

Patient information factsheet

Ingrowing eyelashes (trichiasis and distichiasis)

What are ingrowing eyelashes?

Ingrowing eyelashes (trichiasis) is when the lashes turn inwards and rub against the front of the eye causing irritation. It may be due to conditions of the lid or the lining of the lid – the conjunctiva. eg. blepharitis - inflammation of the edge of the lids. It can also be caused by injuries to the lid such as burns or by previous surgery.

Distichiasis is a rare condition in which there is an extra row of eyelashes at the back edge of the lid, which may rub against the eye. These are present from birth.

Trichiasis should not be confused with entropion, which is when the lid itself is turned inwards rather than just the lashes. Different treatment is needed for this. It is possible to have both entropion and trichiasis at the same time and treatment for both these conditions may be needed.

What are the symptoms of ingrowing eyelashes?

The eye may be red, sore and watery. Vision may be blurred. After a while ulcers can develop on the eye, which could possibly affect the vision.

What is the treatment for ingrowing eyelashes?

Conditions such as blepharitis should be treated as this may reduce the tendency to trichiasis. Drops and ointment may help soothe the eyes but removal of the offending eyelashes is necessary.

Rarely, contact lenses are used to prevent lashes rubbing the eye, but only as a short-term measure.

Plucking the eyelashes can be done by anyone using a pair of eyelash tweezers. If you cannot see to do this for yourself and a relative cannot help you, your own doctor or Eye Casualty can do this for you. Unfortunately, the lashes grow again after a few weeks, so it is better to have more permanent treatment – radiosurgery or lid surgery.

What is radiosurgery?

Radiosurgery uses radio waves to pass a current into the root of the lash and permanently destroy it. It works like electrolysis. It is a suitable treatment when there are only a few ingrowing lashes. If a small area localised part of your lid is affected it may be better to have an operation to remove that part of the lid.

How is radiosurgery treatment given?

You will lie down on a couch in the Minor Operations room. Anaesthetic drops are put in to numb the surface of the eye. The lid is cleaned with an iodine-containing antiseptic solution. The doctor may use a microscope or magnifying spectacles to find the troublesome lashes. A small amount of local anaesthetic is injected into the lid where the

lashes are ingrowing. This stings for 10-20 seconds. The lid will then be numb. A fine wire is threaded down the lash root and the radio waves activated. You may hear a buzzing sound. Your lash is then removed. Antibiotic ointment is put in the eye and pad is put over the eye. If eyelids on both sides are treated only one eye will be padded.

After the operation you will be taken to a chair to rest for about ½ hour and offered a hot drink. You will be given ointment to use at home. You should not drive home and should not wear contact lenses until the eye feels normal again.

How well does the radiosurgery work?

Commonly more than one treatment is needed. This is because:

- the treatment can only be used for visible lashes. New lashes that are just below the surface cannot be seen or treated. After a few weeks these may have grown out and cause irritation so follow up treatment is necessary.
- The lashes sometimes grow again in the same area and follow up treatment may be necessary.

What are the side effects of the radiosurgery?

These include some bruising, swelling and soreness in the lid lasting a few days. You can take Paracetamol if necessary.

After repeated treatments there may be no normal lashes in part of the lid, so when the ingrowing ones have all been treated you may be left with a bare area of lid. Most people prefer this to having a constantly uncomfortable eye.

If you have any queries following your treatment, please contact us on the following telephone numbers:

Eye short stay unit	023 8120 8600
Eye Casualty	023 8120 6592 (Anytime - 24 hour service)

For a translation of this document, an interpreter or a version in large print, Braille or on audio tape, please telephone 023 8120 4688.