Marking can improve accuracy of eyelid chalazia curettage

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(HealthDay)—A new marking method can improve the accuracy of

incision and curettage of eyelid chalazia, according to a letter to the editor published online May 26 in *Clinical & Experimental Ophthalmology*.

Noting that infiltration of local anesthetic can distort the eyelid anatomy, and that the opaque anterior surface of the chalazion clamp can obscure direct vision of the cyst, hampering central clamp placement, Shivesh Varma, M.B.B.S., and Jonathan K. Kam, M.B.B.S., from the Royal Victorian Eye and Ear Hospital in East Melbourne, Australia, present a method for increasing the accuracy of incision and curettage of eyelid chalazia.

The authors note that the new method involves a marking technique for the treatment of chalazia, using a surgical marking pen to place a dot directly on the center of the chalazion. Three additional dots are marked at 90 degree intervals 1 cm from the central dot. After infiltration of the eyelid with local anesthesia, the chalazion clamp can be centered between the three circumferential dots, even with disrupted lid anatomy and reduced prominence of the cyst associated with anesthetic infiltration. The eyelid is everted, and a vertical incision is made at the center of the clamp, into the core of the cyst. Curettage proceeds in the usual fashion.

"The technique has been taught to colleagues with excellent reproducibility," the authors write. "The authors hope this marking method improves the success and satisfaction associated with surgical management of chalazia."

More information: Abstract
Full Text (subscription or payment may be required)