

# Ectropion



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**Qu: What is ectropion?**

Ectropion is the medical term used to describe the lower eyelid turning outwards and drooping away from the eye. Becoming more common with increasing age, ectropion may affect the whole eyelid, or only the inner third.

**Qu: What are the symptoms of ectropion?**

The symptoms depend on the degree of ectropion, and can include the following:

(i) Watery eyes.

This is the most common symptom of ectropion. When the lower eyelid punctum (the water drainage port in the inner aspect of the eyelid) no longer sits against the surface of the eye, tear drainage from the eye is reduced.

(ii) Irritable, red and sore eyes

In the absence of full eyelid closure and incomplete tear drainage, lubrication of the ocular surface can be compromised, leading to uncomfortable, red eyes, or infection (conjunctivitis). In addition, reduced tear drainage leads to stagnation of the tears on the eye, and this can also lead to ocular irritation, with reflex tearing resulting in further watering of the eye.

**Qu: What is the cause of ectropion?**

The commonest cause of ectropion is general laxity of the tissues around the eye, and of the tendons in the inner and outer corners of the eyelids. Instability of these supporting structures can cause the eyelid to rotate towards the eye (entropion) or away from the eye (ectropion). Of the two, entropion is the more uncomfortable, and potentially sight-threatening, as the eyelashes tend to rub on the front surface of the eye.

Other disorders, such as injuries to the skin of the lower eyelid, or contracture (scarring) of the lower eyelid, may also cause ectropion.

Finally, the strength and tone of the eyelids is maintained by the facial nerve, and impairment of this nerve (such as occurs in Bell's palsy) may lead to flaccidity of the eyelid and secondary ectropion.

**Qu: Can ectropion affect the eye, or eyesight?**

Since the function of the lower eyelid is to protect the eye and to lead the tears into the inner corner of the eye, where they are drained away, ectropion can result in exposure of the lower surface of the eye, in addition to watering of the eye. Rarely, untreated ectropion can lead to corneal exposure and corneal infection, these posing a risk to vision.

**Qu: How is ectropion treated?**

The management of ectropion depends on the cause. If the skin of the lid has become taught from chronic eye drop usage, a change or cessation of treatment can be sufficient. However, frequently, an operation is required in which the lower eyelid is tightened at the outer corner of the eyelids, with or without adjunctive sutures at the inner corner of the eyelids. If there has been loss of skin from the lower lid, a skin graft may also be necessary. Surgery can often be done in a minor operations theatre under local anaesthetic, taking about one hour. Complex cases (including those where there has been previous injury, or surgery, or facial nerve palsy) may in addition require a sedative for more extensive surgery. Following surgery, the eye is usually padded for at least a day to reduce infection and swelling, and antiobiotic drops are prescribed. A review is organised for a week or two later to check on the position of the eyelid and remove any stitches. Note, certain tablets need to be stopped for 2 weeks before surgery.