

CLINICAL RESULTS OF THE SURGICAL TREATMENT OF PARALYTIC LOWER EYELID ECTROPION USING MESH IMPLANTS

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Pathological alterations in the lower eyelid and cornea secondary to facial palsy may result in corneal lesions, ectropion, lid laxity, epiphora and lagophthalmos. Purpose: To evaluate the results of the use the mesh implant in surgical treatment of paralytic lower eyelid ectropion. Methods: 25 patients (11 men, 14 women, mean age, 56.1 years, ranging from 27 to 76 years) suffering from paralytic lower eyelid ectropion, different grades of lagophthalmos and corneal lesions (recurrent erosion, keratitis, ulcer) were included in the study. Paralysis was caused by acoustic neurinoma resection (13 cases) in most of the cases. Duration of the lagophthalmos varied from 2 months to 61 years. The surgical reconstruction of the lower eyelid using the partially resorbable mesh implant («Ultrapro», Johnson&Johnson Int.) was performed in all cases. Results: During the follow-up period (from 3 to 18 months) the position of the lower eyelid was stable in all cases. The mean value of lagophthalmos reduction was 7.6 ± 2.32 mm. Four patients had an extrusion of separate fibers of a mesh implant that demanded repeated suturing. Corneal status improved in 22 cases. The cosmetic outcome was estimated by patients as “good” in all cases. Conclusions: The use of a mesh implant in surgical reconstruction of a lower eyelid allowed achieving a stable correct position with the mean value of lagophthalmos reduction 7.6 ± 2.32 mm. Stable surgical results and improvement of the quality of patient's life allow to consider this method of lower eyelid reconstruction using a mesh implant effective.