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Silicone Lid Sling-in Permanent Facial Palsies: (A Physio-Anatomic Help For Preventing Exposure Keratopathy)

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To evaluate the efficacy of silicone sling procedures in our local settings to correct exposure problem associated with permanent facial palsy while at the same time providing anatomically well settled and physiologically active eyelid. Settings: Institute of Ophthalmology, King Edward Medical College and Mayo Hospital, Lahore. Nishtar Medical College, Multan. Methods: A silicone band is passed in front of the tarsal plate suborbicularis in a circular fashion. It is supported by medial palpebral ligament medially and orbital wall laterally. Its tension is adjusted to provide a spring like action to close the lids while opening is provided by the levator palpebrae superioris muscle stretching the sling at the same time. Results: Good lid closure with concomitant correction of lower lid ectropion was achieved in majority of cases. Cosmetic results were excellent. Near to normal upper lid movements were restored. Conclusion: The method provides a useful and satisfactory way of providing mobile and cosmetically acceptable eyelids while at the same time preventing problems of exposure keratopathy.