

RECONSTRUCTION OF UPPER LID (A CASE REPORT)

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The eye lid reconstruction has been a problem for centuries. It was until the time of nineteenth century that useful contribution to the technique of blepharoplasty begin to appear. The early efforts consisted primarily of local flaps or by pedicle coverage. The favoured method in early days was the Indian method i. e, by means of twisted flap of all sorts. Fricke (1929) who introduced a procedure for both upper and lower lid reconstruction using zygomatic or temporal flaps where as Cutler (1955) described a method for partial or total upper lid reconstruction. A full thickness post-auricular or supra clavicular grafts have also been reported having the ideal function.

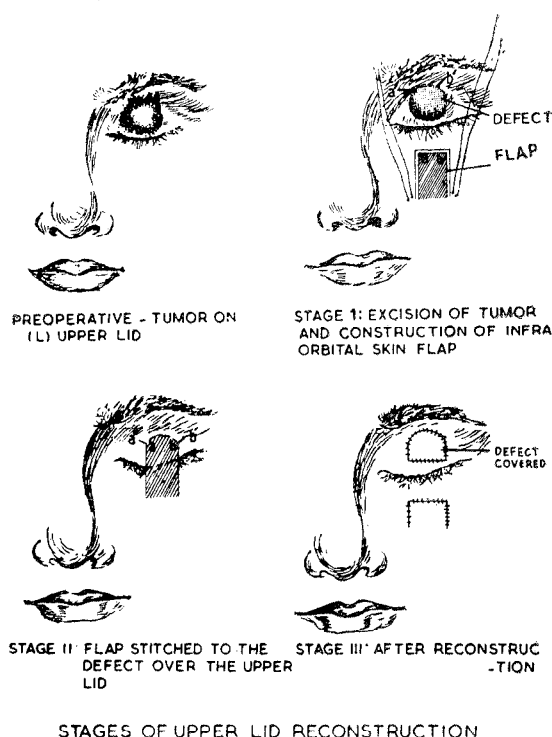
Here is a case with a swelling of 2 cm x cm hard, irregular situated over upper lid, fixed

to the tarsal plate having chemosis of conjunctiva with a diagnosis of Meibomian gland carcinoma.

The whole tumour was excised with diathermy along with the tarsal plate leaving the bulber conjunctiva intact. Reconstruction was done by infra-orbital flap stitchig directly (not through lower eye lid) over the defect. This method is indicated in old persons where the skin is loose and had less fibrofatty tissue. After two weeks, the required flap was stitched with the ciliary margin (Diagram A).

Summary

Infra orbital flap can be utilized directly for partial and total upper lid losses in old persons where the skin is loose and elastic.



References

1. Cutler, N. L. and C. Beard : A method for partial and total upper lid Reconstruction. *Am. J. ophthalmol.* 39 1-7, Jan. 1955.

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