Patient & Family Guide

2022

Ptosis (Droopy Eyelid) Surgery



Ptosis (Droopy Eyelid) Surgery

This pamphlet will help you learn how to care for yourself safely after surgery.

What is ptosis?

- Ptosis is the medical word for a droopy eyelid.
- When you have ptosis, you may not be able to open your upper eyelid(s) all the way to uncover your eye(s). This can be caused by:
 - › Getting older
 - Trauma (like a cut to the upper eyelid or some types of head injuries)
 - > Something you are born with
- A droopy eyelid(s) can affect how you look. It can also cause a loss of the upper part of your vision.

How is ptosis treated?

 Some types of ptosis can be treated with surgery. Muscles in the eyelid(s) are tightened or strengthened to lift the eyelid(s) to the proper position.

- Extra eyelid skin and orbital fat (fat around your eye) may also be removed to improve your vision.
- If the muscles of your eyelid(s) cannot be strengthened, you may need a sling (attaches the forehead muscle to the eyelid and helps to lift the eyelid) to keep it in the proper position.
- Your surgeon will talk with you about which surgery is right for you.

Before surgery

- If you are taking ASA (Aspirin®) or blood thinners (like warfarin), tell your eye surgeon's office before your surgery.
 An appointment will be made for you at the Anticoagulation Clinic, if needed.
- Tell your eye surgeon's office if you are taking any vitamins or herbal supplements (like multivitamins, green tea, garlic, Chinese herbs, vitamin E, gingko). Some of these may thin your blood and increase your risk of bleeding during and after surgery.

During surgery

- Most eyelid surgery is done under local anesthetic. This means you will be awake during your surgery. You will be given medication to numb (freeze) your eyelid so you do not feel any pain or discomfort. Your surgeon will tell you if you need a general anesthetic (medication to put you to sleep for surgery).
- The surgery will take about 1 hour.

After surgery

- Your surgeon may give you a list of instructions.
- You will not be allowed to walk home, ride the bus, or take a taxi unless someone is with you.
- For a few days after your surgery, your eyelid(s) will be droopy, puffy, and swollen. You will not be able to see very well. You will need someone to help you at home.

- You will have an incision (cut) and stitches around your eye(s). You will get a prescription for eye ointment to put on the incision(s).
- You may have a small amount of bloody drainage (fluid) from the incision for 1 or 2 days after surgery. This is normal. It is also normal to have some bruising and/or swelling around the eye(s).
- The stitches will dissolve (go away) on their own. They do not need to be removed.
- For 7 days (1 week) after your surgery:
 - Do not swim in a public or private pool.
 - Avoid heavy lifting (more than 10 pounds).
 - > Avoid strenuous (very hard) activity.

Dressing

You may have a dressing over your operated eye. This can usually be removed the next day.

Cold compress

A cold compress may help with pain and swelling. To use a cold compress:

- > Wash your hands.
- > Put a clean face cloth(s) in a bowl of ice water.
- Place the face cloth(s) over your closed eye(s) for 20 minutes on, then 30 minutes off.
- Keep doing this for the first
 48 to 72 hours (2 to 3 days) after surgery.

Discomfort

- It is normal to feel some pain when the freezing wears off. You can take acetaminophen (Tylenol® or Tylenol® Extra Strength). Follow the package instructions.
- If you feel sick to your stomach, you can take Gravol[™]. Follow the package instructions.

Follow-up

You will get an appointment to visit your surgeon. This is usually 1 to 2 weeks after your surgery.

Tell your eye surgeon right away if you have any of these symptoms:

- You suddenly have more pain,
 redness, or swelling within the first
 48 hours.
- You have unusual drainage from the incision, like heavy bleeding or pus.
- Your vision gets worse.

If you cannot reach your eye surgeon:

- Call locating at the QEII, Victoria General (VG) site, and ask to have the ophthalmology resident on call paged:
 - > Phone: 902-473-2222

OR

 Go to the nearest Emergency Department right away.

Notes:			

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find this pamphlet and all our patient resources here: https://library.nshealth.ca/Patients-Guides

Connect with a registered nurse in Nova Scotia any time: Call 811 or visit: https://811.novascotia.ca

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