

# Impact of oculoplasty by hand of non-ophthalmologist surgeon

Wesen Abdul Aziz Resheed<sup>1</sup>



**ABSTRACT**— Oculoplasty is wide feild but simply it deal with pathology of upper and lower lids and involve many operations types and approach. There are different causes for what paiteint called(some thing wrong in my eyes) each of these problems has its own pathology. Its own surgical technique and even more than one technique for same error.

**KEYWORDS:** oculoplasty

## 1. INTRODUCTION

As we know that upper and lower lid has similar but not identical anatomy, in general lid compose of four layers, skin,muscle,tarsus and lastly conjunctiva, and other additional structur (ligiments ,glands, lashes)), So any defect in any of these layers and structur will has its clinical presentation.

Many patient search for oculo-plasty did not differentiate or understand the pathology behind, their eyes appearance and most of them are thinking that the skin is the main criminal.

-Intial correct step to understand the pathology is to know the precise anatomy of each lid and its role in the clinical presentation.

-dermoid are the main cause of seeking medical inyounger age group, the congenitul ptosis surgical advice, in adult yong patients, upper lid dermatochalesis and lower lid(Buffy eye) appearance is the main guider to visit the doctor, in older patients, senil ptosis and lid margin anomaly(ectropion/entropion) is the main cause for clinic visit.

One additional important factor in making surgical discission is the patientis age, some plepharoplasty is bettr to post pond to preschool age unless has visual impaction on patient.

-Un important point that no pathology can be resolve unless surgeon deal with the correct layer structure, so the ptosis caused by imperfect muscle can not be solv by skin excision

-The ectropia/entropion may be not be resolve by simple pentagon excision unless aproper lateral and and/or medial canthal exposure and corrected.

fat herniation also can not be treated by simply streech the overlying skin. In additiom, related condition should be consider as jew-win king with congenital ptosis and intra cranial extention of dermoid. Other wise, undesirable intra and post of event be evident.

for ptosis, lovetor or muller muscle should be well exposed to get accept able result of correction, fat excision should be mounted well so not to cause concvity post op neither to leave remenant, orbicularis is

involved in surgery for(old appearance),indeed, oculoplasty should be done by hand of ophthalmologist who is familial with these structures.

## 2. Method

Method: by collecting data of thirty patients have oculo-plastic surgeries by non-opth almogist over one year over ont year.

\*lav-resec=lavetor resection,

\*Bp=blepharoplasty

Sex	Age	Type of surgery	Result
F	38	Upper and lower Bp	Lower lid ectrop and sever tearing
M	7	Unilat sling.	Failer
F	45	Upper Bp	Lagophthal mus
F	5	Unilate sling	Failer
M	10	Unilate. Lav resec.	failer
F	50	Upper Bp	Failer+big dermatochalesis
<b>M</b>	48	Upper and lower Bp	Very tight lid closur-and chronic blephritis
<b>F</b>	8	Uni lav resec.	Failer
<b>F</b>	7	sling	Failer
M	41	Upper Bp	Lid lag
M	46	Lower lid Bp for Buffy eye	failer
F	22	Unilate lav resc.	Failer
F	6	Sling	Failer
F	8	Jew-winking sling	Failer
F	35	Early upper Bp	Very tight lid closur+chemosis
M	52	Upper Bp	Chronic tearing
F	49	Lower Bp	In adequate correction
M	50	Buffy eye surgery	Lower lid ectropion
F	38	Upper Bp	Four failed surgery and need to skin graft for correction
F	43	Buffy lid surgery	In adequate correction
F	33	Mullerectomy	Failer
M	19	Skin graft for lower lid	Lateral ectropion
F	5	Lav. Resc.	Failer
F	45	Lower lid Bp	Unilateral ectropion
M	49	Upper and lower Bp	Asymmetrical eyes appearance
M	9	Sling	Failed
M	7	Lav.resv	Failed
F	6	sling	failed

Author's cases

<b>Patients</b>	<b>Type of Suyery</b>	<b>Result</b>
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- 15 cases - 7cases - 45cases - 9 cases	-mullerectomy - sling - supper BP Buffy louverlid surgery	- success ful - success ful - Success ful - Success ful
Tota 76 cases		

### 3. Result

The data collected include thirty patients who underwent lid surgeries by hand of general plastic surgeon and ENT- surgeon for whom, a fourteen cases of ptosis are failed include 7 sling and 6 levator resection + 1 mullerectomy, there are fifteen patients have lower and or upper blepharoplasty with several different complications of over or under correction include lid lag, ectropion, tight eye closure, chronic tearing, chemosis and failed surgery.

