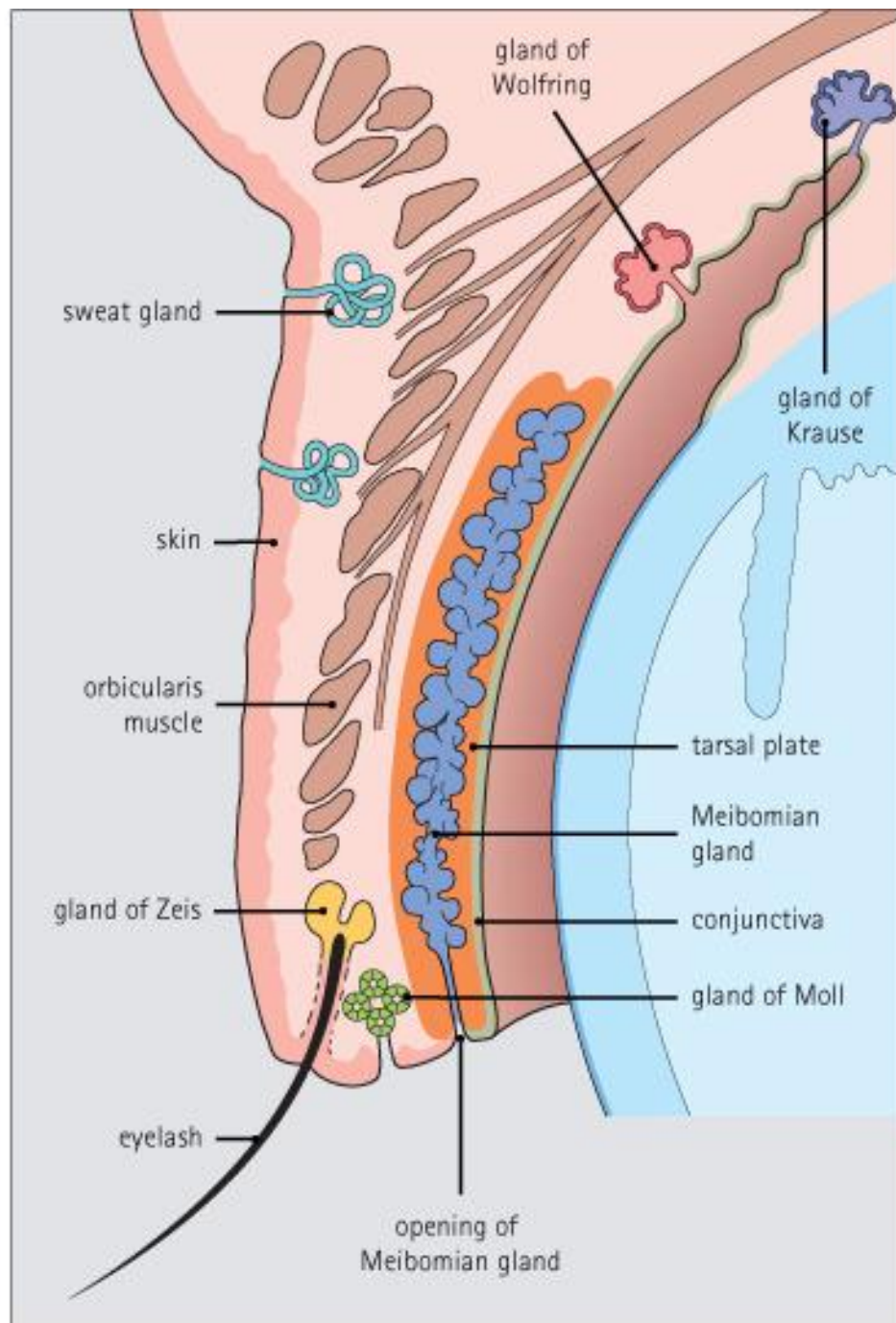
