MR DAVID CHEUNG

Consultant Ophthalmic and Oculoplastic Surgeon

Contact Info

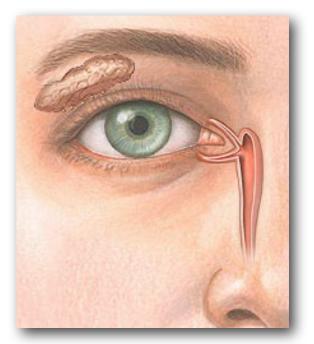
NHS: Sandwell General Hospital, Birmingham PA: Jayne Evitts 0121 507 3165 Russells Hall Hospital, Dudley : PA Jo Gough: 01384 244811

Private Patients: The Edgbaston Hospital, Birmingham: General 0121 456 2000, Appointments 0121 452 2815 West Midlands Hospital, Halesowen: General 01384 560123, Appointments 01384 632640 PA Liz Carter 01384 632636

Website: www.mrdavidcheung.com

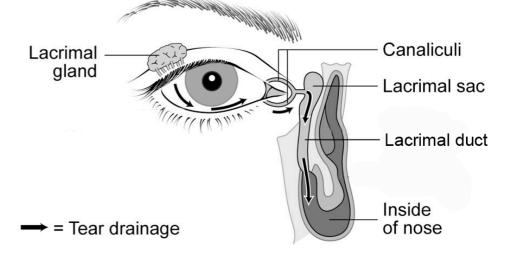
Watering eyes

This information sheet is designed to provide more information for patients awaiting oculoplastic surgery by Mr David Cheung. Further information is available from Mr Cheung's patient website: www.mrdavidcheung.com



The normal tear system

- The eye has several tear glands which produce tears on to the surface of the eye.
- Tears are important in helping to wash, clean and lubricate the eyeball surface.
- The eyelids behave like squeegees helping to wipe the surface of the eye with the tears.
- Tears then drain away through a small opening (also called a punctum) found on the edge of the eyelid near the nose, into a passageway system within the nose.
- The tears then empty out of the passageway system within the nose, where they are then automatically swallowed.



What causes a watering eye?

- There are many causes of a watery eye.
- · Some patients may have several causes of a watery eye at the same time.

Common causes include:

- Inflammation of the eyelid edges (called blepharitis) can result in excessive amounts of tears being produced.
- Loosening of the eyelids due to age, reducing their ability to wipe away the tears.
- An abnormal eyelid position (also called entropion or ectropion) can result in the punctum no longer being in the correct position to collect the tears.
- A narrowing of the punctum can prevent tears draining away.
- A blockage of the tear drainage system with the nose.

How can a watering eye be treated?

The type of treatment you require is depends upon the cause of the watering.

- Inflammation of the eyelids (blepharitis) can be treated by cleaning of the eyelids and eye drops.
- Abnormal lid positions, such as entropion and ectropion, or age related loosening of the eyelids require surgery. This can usually be done with a local anaesthetic injection.
- A narrowed punctum can be treated by a simple operation, usually done using a local anaesthetic injection.
- A blocked tear drainage system requires an operation called a dacryocystorhinostomy (or DCR). This is usually done under a general anaesthetic and you may need to stay in hospital overnight.

Dacryocystorhinostomy (DCR)

- The aim of a DCR operation is to create a new passageway within the nose, thus allowing tears to flow past the blocked area.
- DCR operations can be done with the aid of a special telescope to look up the nose (Endoscopic DCR). This allows for faster surgery, patient recovery is quicker after surgery and there are no visible scars.
- DCR operations can also be done through a small cut of the skin on the side of the nose (External DCR). This leaves a faint scar which usually fades over 3 months and becomes invisible. External DCR surgery still remains the gold standard due to its significantly higher success rates over endoscopic DCR surgery.
- Mr Cheung performs both types of surgery and will be able to advise you on the suitability of each operation.
- Most DCR operations usually involve placing a small length of soft plastic tubing in the nose to help maintain the newly created opening in the bone. They are kept in for a short time after surgery (varying from 2 weeks to 3 months) and are then removed, usually in the outpatient clinic.

