

- Contralateral lid retraction
- Ipsilateral Hypotropia

To examine Ptosis, following should be measured:

- Amount of Ptosis
- Amount of LPS function
- Marginal Reflex distance
- Palpebral fissure height
- Upper lid crease

After diagnosing Ptosis, it should be Isolated from Myasthenia Gravis. For that, Tensilon test is essential. In this test, Endrophonium Intra Venous Injection is needed. If Ptosis is improved, then it diagnosed as Myasthenia Gravis.

Treatment:

In this case, Ptosis spectacle should be given, otherwise Surgery should be opted.

- Fasanella – Servat Operation
- Levator Resection
- Brow (Frontalis) suspension
- Aponeurosis Strengthening

Inflammations of Eyelid

Blepharitis:

It is the inflammation of eyelid. It may be subacute or chronic. There are 4 types of Blepharitis. They are:

- Acute Blepharitis
- Chronic Blepharitis
- Squamous Blepharitis
- Ulcerative Blepharitis

Causes of Blepharitis are:

- Dandruff
- Refractive error
- Chronic conjunctivitis

Treatment:

- Lid hygiene
- Antibiotic– Steroid treatment
- Hot fomentation
- Epilation
- Systemic dose necessary
- Correction of Refractive error.

Stye:

It's another name is External Hordeolum. It is the inflammation of the follicles of eyelashes. Main organism is Staphylococcus Aureus.

Treatment:

- Hot fomentation
- Epilation
- Antibiotic Therapy
- NSAID Therapy
- Correction of Refractive Error
- Hygiene

Chalazion:

It is a chronic, non-inflammation granuloma of the Meibomian gland. Very rare, it becomes Malignant.

Treatment:

- Hot fomentation
- Correction of Refractive error
- Usually suggest for surgery.

Meibomianitis:

It is a chronic Meibomian gland infection. In this case, during pressurization on Meibomian gland, tooth paste like secretion is exposed.

Treatment:

- Hot fomentation
- Tarsal massage
- Systemic Antibiotic
- Steroid ointment.

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