Eyelid Drooping Repair (Myogenic Ptosis)

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Unilateral Acquired Ptosis

Typically

- one lid droops more than the other
- lid drops lower in downgaze
- lid crease high and indistinct
Lifting the drooping Eyelid and the “normal eyelid” now droops

At least in 5% of cases will need surgery on other eyelid
What to Expect on Your Exam

- Do you have dry eyes?
  - Schirmer’s tear strip
  - Look at the surface of your eye
  - Check for Bell’s phenomenon

- Do you have excess skin? (dermatochalasis), drooping brows (Brow ptosis) or eyelid or facial asymmetry?
During Your Exam; measurements and photos will be taken of your eyelids

- How open is your eye?
- How strong are your muscles?
- Does the upper eyelid block your vision?
Photos and visual fields will be performed to determine if your insurance company will pay for surgery.

The pupil is blocked. Insurance will pay for surgery.
A Visual Field will be Performed

- In order for insurance to pay for your surgery, the visual field needs to show that your vision is blocked.
- The test will be performed with your eyelids in natural position and then with taping.
Ptosis: Treatment Options

- **Good muscle function**
  - Take a tuck (like hemming a pair of pants either from the front (levator advancement) or back (Mueller’s muscle resection))

- **Poor muscle function**
  - Frontalis sling
Eyelid Lift: Posterior Ptosis Repair

- Internal approach - no external incision
- If phenylephrine drop lifts lid this approach will work well
Posterior Eyelid Tuck – No External Incision

Indication: good levator function
Positive response to 2.5% Neosynephrine test
Informed Consent

- Bleeding
- Infection
- Undercorrection/overcorrection
- Contour asymmetry
- Eyelid Crease asymmetry
Medications to Avoid Prior to Surgery

- You will be given a comprehensive list of medicines to avoid:
  - **14 days** prior to surgery
    - Stop **aspirin, advil** and other pain relievers (tylenol is ok)
    - Stop **fish oil, flax seed, Vit C and E**
  - **4 days** prior to surgery
    - Stop coumadin/plavix
On The Day of Surgery

- Arrive 30 -60 minutes before surgery
- Sign Consent
- Surgical hat placed
- IV started with relaxing medication
During Surgery

Betadine Paint

Oxygen And Warm Blanket

Protective Eye Shields
During Surgery....
After Surgery: Ice and ointment

Before

Immediately After
Steristrips are placed -on sutures/upper lid -As a girdle/lower lid -to stabilize the area of fat repositioning
External Approach

- Eyelid skin incision
- Tuck and/or excise eyelid muscle
Group Sutures in Central 50% of Tarsus

Sutures Placed ~3mm from Superior Tarsal Bord

Tarsus
Midlevel of Tarsus
Bilateral Acquired Ptosis
Pre- & Post-Op External Tuck
Pre and Post-op External Levator Tuck
Direct Brow Lift
Myogenic Ptosis Repair Plus

- Upper lid blepharoplasty
- Brow lift
Frontalis Sling
Pre and Post-op: Unilateral Frontalis Sling