Case Summaries <sup>a</sup>				
	Male & Female	Type of Surgery	Results	Age
1	Female	Upper & Lower Bp	Lower lid ectrop and sever tearing	36-40
2	Male	Unilat sling.	Failer	5-10
3	Female	Upper Bp	Lagophthalmus	41-45
4	Female	Unilat sling.	Failer	5-10
5	Male	Unilate. Lav resec.	Failer	5-10
6	Female	Upper Bp	Failer+big dermatochalasis	46-50
7	Male	Unilat sling.	Very tight lid closure and chronic blephritis	46-50
8	Female	Unilate. Lav resec.	Failer	5-10
9	Female	Upper Bp	Failer	5-10
10	Male	Upper & Lower Bp	Lid lag	41-45
11	Male	Unilate. Lav resec.	Failer	46-50
12	Female	Upper Bp	Failer	21-25
13	Female	Upper & Lower Bp	Failer	5-10
14	Female	Jew-winking sling	Failer	5-10
15	Female	Sling	Very tight lid closure and chronic blephritis	31-35
16	Male	Upper Bp	Chronic tearing	51-55
17	Female	Upper & Lower Bp	Inadequate correction	46-50
18	Male	Buffy eye surgery	Lower lid ectrop and sever tearing	46-50
19	Female	Upper Bp	Four failed surgery and need to skin graft for correction	36-40
20	Female	buffy lid surgery	Inadequate correction	41-45
21	Female	Mullerectomy	Failer	31-35
22	Male	skin graft for lower lid lav. Resc.	Lateral ectropion	16-20
23	Female	skin graft for lower lid lav. Resc.	Failer	5-10
24	Female	lower lid Bp for Buffy eye	Unilateral ectropion	41-45
25	Male	Upper & Lower Bp	Asymmetrical eyes appearance	46-50
26	Male	Sling	Failer	5-10
27	Male	skin graft for lower lid lav. Resc.	Failer	5-10
28	Female	Sling	Failer	5-10
Total	28	28	28	28

a. Limited to first 100 cases.

Type			
		Value	Cou nt
Standard Attributes	Position	2	
	Label	Type of Surgery	

	Type	Numeric		
	Format	F8.2		
	Measurement	Nominal		
	Role	Input		
Valid Values	1.00	Upper & Lower Bp	5	16.7%
	2.00	Unilat sling.	3	10.0%
	3.00	Upper Bp	6	20.0%
	4.00	Unilate. Lav resec.	3	10.0%
	5.00	Sling	3	10.0%
	6.00	lower lid Bp for Buffy eye	1	3.3%
	7.00	Jew-winking sling	1	3.3%
	8.00	Early Upper Bp	0	0.0%
	9.00	Buffy eye surgery	1	3.3%
	10.00	buffy lid surgery	1	3.3%
	11.00	Mullerectomy	1	3.3%
	12.00	skin graft for lower lid lav. Resc.	3	10.0%
Missing Values	System		2	6.7%

Results				
		Value	Count	Percent
Standard Attributes	Position	3		
	Label	<none>		
	Type	Numeric		
	Format	F8.2		
	Measurement	Nominal		
	Role	Input		
Valid Values	1.00	Lower lid ectrop and sever tearing	2	6.7%
	2.00	Failer	14	46.7%
	3.00	Lagophthal mus	1	3.3%
	4.00	Failer+big dermatochalesis	1	3.3%
	5.00	Very tight lid closur-and chronic blephritis	2	6.7%
	6.00	Lid lag	1	3.3%
	7.00	Very tight lid closur+chemosis	0	0.0%
	8.00	Chronic tearing	1	3.3%
	9.00	In adequate correction	2	6.7%
	10.00	Four failed surgery and need to skin graft for correction	1	3.3%
	11.00	Lateral ectropion	1	3.3%
	12.00	Unilateral ectropion	1	3.3%
	13.00	Asymmetrical eyes appearance	1	3.3%
Missing Values	System		2	6.7%

Age				
		Value	Count	Percent
Standard Attributes	Position	4		
	Label	<none>		
	Type	Numeric		
	Format	F8.2		
	Measurement	Nominal		
	Role	Input		
Valid Values	1.00	5-10	11	36.7%
	2.00	11-15	0	0.0%
	3.00	16-20	1	3.3%

	4.00	21-25	1	3.3%
	5.00	26-30	0	0.0%
	6.00	31-35	2	6.7%
	7.00	36-40	2	6.7%
	8.00	41-45	4	13.3%
	9.00	46-50	6	20.0%
	10.00	51-55	1	3.3%
Missing Values	System		2	6.7%