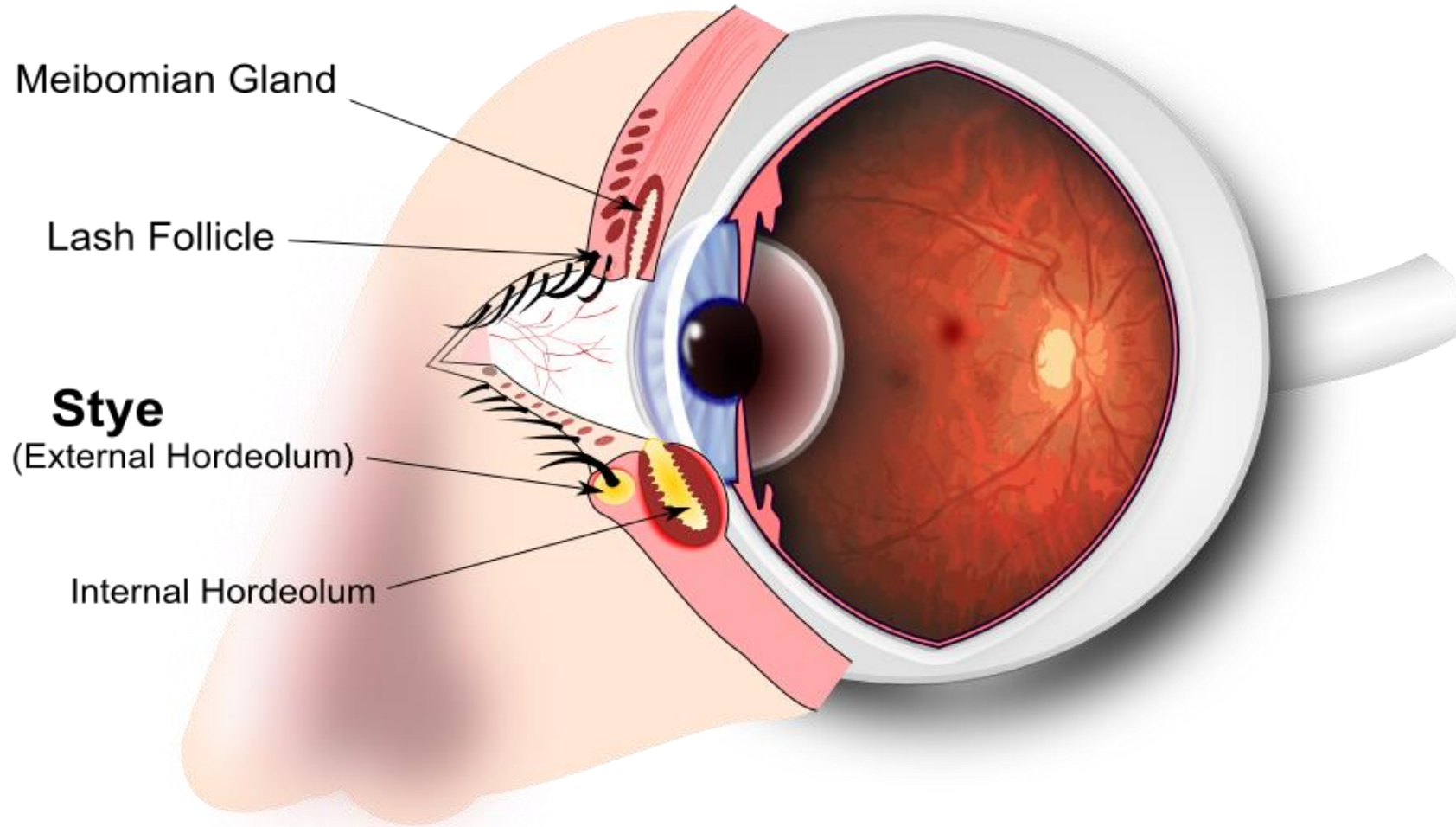


