

CHALAZION

A chalazion (sha-lay-zee-un or kuh-lay-zee-un) is a small inflamed lump or cyst within the eyelid that is caused by a clogged, inflamed, or infected meibomian gland. (Each lid contains about 70 meibomian glands that secrete a waxy material to help keep your cornea from drying out.) If a chalazion becomes infected, it is then called a meibomian abscess.

The medical term for a chalazion is internal hordeolum. It is not the same as a sty, which is an infection of a lash gland, and called an external hordeolum. A chalazion is not related to the need for glasses, and it does not threaten your eyesight.

Symptoms

The first sign of a chalazion is usually a small painless lump in either the lower or upper lid. It may continue to grow larger, reaching pea-size or, occasionally, the size of a small grape. A large chalazion may temporarily blur vision by pressing on the eye and distorting its shape.

If the chalazion becomes infected, it may grow larger and become tender to the touch, and the entire eyelid may become red and swollen. Sometimes the entire side of your head will hurt. Eventually, the chalazion will probably come to a "head" or "point," on either the underside or outside of your lid.

Treatment

One of the most important parts of treatment is the application of heat by warm compresses. Heat increases circulation to the inflamed area, which helps remove foreign substances and germs, and aids healing. A small chalazion may disappear soon after heat treatment; a larger one may take many days before it begins to shrink, or you may need to use eye drops and/or ointment or even have the lump injected with medication to help reduce the inflammation or swelling.

If there is no improvement, or if the chalazion continues to enlarge, it may need to be opened. A local anesthetic is injected into the eyelid to numb it. Then a small incision is made so that the chalazion can be drained or cleaned out with a

curette. There is usually very little bleeding and little or no postoperative pain. Afterwards, you may be instructed to use (or continue using) drops and/or ointment in the eye, along with warm compresses for a few days, until the swelling and inflammation are reduced or gone.

An infected chalazion is treated similarly, with antibiotic drops and/or ointment along with warm compresses. If the eyelid is swollen and tender and you have much pain, oral antibiotics may be prescribed. Once the chalazion comes to a head, recovery may be hastened by opening it surgically (as above) and draining the pus, followed by heat and antibiotics.

Do not wear eyeliner or mascara during treatment. Discard any brushes and containers you have been using as they may be contaminated with the germs that caused the infection.

It is not always possible to remove a chalazion completely. After treatment, a small painless lump may remain.

Recurrence

Heat is the best way to abort an early chalazion. As soon as you think one may be starting, start applying warm compresses to the eyelid for at least 15 minutes twice a day, and continue to do so until the chalazion is almost gone. Most chalazia disappear gradually without draining or injections.

When the chalazia are numerous or keep coming back, steroid (cortisone-related) injections into the chalazia may be given. If recurrences are associated with chronic skin problems and blepharitis (lid inflammation), you may require a complete medical workup and total body and scalp treatment. A biopsy may sometimes be required to be certain that you do not have a more serious problem.