Successful Treatment Table

Survival Table								
Results		ID	Time	Status	Cumulative Proportion Surviving at the Time		N of Cumulative Events	N of Remaining Cases
					Estimate	Std. Error		
Lower lid ectrop and sever tearing	1	Female	7.000	Upper & Lower Bp	.500	.354	1	1
	2	Male	9.000	Buffy eye surgery	.000	.000	2	0
Failer	1	Male	1.000	Unilat sling.	.	.	1	13
	2	Male	1.000	Unilate. Lav resec.	.	.	2	12
	3	Male	1.000	Sling	.	.	3	11
	4	Male	1.000	skin graft for lower lid lav. Resc.	.	.	4	10
	5	Female	1.000	Unilat sling.	.	.	5	9
	6	Female	1.000	Unilate. Lav resec.	.	.	6	8
	7	Female	1.000	Upper Bp	.	.	7	7
	8	Female	1.000	Upper & Lower Bp	.	.	8	6
	9	Female	1.000	Jew-winking sling	.	.	9	5
	10	Female	1.000	skin graft for lower lid lav. Resc.	.	.	10	4
	11	Female	1.000	Sling	.214	.110	11	3
	12	Female	4.000	Upper Bp	.143	.094	12	2
	13	Female	6.000	Mullerectomy	.071	.069	13	1
	14	Male	9.000	Unilate. Lav resec.	.000	.000	14	0
Lagophthalmus	1	Female	8.000	Upper Bp	.000	.000	1	0
Failer+big dermatoc halesis	1	Female	9.000	Upper Bp	.000	.000	1	0
Very tight lid	1	Female	6.000	Sling	.500	.354	1	1

clotur-and chronic blephritis	2	Male	9.000	Unilat sling.	.000	.000	2	0
Lid lag	1	Male	8.000	Upper & Lower Bp	.000	.000	1	0
Chronic tearing	1	Male	10.000	Upper Bp	.000	.000	1	0
In adequate correction	1	Female	8.000	buffy lid surgery	.500	.354	1	1
	2	Female	9.000	Upper & Lower Bp	.000	.000	2	0
Four failed surgery and need to skin graft for correction	1	Female	7.000	Upper Bp	.000	.000	1	0
Lateral ectropion	1	Male	3.000	skin graft for lower lid lav. Resc.	.000	.000	1	0
Unilateral ectropion	1	Female	8.000	lower lid Bp for Buffy eye	.000	.000	1	0
Asymmetrical eyes appearance	1	Male	9.000	Upper & Lower Bp	.000	.000	1	0

## Means and Medians for Successful Treatment

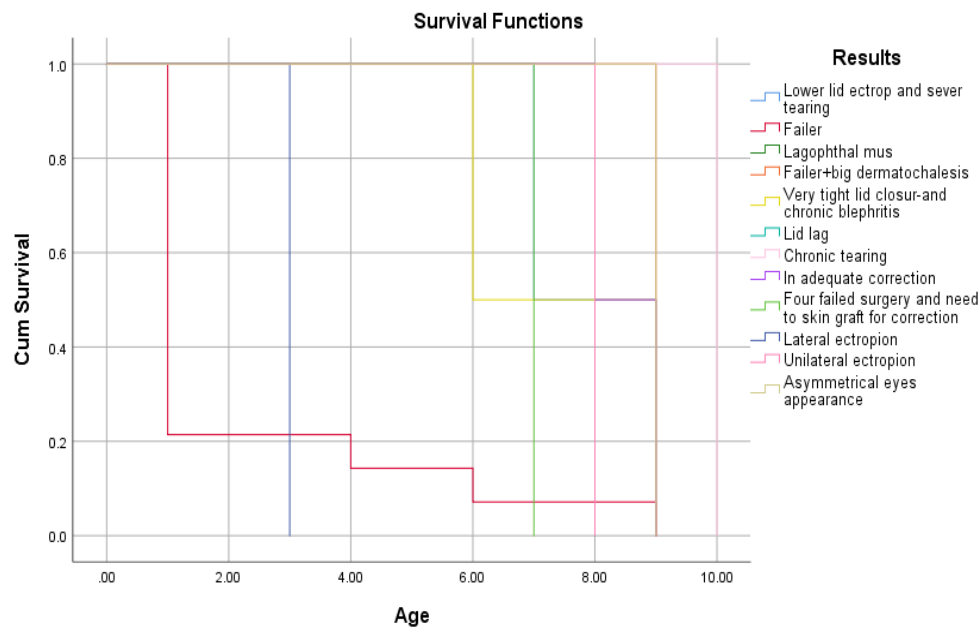
Means and Medians for Survival Time								
Results	Mean <sup>a</sup>				Median			
	Estimate	Std. Error	95% Confidence Interval		Estimate	Std. Error	95% Confidence Interval	
			Lower Bound	Upper Bound			Lower Bound	Upper Bound
Lower lid ectrop and sever tearing	8.000	1.000	6.040	9.960	7.000	.	.	.
Failer	2.143	.662	.846	3.440	1.000	.	.	.
Lagophthalmus	8.000	.000	8.000	8.000	8.000	.	.	.
Failer+big dermatochalasis	9.000	.000	9.000	9.000	9.000	.	.	.
Very tight lid clotur-and chronic blephritis	7.500	1.500	4.560	10.440	6.000	.	.	.
Lid lag	8.000	.000	8.000	8.000	8.000	.	.	.
Chronic tearing	10.000	.000	10.000	10.000	10.000	.	.	.
In adequate correction	8.500	.500	7.520	9.480	8.000	.	.	.
Four failed surgery and need to skin graft for correction	7.000	.000	7.000	7.000	7.000	.	.	.
Lateral ectropion	3.000	.000	3.000	3.000	3.000	.	.	.
Unilateral ectropion	8.000	.000	8.000	8.000	8.000	.	.	.
Asymmetrical eyes appearance	9.000	.000	9.000	9.000	9.000	.	.	.

