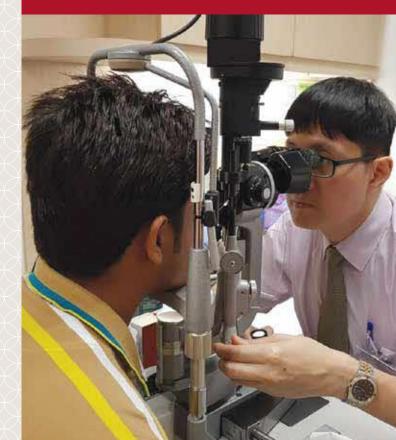
What to expect post-surgery?

- Usually only mild discomfort after surgery.
- Expect some swelling, bruising and tightness of the eyelids these will resolve once the wounds heal.
- Infrequently, slight asymmetry in the eyelid appearance or position might occur and may require additional corrective surgery.



DEPARTMENT OF OPHTHALMOLOGY

Ptosis



Clinic Appointments and Eye Screening

Subsidised: (65) 6357 7000
Private: (65) 6357 8000
Email: eye@ttsh.com.sg
Website: www.ttsh.com.sg/eye

LASIK Enquiries

Tel: (65) 6357 2255 Email: lasik@ttsh.com.sg Website: www.ttshlasik.com.sg





Disclaime

This is a general guide. If in doubt, please consult your doctor. Information is subject to revision without notice. The contents of this leaflet are not to be reproduced in any form without the prior permission of NHG Eye Institute.

Printed October 2018 PECC-EYE-ED-2018-135-v1

What is Ptosis?

- Drooping of the upper eyelid. It can be present in one (unilateral) or both (bilateral) eyes.
- Arises from a problem with the levator muscle, which is responsible for lifting up the eyelid.



Image of a patient with bilateral aponeurotic ptosis.

What are the types and causes of Ptosis?

1. Congenital

- present in a child from birth
- in-born defect of the levator muscle

2. Acquired

- appears later in life
- various causes, including:
- **Aponeurotic** (age-related/degenerative, contact lens wear- related, after cataract surgery)
- Traumatic
- Muscle disorders (myasthenia gravis)
- **Nerve paralysis** (cranial nerve palsy)

Aponeurotic ptosis is the most common form of eyelid ptosis. It is due to wear and tear and dehiscence of the levator muscle from its original position.

What are the symptoms of Ptosis?

- Patients with more severe ptosis may experience:
 - Heaviness of the eyelid
- Obstruction of vision
- Astigmatism
- Children with congenital ptosis may:
- Have Marcus Gunn "jaw-winking": the droopy eyelid appears less droopy when the patient opens the jaw (eg. during chewing movements)
- Develop lazy eye (amblyopia) resulting from obstruction of vision/astigmatism

What treatment is there for Ptosis?

- The type of treatment depends on the severity of the ptosis and the cause of the ptosis.
- Your doctor will discuss the options to decide if surgery is needed.

What is surgery for Ptosis like?

- The surgery is done via a small cut (incision) to the upper eyelid to shorten or move the levator muscle to lift up the eyelid to relieve peripheral visual obstruction.
- Symmetry is an important end-point but may not always be possible, depending on the strength of the levator muscle.

Aspirin and anticoagulants

- These medications can cause significantly more bleeding during and after the surgery.
- If you take aspirin, or blood-thinning agents such as warfarin, you will need to check with your physician if you could safely stop these drugs.
- Some herbs or health supplements may also thin your blood to make surgery unsafe, please get advice from your doctor if you need to stop them before surgery.



Image of the same patient after ptosis surgery.

What to expect on the day of the surgery?

- Day surgery procedure.
- A local anaesthetic injection is given to the upper eyelid area where surgery will be performed.
- You will be moderately sedated but still able to respond and hear instructions given by the surgeon.
- Midway through the surgery, your surgeon will ask you to open your eyes to assess the position of the eyelid.