

Eyelid Surgery; Gold or Platinum Weight Insertion

What is a gold or platinum weight, and why is it used?

Sometimes patients may have trouble closing their eyelids. The eye can become dry and damaged, and vision may be threatened. This can happen after facial nerve injury, stroke, surgery, trauma or other disease process. In order to help the patient close their eyes, a gold or platinum weight can be placed underneath the skin the eyelid. The weight of the gold or platinum helps the eyelid close once the patient attempts to close their eyes.

How will it affect my vision?

Reduced dryness of the eye may help to improve vision in the affected eye. However in some patients, the pressure of the weight 'remodels' the underlying cornea, causing a prescription change in vision. This is often temporary, but rarely is permanent.

How will the weight look?

The incision the weight is placed through is in a natural crease of the upper eyelid and typically heals with very minimal scarring.

Gold weights may have an outline or 'profile' that can be seen, particularly in patients with thinner skin. The platinum chain was developed to reduce the visibility of the implant, but may also be noticed, again particularly in thin skinned patients. The weight may also cause a condition called 'pseudoptosis'; where the eyelid appears droopier and sits lower than the unaffected side. The difference is usually <2-3mm and rarely causes functional problems.

What are the risks involved?

Risks of gold weight surgery, like most eyelid surgical procedures include but are not limited to: bleeding and bruising, scarring, infection, an asymmetric or unbalanced appearance, scarring, a "wide-eyed" or "open" appearance, droopy eyelid surgery, difficulty with or inability to wear contact lenses, double vision, tearing, scratches on the eye or corneal irritation or dry eye problems, numbness and/or tingling in the operated eyelid, near the eye, or on the face, and very rarely, loss of vision.

The result of gold weight surgery cannot be guaranteed. The gold weight is sized before surgery but sometimes the weight is too light or too heavy for the eyelid. This is particularly common for patients who regain facial nerve function; removing +/-replacing the weight may be necessary as their ability to close their eye returns.

- Sometimes the gold weight can become infected and have to be removed.
- Sometimes (<3%) the weight can migrate, and fail to function correctly, necessitating removal/replacement.

- Some patients have difficulty adjusting to changes to their appearance.
- Some patients have unrealistic expectations about how changes in appearance will impact their lives. Carefully evaluate your goals, expectations and your ability to deal with changes to your appearance and the possible need for repeat surgery before agreeing to this surgery.
- Even with the gold weight, the patient may have to use drops and ointment. The eye still may not close completely with the gold weight in place especially when sleeping.

Alternatives to gold/platinum weights?

There are several alternatives to this surgery.

- Without surgery, eye lubrication (up to 1 hourly) will need to be used to ensure adequate eye protection.
- Botox may be used every 3-4 months to help close the eye.
- The eyelids can also be sewn together in toward the outer corner to help achieve eye closure.

Each approach has risks and benefits and should be explored with your surgeon prior to undertaking surgery.



Can I still have an MRI?

Yes – these implants are generally considered safe however please advise the technician prior to undergoing an MRI that there is a gold/platinum weight present.

Postoperative Instructions after weight insertion

Bruising around the eye is very common, and small amounts of ice/cool packs may be used for no longer than 20min every hour in order to reduce swelling and bruising.

Half strength hydrogen peroxide (or sterile water) on q-tips is used to clean the incision twice daily, GENTLY.

Erythromycin Ophthalmic ointment to the suture line is applied 3 times daily, until you see your surgeon again.

Patients should return at two weeks for further evaluation (or 5 days for suture removal).

You may need to sleep with the head elevated on an extra pillow to ensure the weight keeps the eyelid down at night.

When should I call my doctor?

- If you have increased redness, swelling or bruising.
- If you have persistent bleeding.
- If you have any side effects to medications; such as, rash, nausea, headache, vomiting, increased irritability, or constipation.
- If you have a fever (oral temperature over 38 degrees)

Depending on where you initially saw Dr Meller, you may call;

- The rooms at Sydney Centre for Ear, Nose, Throat Level 1, Building 2
 Frenchs Forest Rd East, Frenchs Forest (02) 9451 9883
- 2. Prince of Wales Hospital on (02) 9382 2222; please ask for the ENT registrar on call.

If you are concerned that you are experiencing an emergent problem, such as serious bleeding or difficulty breathing or swallowing, please call 000 or attend your nearest emergency department immediately.