Overall	5.000	.678	3.670	6.330	6.000	2.111	1.862	10.138
a. Estimation is limited to the largest survival time if it is censored.								

Chi Square test (21.862), with high significant (0.025).

Overall Comparisons			
	Chi-Square	df	Sig.
Log Rank (Mantel-Cox)	21.862	11	.025
Breslow (Generalized Wilcoxon)	21.396	11	.029
Tarone-Ware	22.061	11	.024
Test of equality of survival distributions for the different levels of Results.			

Age Successful Treatment chart



Comparison between Non – Specialists & Specialists for Types

Non - Specialists		Specialists	
Upper & Lower Bp	3	Upper & Lower Bp	5
Unilat sling.	2	Unilat sling.	3
Upper Bp	5	Upper Bp	6
Unilate. Lav resec.	5	Unilate. Lav resec.	3
Sling	4	Sling	3
lower lid Bp for Buffy eye	2	lower lid Bp for Buffy eye	1
Jew-winking sling	1	Jew-winking sling	1
Early Upper Bp	1	Early Upper Bp	0
Buffy eye surgery	1	Buffy eye surgery	1
buffy lid surgery	1	buffy lid surgery	1
Mullerectomy	1	Mullerectomy	1
skin graft for lower lid lav. Resc.	2	skin graft for lower lid lav. Resc.	3

Comparison between Non – Specialists & Specialists for Results

Non - Specialists		Specialists	
Lower lid ectrop and sever tearing	2	Lower lid ectrop and sever tearing	2
Failer	14	Failer	14
Lagophthal mus	1	Lagophthal mus	1
Failer+big dermatochalesis	1	Failer+big dermatochalesis	1
Very tight lid closur-and chronic blephritis	1	Very tight lid closur-and chronic blephritis	2
Lid lag	1	Lid lag	1
Very tight lid closur+chemosis	1	Very tight lid closur+chemosis	0
Chronic tearing	1	Chronic tearing	1
In adequate correction	2	In adequate correction	2
Four failed surgery and need to skin graft for correction	1	Four failed surgery and need to skin graft for correction	1
Lateral ectropion	1	Lateral ectropion	1
Unilateral ectropion	1	Unilateral ectropion	1
Asymmetrical eyes appearance	1	Asymmetrical eyes appearance	1

#### Comparison between Non – Specialists & Specialists for Failure Results by Gender

	Non – Specialists	Specialists	Total
Male	11	10	21
Female	17	18	35
Total	28	28	

#### Comparison between Non – Specialists & Specialists for Chi – square test

	Non – Specialists	Specialists
<b>Chi – Square Value</b>	<b>1.970</b>	<b>21.862</b>
<b>Significant</b>	<b>0.579</b>	<b>0.025</b>
<b>Result</b>	<b>Non – Significant</b>	<b>Significant</b>

## 4. Conclusion

Oculopasty is a significant issue nowadays because of modern cosmetic attitudes. This adds impact both on oculoplastic surgeon and the society because of wide variety of complications done by the hand of non-specialized surgeon in this aspect, legal items should control the permission to pass through such field.

## 5. References

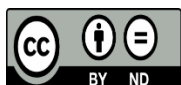
[1] Techniques cosmetic eye lid surgery.

(Joseph A. Maurirello.jo).c

[2] Focal points -

Eric A. Cole, MD, FACS-

Allan E. Wulc, MD, FACS-



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