



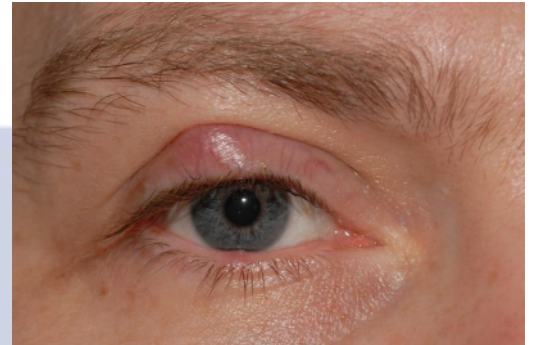
Chalazion (Eyelid cyst)

Mr Kumar has diagnosed you with a **chalazion** (eyelid cyst). This leaflet explains what it is, why it occurs, and how it can be treated and prevented.

What is a chalazion?

The eyelids contain numerous glands that secrete tears, sweat, and oil. The oil-producing glands are called meibomian glands, which help keep the eye surface lubricated and prevent tear evaporation

A chalazion occurs when a meibomian gland becomes blocked, causing oily secretions to accumulate and form a lump in the eyelid. A chalazion is not an infection, although it may sometimes develop following an infection such as a sty.



Why does it happen?

The following factors may increase the risk of developing a chalazion:

- Blepharitis (chronic eyelid inflammation)
- Skin conditions such as Rosacea
- Poor eyelid hygiene
- Touching or rubbing the eyes with unclean hands
- Previous styes (which can sometimes develop into a chalazion)
- Thickened or abnormal oil secretions

How is it treated?

Once a chalazion has formed, it may require removal if it does not resolve on its own.

This is performed by a minor procedure called **incision and curettage**, which typically takes around 15 minutes. A small amount of local anaesthetic is injected into the eyelid near the cyst, so you should not feel pain during the procedure. Numbing drops are applied to the eye. Once the area is numb, a special clamp is used and the eyelid is gently everted (turned inside out). A small incision (1–2 mm) is made on the inner surface of the eyelid. The contents of the cyst are carefully removed.

A dressing is applied afterwards, and you will be discharged home with pain relief and an antibiotic eye ointment.

After the procedure

Keep the bandage in place until the following day. It is normal to notice slight blood staining on the bandage. You do not need to reapply a bandage after it has been removed. There are usually no restrictions on your daily activities.

Mild bruising around the area is expected and typically resolves within a few days. You may take simple pain relief (e.g. paracetamol) twice daily for up to 5 days if required. Apply the prescribed eye ointment three times daily for 5 days.

Potential risks

Long-standing cysts may take longer to flatten completely. Chalazions may also recur, especially if underlying causes are not treated. The risk of infection or bleeding is very low.



Please inform Mr Kumar or his team if you are taking blood-thinning medication, as you may need specific advice before the procedure.

Follow-up

Normally, a follow-up appointment is not required unless you have ongoing predisposing factors that need to be checked. Mr Kumar will advise you on this. Alternatively, you may wish to make a follow-up appointment after 2 months with Mr Kumar.

How can it be prevented?

Mr Kumar will examine both eyes thoroughly to identify any underlying causes and advise you accordingly.

Blepharitis may require regular eyelid hygiene, including the use of eyelid wipes or diluted baby shampoo to clean the lid margins. Rosacea and similar skin conditions may require ongoing treatment, including antibiotics and consultation with a skin specialist.

Regular warm compresses and eyelid massage can help to thin and drain thickened oil secretions.

Cost of the treatment

	One Eye (up to 3 chalazion removals)
Surgeon Fee	£350
Hospital Fee	Depends on location – contact Mr Kumar's team

Chalazion removal can also be performed through medical insurance.

Incision and curettage is a reliable and effective method of removing a chalazion. The procedure is quick and straightforward and leaves no visible scarring on the eyelid.

Any swelling or bruising usually reduces within a few days and resolves completely within 2–3 weeks.

If you are happy with the information provided above, please contact Mr Kumar's team to make an appointment:

Email: secretaryeyedoctor@gmail.com

Phone: 0118 911 3666