

Ptosis

What Is Ptosis?

Ptosis (pronounced TOE-sis) is the medical term for drooping eyelids. A person with ptosis is not able to lift one or both upper eyelids to uncover the eye completely.

Many people want to correct ptosis because it damages their appearance. In most cases, the sagging upper eyelid results in a loss of the superior (upper) field of vision. In severe cases, ptosis may be present at birth and, if left untreated, can permanently damage vision by forcing the unaffected eye to do all the work while letting the affected eye degenerate.

What Are The Different Types Of Ptosis?

Acquired or Levator Dehiscence Ptosis - This is the most common type of upper eyelid ptosis. The tendon of the levator muscle may loosen or detach, causing ptosis. This process is similar to a knee ligament sprain or tear. Levator dehiscence occurs primarily in people greater than thirty years of age and the incidence increases with age. It is not uncommon for one to develop a droopy upper eyelid following cataract surgery. The cataract surgery may be the "last straw" that causes a weak tendon to finally give way.

Congenital Ptosis - Congenital ptosis is the common form of eyelid ptosis present since childbirth. It may involve one or both upper eyelids and vary in severity from mild to severe. This form of eyelid ptosis is often the result of lack of development of the levator muscle. Treatment is primarily surgical where the affected eyelid muscles are shortened / resected for eyelid elevation. The surgery may also use other methods to repair the ptosis, such as a technique called fascia suspension.

What Are The Symptoms Of Ptosis?

The drooping eyelid is the principal sign in ptosis. Children with congenital ptosis often tilt their heads back or raise their eyebrows to lift the eyelid. Adults have the same symptoms, but they also notice a loss of vision, especially in the upper field.

What Is The Treatment For Ptosis?

For acquired or levator dehiscence ptosis, the doctor must first determine the cause of the problem. If ptosis is a result of muscle or nerve disease, the doctor will begin by treating the disease first. If a tumour is the cause, it can sometimes be removed. In some cases, the doctor may suggest surgery. This operation is the same one surgeons use for congenital ptosis: shortening the levator muscle or connecting it to the muscles of the brow.

Factsheet

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For congenital ptosis, the treatment is surgery. As noted above, the procedure involves either shortening the levator muscle or attaching it to the muscles of the brow.

Ptosis is a condition where the upper eyelid droops over the eye. It can block the upper field of vision and detract from one's appearance. Following surgery to correct ptosis, the eyelid is restored to its normal position.

What To Expect

Initially the eyelids are often bruised and swollen. This can take up to 2 - 3 weeks to completely clear up. It is often too early to judge the final outcome immediately after surgery, although every attempt is made to achieve the best cosmetic outcome for each individual.

What Is Pseudoptosis?

One of the reasons it is so important to find out the cause of acquired ptosis is that some people appear to have ptosis, but do not really have a problem with the levator muscle. Instead, they have pseudoptosis or false ptosis.

Some of the causes of pseudoptosis are an excessive amount of eyelid skin that appears to cover the eye or simply unusual facial characteristics. Sometimes, a protrusion of one eye may make the opposite eye look as if it had ptosis. When ptosis is suspected, a complete examination of the eye must be done to find the real cause of the problem.

Investigations

These are carried out by an ophthalmologist and include a full history of the condition; eye examination; visual acuity test; examination of eye movements.

Lid measurements will be taken to accurately measure the degree of lid drooping and amount of muscle function in order that plans can be made for the best mode of treatment. Treatment often involves an operation.

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