

Chalazion in children

What is a chalazion?

Within the eyelid, there are many meibomian glands that produce oily fluid that forms part of the tears. A chalazion is formed when the draining ducts of the meibomian glands are blocked. This causes localised swelling and inflammation in the eyelid. It is common to have multiple chalazia involving both the top and bottom eyelids.

Can it cause any harm?

- A chalazion usually grows slowly over a period of weeks or months. Most patients will notice a lump in the eyelid but do not feel any discomfort. Sometimes it can cause irritation but usually doesn't cause any pain.
- Vision is usually not affected. Rarely the chalazion can press on the eyeball causing astigmatism. In children, this can lead to lazy eye (amblyopia).
- Sometimes, the blocked meibomian gland is associated with eyelid margin inflammation (blepharitis) and dry spots on the cornea. This can lead to itchiness, irritation, eye rubbing and increased blinking.
- Very rarely, a chalazion can get infected causing red, painful and swollen eyelid (cellulitis). If it happens, usually the whole eyelid is swollen and the eye is closed.

How is a chalazion treated?

1. Warm compression should be used in all cases. Apply a warm face cloth over the eyelids twice to three times a day. This helps to soften the accumulated material with the meibomian glands and unblock the draining ducts. The chalazion often gets smaller with warm compression over a period of weeks.
2. Sometimes the chalazion persists despite regular warm compression. Then the only other way to remove it is by surgery.
3. If there are associated blepharitis and corneal changes: this is treated with anti-inflammatory and antibiotic eye drops. Sometimes a low dose oral antibiotic (Erythromycin) is used as this has particularly good effect on meibomian glands.
4. If there is secondary infection (cellulitis), you should contact your eye doctor immediately. Your child may need to be admitted to hospital for intravenous antibiotics. Remember this only happens very rarely.

Chalazion surgery

1. This is done under general anaesthetics as children will not stay still enough to have it done safely under local anaesthetics.
2. A small cut is made either from the back or the front of the eyelid and the lump is removed. Usually no sutures are used.
3. Local anaesthetics are injected into the eyelid to minimize postoperative discomfort.
4. Antibiotic cream is put into the eye and the eye is padded.

Are there any risks of the surgery?

The risk of general anaesthetics is extremely low if your child is generally well. Your anaesthetist will advise you further regarding this. Please inform the anaesthetist if your child has any other medical conditions or is taking any regular medication.

Chalazion surgery is generally straightforward and safe. Some minor bleeding can occur after the operation, this usually stops by applying gentle pressure. Rarely, the eyelid can be infected which can usually be treated with oral antibiotics. However, even if the operation was a success, a new chalazion can recur because patients who develop a chalazion have a tendency to have more in the future. Hence, further surgery may be required to remove the new chalazion.

What happens after the surgery?

Your child will be able to go home on the same day when he/she has recovered from the general anaesthetics.

Leave the eye pad on for at least 6 hours and take it off when you arrive home. The eyelid will be swollen because of the operation and the injection of local anaesthetics. It is normal to find some blood-stained tears, just wipe it off with clean tissue. Your child can have a bath or shower but don't let any water into the eye for the first 5 to 7 days. Tilt the head back when shampooing the hair. You can clean the eye with a clean tissue dampened with cool boiled water.

Start using the prescribed antibiotic ointment three times a day for 5 days from the first night before bed. The follow-up appointment is usually 4 to 6 weeks after the surgery. If the eyelid becomes red, very swollen and painful, then contact Dr Harry Leung.

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