

Commissioning Statement:

Condition or Treatment:	Oculoplastic Eye Problems
Background and Commissioning position	Blepharitis: Blepharitis is a common condition where the edges of the eyelids (eyelid margins) become red and swollen (inflamed). This condition often runs a protracted course and its containment will largely depend on the patient understanding the nature of the problem and what the management issues are. Lid hygiene is the mainstay of treatment and may be sufficient to control simple low-grade blepharitis.
	Policy: Referral to secondary care for Blepharitis is NOT routinely commissioned. Referral will only be funded in accordance with criteria below: • Associated cellulitis OR • Corneal involvement OR
	 There is well documented evidence of significant pain OR There is significant impact on vision affecting functionality
	Consider referring patients with persistent unilateral blepharitis which may be a presentation of Meibomian gland carcinoma
	Ectropion Ectropion is a condition, typically a consequence of advanced age, in which the eyelid is turned outwards away from the eyeball.
	Policy: Surgery for Ectropia will only be funded in accordance with the criteria below:
	Conservative management has been exhausted and there is evidence of significant impairment of the punctum
	AND There is recurrent infection in surrounding skin OR
	There is significant impact on vision affecting functionality OR
	 In order to have safer intraocular procedures / so the patient can undergo another intraocular procedure.
	Entropion An entropion occurs where an eyelid turns inwards towards the eye. This causes the eyelashes to rub against the front of the eye (the cornea). The lower eyelid is most commonly affected.
	Policy: Surgery for Entropia will only be funded in accordance with the criteria below:



• There entropion is symptomatic causing ocular irritation, foreign body sensation, blepharospasm, tearing and redness and there is risk of corneal damage

OR

There is significant impact on vision affecting functionality

OR

• In order to have safer intraocular procedures / so the patient can undergo another intraocular procedure.

Epiphora (watery eyes)

Conservative management comprises:

- · Daily massage of lacrimal sac
- Warm Compresses
- Massage
- Referral to Optometry for Syringing of the nasolacrimal duct (for adults only)
- Chloramphenicol for recurrent conjunctivitis in young children.
- Systemic antibiotics for dacryocystitis but requires relief of obstruction to prevent recurrence.

Referral to Secondary Care for Surgical intervention for epiphora secondary to lacrimal sac or nasolacrimal duct obstruction.

Referral to secondary care may be made for diagnostic purposes or tear duct syringing, however surgery is not routinely commissioned therefore prior approval must be obtained from the CCG's Individual Funding Request panel.

Refer to the IFR Panel for watery eyes surgery when, despite undergoing conservative management, the patient is experiencing a daily impact of significant watering of the eyes affecting visual function and / or interfering markedly with quality of life. The watering should occur both in outdoor and indoor settings.

Surgery for Minor Eyelid Lesions

Minor eyelid lesions include eyelid papilloma's or skin tags, cysts of moll, cysts of zeis, Meibomium cysts (see separate commissioning statement)

Policy: Surgery or treatment for minor eyelid lesions will only be funded in accordance with criteria below:

• There is well documented evidence of significant pain

OR

Recurrent infection

OR

Recurrent bleeding

OR



	Is subject to unavoidable recurrent trauma leading to bleeding OR
	There is significant impact on vision affecting functionality
	Where the lump is rapidly growing, abnormally located and / or is displaying features suspicious of malignancy, specialist assessment should be sought using the 2 week wait pathway.
	Surgery for primarily cosmetic reasons is not eligible for NHS funding
	See separate commissioning statements for Chalazion and Meibomium Cysts.
Effective From:	1 st July 2021
Summary of evidence/ rationale:	Ectropion and entropion are common maladies of the eyelid margin that can directly affect ocular function and patient comfort; surgical repair is commonly performed.
	Ectropion (out-turning of the eyelid) can present with keratoconjunctivopathy, infection, and dermatitis, among other signs and symptoms. Tearing is a common presentation, whether the punctum is everted (resulting in a tear outflow problem) or not (as in reflex tearing from irritation and exposure kerato-conjunctivopathy). Combined-mechanism tearing is not unusual in these cases.
	Entropion (in-turning of the eyelid) presents as an irritated eye with foreign-body sensation caused by inwardly rotated eyelashes and eyelid skin. The eye is red from kerato-conjunctivopathy. Affected individuals often devise home remedies, such as taping the lid down to the cheek to rotate it away from the globe for comfort.
Date:	February 2021
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Contact:	Dr C Ives, Governing Body GP

Additional Information/References:

Entropion and Ectropion Christopher DeBacker: http://emedicine.medscape.com/article/1844045-overview