Stye vs. Chalazion

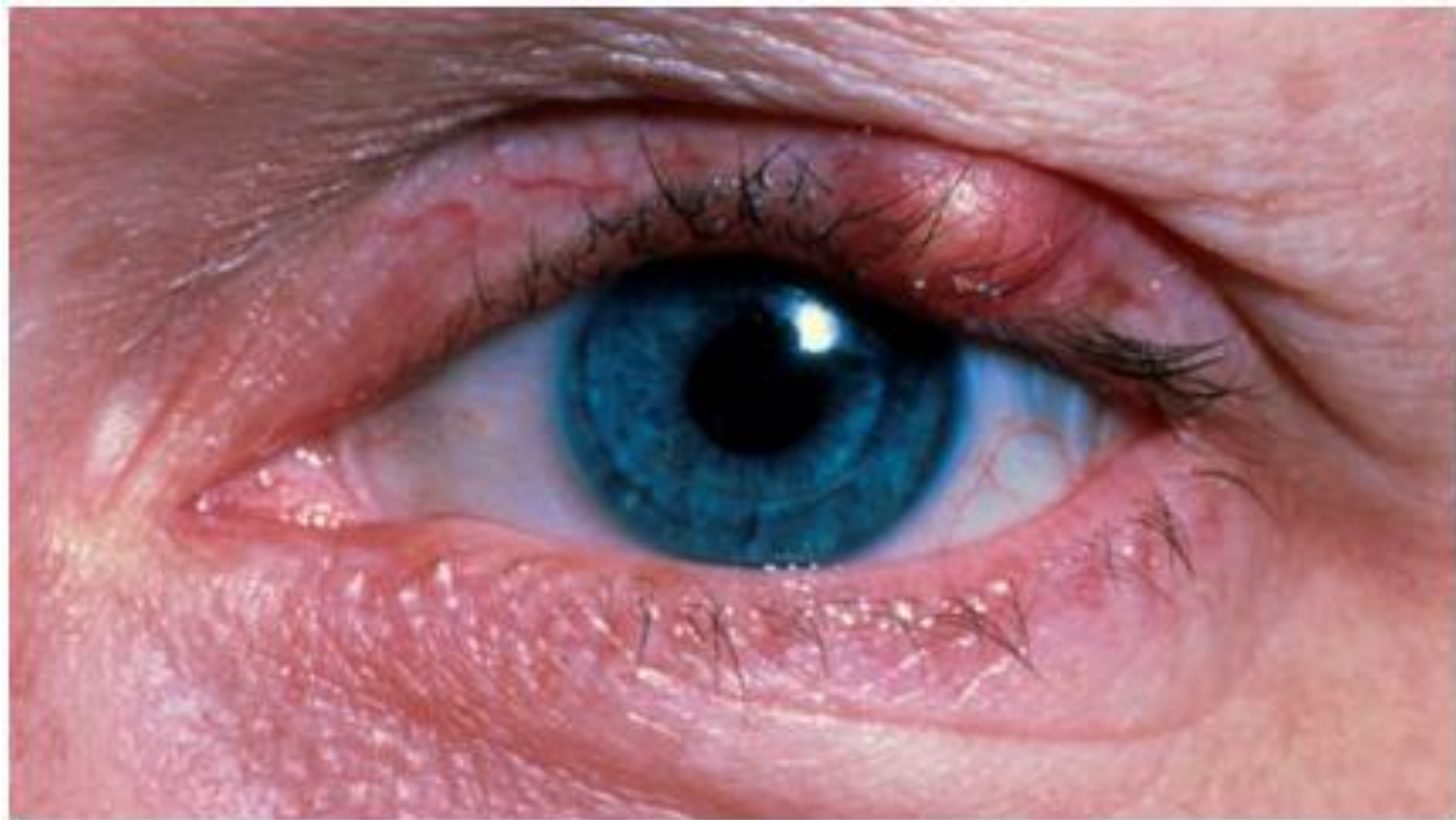
Stye

AKA Hordeolum











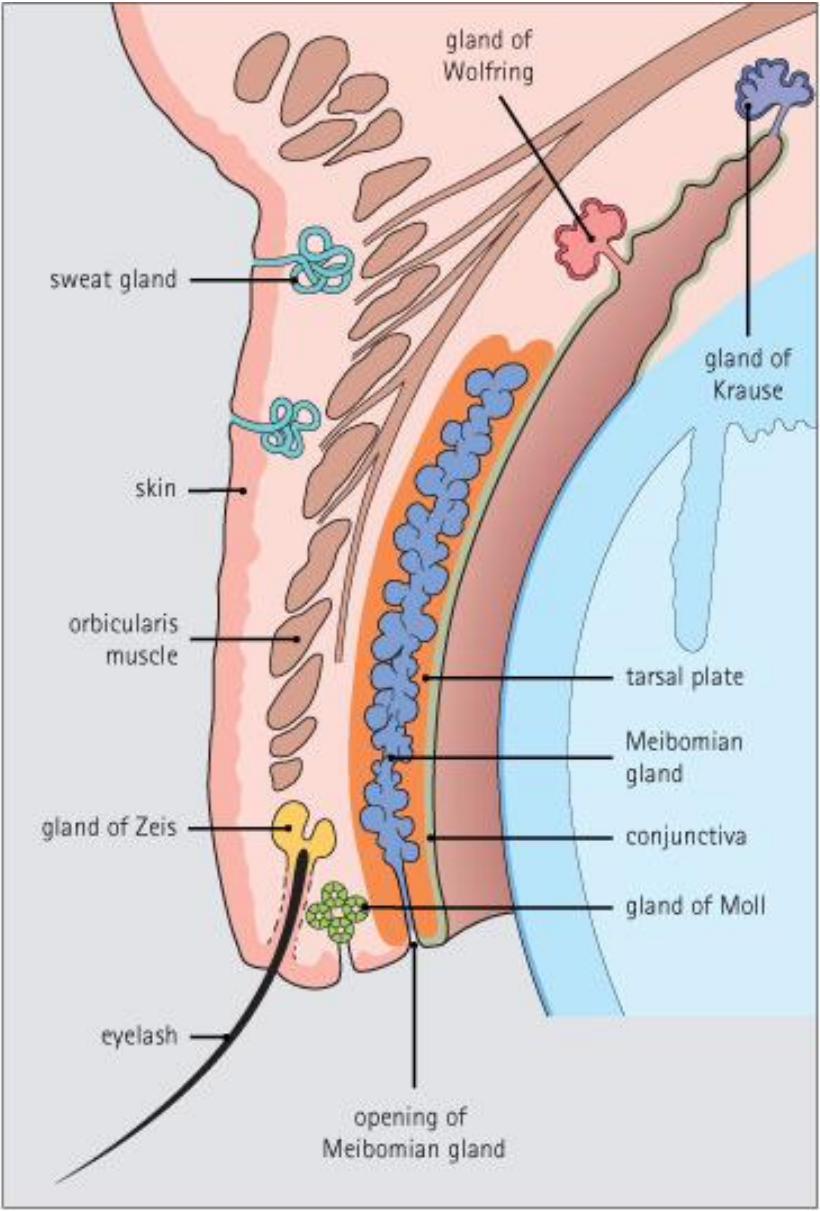


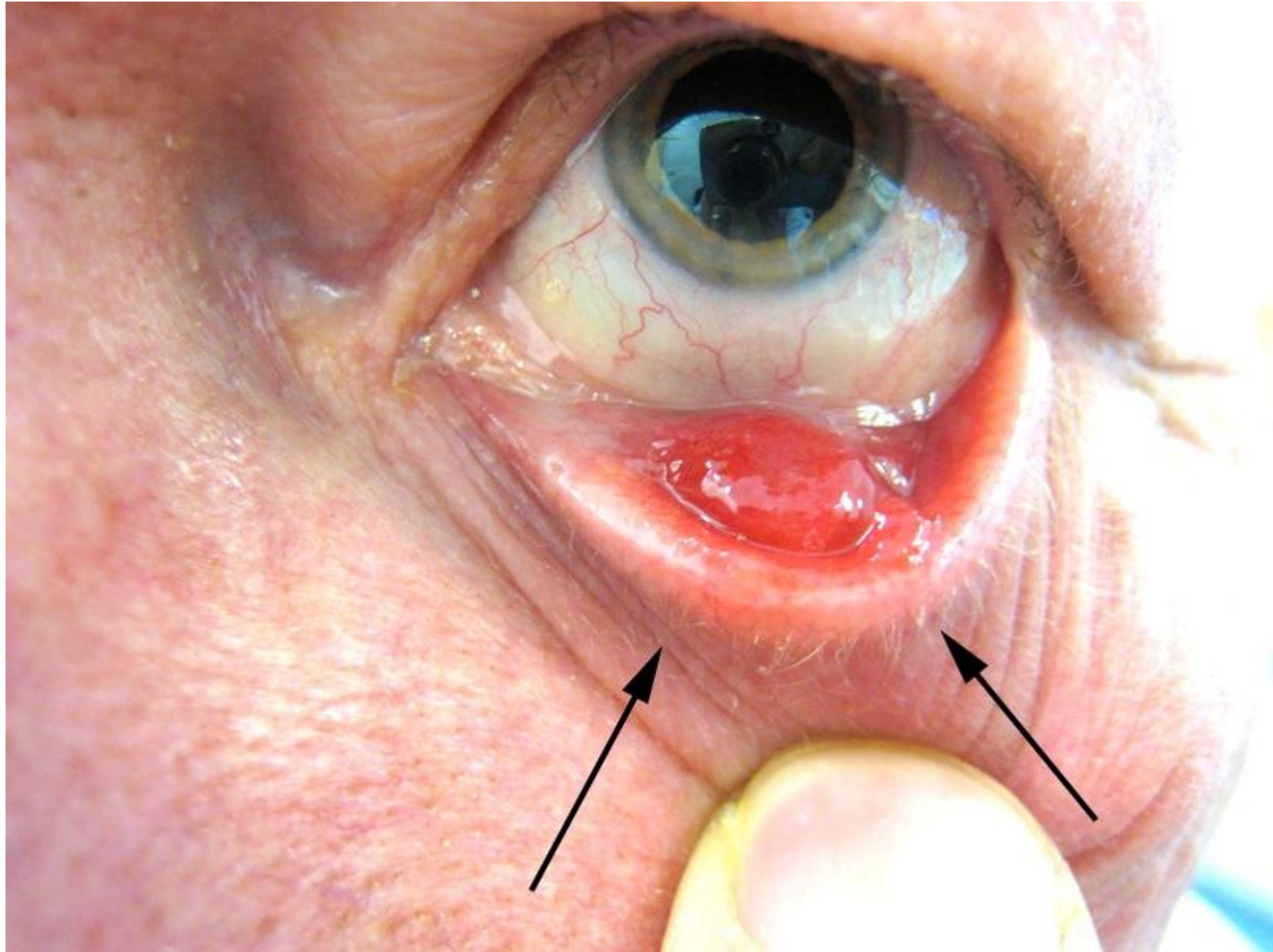


Treatment

- Apply a warm compress to the affected eye for 5-10 minutes.
- Repeat several times a day until the styne drains or resolves.
- Do not attempt to puncture the styne
- Avoid make up or contact lens use until the area has healed.
- Do **not** prescribe a topical antibiotic unless there is evidence of conjunctivitis.

Chalazion







Treatment

- Apply a warm compress to the affected eye for 5–10 minutes. Repeat this three to four times daily for up to 4 weeks.
- Explain that this will help to liquefy the lipid content of the cyst, thus encouraging drainage of the cyst contents.
- Avoid excessively hot compresses (to avoid scalding).
- Gently massage the meibomian cyst after application of the warm compress (to aid expression of the cyst contents).
- