Chalazion

This information has been given to you to help answer some of the questions you may have about a chalazion. Contact details are at the end of this information sheet if you have any questions or concerns.

What is a chalazion?
A chalazion is a lump on the eyelid that is caused by inflammation of a tiny sweat gland within the skin. This gland produces oil. When the gland becomes blocked, it can rupture and the inflammation process begins. A chalazion is not a stye, which is an infection in the eyelash hair follicle root on the surface of the skin.

What are the signs and symptoms?
An area on the upper lid becomes hard and swollen over a few weeks – this may be tender and the eye lid may appear red, if infected.

How is it diagnosed?
The ophthalmologist (eye doctor) will examine the back of the eyelid and the eye itself.

What treatments are available?
Heat can be applied to the eyelids either by hot spoon bathing or using a towel.

Instructions for hot spoon bathing:
Have someone help you with this at home if possible. The heat helps to relieve pain and encourages the lump to discharge. The doctor or nurse will tell you if you should ‘hot spoon bathe’ as follows:

1. Pad the end of a wooden kitchen spoon with an absorbent material such as gauze.
2. Dip the spoon into a bowl of steaming water.
3. Keeping the eye closed raise the padded end to the affected eye, keeping it about an inch away from the eyelid.
4. As the spoon cools, re-dip it in the steaming water and repeat.
5. Repeat for 10-15 minutes and do this 2 - 3 times daily.

Alternatively, wring out a face towel with warm, boiled water and gently place it over the closed lid for 5 -10 minutes. Gently massage the area with your finger tips for two minutes, every morning and night for two weeks. This may be the easiest option for treating children.
What happens if I do not get treatment?
The lump may get bigger and the affected lid could get swollen, which can be uncomfortable.

Is there anything I can do to help?
You can help by following the advice given by your doctor or nurse and asking questions if you are uncertain.

What if this treatment does not work?
If the lump continues to grow and does not respond treatment, you may need antibiotics drops or ointment.
If the antibiotics does not work, you may need a small surgical procedure called ‘incision and curettage’. This is performed under local anaesthetic. The skin is cleaned and a drop of anaesthetic is instilled onto the eye. Local anaesthetic is injected with a very small needle into the skin around the chalazion. After few minutes, once the anaesthetic has started taking effect, a small clamp is put in place and contents of the cyst is scrapped out. You won’t feel any pain but you may feel some pressure.

Caring for your eye after surgery
After the surgery, an eye pad will be placed over your eye and we advise you to keep the pad on until the next morning. You will be given antibiotic ointments to put in the eye twice a day for a week.
Your doctor or nurse will explain the following advice.

- The eyelid will feel a little sore and will be red with some moderate lid swelling. It is fine to take a painkiller for pain or discomfort.
- **Ice packs:** These help to reduce lid swelling, pain and speeds up healing. The ice pack can be made by wrapping ice or packet of frozen food such as peas in a plastic bag, flannel or towel. Apply the ice pack to the closed eyelid for five minutes every hour during the daytime for the first day after surgery, immediately after the eye pad has been removed,
- The eyelids can be cleaned of excess mucous or ointment with a cool (boiled) water on a clean piece of cotton wool.
- **Swimming:** No swimming until two weeks after surgery. If you must swim before then, then watertight goggles should be worn.
- **Bath/shower/hair wash:** You can have a bath, shower or wash your hair, but avoid soap or shampoo to the eye as you would normally do.
- **Work:** You can expect to go back to work after 1-2 days after surgery.
- **Follow up appointment:** It is not usual to have a follow up appointment.
- **Other problems that can occur:**
  - The cyst can come back in less than one in ten cases.
  - Infection of the eyelid with the need to have oral / intravenous antibiotics.
More information about chalazion can also be found at [www.patient.co.uk](http://www.patient.co.uk)

**Contact us**

If symptoms get worse or do not go away with treatment after two weeks, please contact your nurse practitioner in the eye casualty department. Call **020 7188 4336** (between 9am and 4pm, Monday to Friday).

The eye casualty department/rapid access clinic at St Thomas’ Hospital is open from 9am to 4.30pm, Monday to Friday. Outside of these hours there is an eye doctor in the main Emergency Department (A&E) at St Thomas’ Hospital. You can also see your GP or local Emergency Department.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.guysandstthomas.nhs.uk/leaflets](http://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 website**

Online information and guidance on all aspects of health and healthcare, to help you take control of your health and wellbeing. **w:** [www.nhs.uk](http://www.nhs.uk)

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**Was this leaflet useful?**

We want to make sure the information you receive is helpful to you. If you have any comments about this leaflet, we would be happy to hear from you, fill in our simple online form, **w:** [www.guysandstthomas.nhs.uk/leaflets](http://www.guysandstthomas.nhs.uk/leaflets), or **e:** patientinformationteam@gstt.nhs.uk

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