

Surgical Correction of Visual Field Deficits

The natural aging process brings about a variety of changes to the skin of the forehead and eyelids. Usually these changes are not symptomatic. However, when symptoms do occur, including excess skin and laxity, problems such as fatigue, visual field deficits, epiphora, and dryness may result.

Testing to confirm the diagnosis should include visual field testing, with and without taping of the brows and eyelids. Correction of the deficit will depend upon the physical cause:



Brow Ptosis is the migration of the forehead tissues leading to hooding of the supraorbital tissues, especially along the lateral brow. Correction of the problem involves lifting the brow to its previous position. This is accomplished through an open brow lift or an endoscopic lift. The choice of the procedure is patient dependent.

Dermatochalasis of the eyelids is the result of the loss of skin elasticity, skin excess, and loss of adhesion to its underlying structures. In the upper lid this causes hooding of the eyelid skin resulting in the loss of a portion of the visual field. In the lower eyelid this appears as bags under the eye. This can cause traction on the lower lid resulting in inferior displacement of the lid. Surgery removes the excess tissue from the lids. Care is taken to not remove too much skin leading to difficulty closing the eye or lower lid retraction.

Blepharoptosis is a condition in which the actual margin of the upper eyelid is abnormally low. The vast majority of the cases result from weakness or stretching of the levator muscle or its attachments to the tarsus. Surgical imbrication or advancement of the levator muscle can correct the problem.

Lower eyelid laxity is manifested by ectropion scleral show, epiphora, and occasionally dry eye symptoms. Re-establishing the correct position of the lower eyelid requires tightening of the lid via a canthopexy, canthoplasty, or other procedures.



If you would like to refer a patient or simply discuss a case with us, please call our office at any time.

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RICHARD'S *Story*

Richard was referred to our office because he was experiencing difficulty with obstruction of his upper visual fields. We found his symptoms to be due to excessive upper eyelid skin (blepharocholasia).

An evaluation by his ophthalmologist, including visual field testing, documented that his visual problems were due to the upper eyelid redundancy. His insurance company approved reconstructive surgery and he underwent bilateral upper lid blepharoplasty.

After a short recovery he is pleased with the dramatic improvement in his vision and he has a natural, age appropriate, more rested appearance.

"The surgery effectively removed the folds of my eyelids which had impaired my vision. Northland Plastic Surgery is an immaculate facility with an efficient and friendly staff. I would recommend NPS to others." ~Richard