

Eyelid tumour removal and reconstruction surgery

This leaflet explains more about tumour removal and reconstruction surgery, including the benefits, risks and any alternatives. It also provides information on what you can expect when you come to hospital. If you have any further questions, please speak to a doctor or nurse caring for you.

What is eyelid tumour removal and reconstruction?

This is a surgical procedure to remove a tumour (cancer) from your eyelid and to repair the lid afterwards. It is performed under local anaesthetic. You will probably have already had a small sample of tissue (biopsy) taken, confirming that the lump is a type of cancer. More than nine out of ten eyelid cancers are basal cell carcinomas (also called rodent ulcers) and do not spread anywhere else in the body.

What does this involve?

Removal and reconstruction (repair) is usually done as a two stage process by different teams of doctors.

Stage 1: Removal of the tumour

This is performed in the dermatology department by specially trained dermatologists, using a technique called Mohs surgery. Please see our leaflet **Micrographic (Mohs) surgery to treat your skin cancer** for more information. The Guys and St Thomas' website also provides a link to our Mohs video on the 'Skin cancer services' page.

They will remove the tumour and also take a small surrounding margin of apparently healthy eyelid to examine. If there is any tumour in the margin, a further margin of eyelid tissue is removed. This process continues until the entire tumour has been removed. Most patients only need one or two procedures to remove the tumour completely. The tumour and margins are removed under local anaesthetic.

In between procedures, your eye will be patched and you will be asked to sit in the waiting area whilst the specimens are examined and analysed. This can take up to 40 minutes each time. At the end of the day, your wound is left unstitched but is covered with antibiotic ointment and a secure dressing. Most people then go home for the evening.

Stage 2: Reconstruction

The reconstruction is to close the eyelid wound after the tumour has been removed and is performed by eye surgeons. This is to ensure that you get the best result possible with the best eyelid function you can. Usually, the reconstruction is done the following morning in the eye

theatres. Details on the exact timing and location of your reconstructive surgery will be given to you when you attend the eye clinic beforehand.

If needed, facilities are available for you to stay at Guy's and St Thomas' for the night between your eyelid tumour removal and reconstruction. This can also be discussed in the clinic.

Reconstruction of the eyelid wound can be performed under local anaesthetic or general anaesthetic if needed. The procedure takes longer than the removal of the tumour. With local anaesthetic this should not be painful. There are many techniques used for eyelid reconstruction, depending on the type of wound you are left with. These include secondary intention healing (letting the wound heal naturally), use of local tissue flaps or a full thickness skin graft.

The likely technique to be used in your case will be discussed with you by your eye surgeon in clinic and again just before you have your reconstructive surgery. Occasionally, the upper and lower eyelids of one eye will need to be stitched together temporarily as part of the reconstruction; this is usually opened after two weeks.

What are the risks?

Skin around the eye generally heals well but the potential problems are:

- Bruising and swelling can be expected and may remain for a few weeks after surgery.
- Infection in the wound is possible. You will be given some antibiotic cream to apply to the wound, as well as receiving instructions on wound care from your attending nurse.
- The scar usually improves with time, but occasionally a small revision procedure is necessary once everything has settled down if there is still a functional problem. The risk of scar contraction can be reduced by keeping the area moist with a non-perfumed moisturising cream, such as Vaseline, and by massaging it gently.
- The eye can be watery or dry after surgery. On occasion the surgery to remove the eyelid tumour results in removal of part of the tear duct, resulting in a persistently watery eye.
- Very rarely, surgery around the eye can be associated with a long term discomfort to the eye or a change in vision.

How can I prepare for the treatment?

You will most probably have a consultation with both the eye surgeons and dermatologists beforehand, when the procedures will be explained to you in more detail and any questions can be answered.

You will have a pre-operative assessment with a nurse where more information will be provided. You may need to have more investigations, including an ECG or blood tests, if your surgery involves general anaesthetic or sedation.

If you are taking any medicines that thin your blood, such as antiplatelet medicines (for example aspirin or clopidogrel) or anticoagulant medicines (for examples warfarin or rivaroxaban), please tell your doctor or the nurse as you may need to stop them temporarily before your surgery. Also tell your doctor or nurse if you have diabetes as you may need to alter the dose of your diabetes medicines, as you will need to fast before the procedure. Further information on stopping any medicines will be given to you when you come for pre-assessment. Please ask us if you have any questions.

Please let us know if you are taking any regular medicines (including anything you buy yourself over the counter or any herbal or homeopathic medicines) and if you have any allergies to any medicines.

Surgery under local anaesthetic

Removal of the tumour is under local anaesthetic so you can eat as normal before the treatment but you should only have a light meal. You can do the same if your reconstructive surgery is also under local anaesthetic.

Surgery under general anaesthetic or sedation

If your reconstructive surgery involves general anaesthetic or sedation then you should follow these fasting instruction instructions which will be explained further in the pre-assessment clinic.

Fasting instructions

Please do not eat or drink anything (except non-fizzy water) for six hours before your appointment. This means that you cannot suck on sweets or chew gum. You are allowed to drink water up to two hours before your appointment. **If you continue to eat or drink after this, your surgery will be cancelled.**

Please wear comfortable and loose-fitting clothing on the day of surgery.

You may need to organise a responsible adult who can assist you on your way home. They may also need to stay with you for at least one day after the treatment.

Consent - asking for your consent

We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.

Remember that you may need to bring your reading glasses into the hospital with you to help you read the form. If your sight is poor you can ask the doctor or a relative to read it to you and check it before you sign.

If you would like more information about our consent process, please speak to a member of staff caring for you.

After your surgery

At the end of the operation, a firm pad is usually placed over the area to reduce the swelling and bruising, and this may remain on for up to five days in certain cases.

You may be given drops and ointment to put into your eye. It is important to wash your hands before and after using these, to prevent infection. On discharge, you will be given an appointment to be reviewed in the outpatient clinic.

Will I feel any pain?

Anaesthetic is injected under the eyelid skin, which causes a sharp and stinging sensation for few seconds. Following this, you should not feel any pain, although you might be aware of some pulling sensations. If you are having general anaesthetic then you will be asleep during the

procedure and unaware of what is happening. Your eye may be slightly painful for about for 24 – 48 hours after the surgery and you can take paracetamol regularly to help with this.

What do I need to do after I go home?

You may want to take few days leave from work depending on your individual circumstances. You should not resume any strenuous activity, including swimming, for two weeks after surgery. It is best that someone stays with you to help you for at least a day after the treatment.

You are advised not to drive, operate machinery, drink alcohol or take sedative drugs for 24 hours.

Will I have a follow-up appointment?

A follow-up appointment for a few days after your surgery will be booked for you before you leave the hospital. It will take place in the Eye Department at St Thomas' Hospital.

Contact us

If you have any questions or concerns about the treatment, please contact the Ophthalmology secretary on **020 7188 0161** (Monday to Friday, 9am to 5pm).

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

t: 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints) **e:** complaints2@gstt.nhs.uk

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch:

t: 020 7188 8815 **e:** languagesupport@gstt.nhs.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

t: 111

NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

w: www.nhs.uk