Ptosis and Dermatochalasis



What are Ptosis and Dermatochalasis?

Ptosis, or drooping of the upper eyelid, may occur for several reasons such as: disease, injury, birth defect, previous eye surgery and age. In most cases, it is caused by either a weakness of the levator muscle (the muscle that raises the eyelid), or a problem with the nerve that sends messages to the muscle.

Patients with ptosis often have difficulty blinking, which may lead to irritation, infection and eyestrain. These conditions often interfere with a patient's ability to see peripherally due to the eyelids blocking their side and upper vision.

Dermatochalasis or baggy eyelids are the accumulation of excess skin and fat around the eyes. Excess skin is present on the upper lids while fatty pockets are present on both the upper and lower lids. This condition also is responsible for significant peripheral vision loss.

Signs and Symptoms of Ptosis and Dermatochalasis

The symptoms are dependent on the underlying problem and may include:

- Blocked superior visual field
- Drooping lid (may affect one or both eyes)
- Irritation
- Eye fatigue from straining to keep eye(s) open
- Head tilt backward in order to lift the lid
- Double vision
- The appearance of swollen eyelids

Ptosis

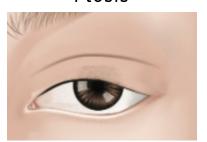


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Dermatochalasis



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Treatment options

Ptosis does not usually improve with time, and nearly always requires corrective surgery by an ophthalmologist who specializes in plastic and reconstructive surgery. In most cases, a surgical repair or levator advance is performed. Repair involves surgically elevating the drooping lid.

Dermatochalasis or baggy eyelids are repaired surgically by removal of the extra folds of skin and herniated orbital fat in the eyelids that continually gets worse with time.

When ptosis and dermatochalasis result in vision loss, Medicare and private insurances usually always covers surgical repair in order to restore better vision. These procedures are performed under local anesthesia in an outpatient surgical facility. Most patients experience little or no pain. Full recovery from surgery usually takes less than one week, and a patient can resume normal activities the day after surgery.



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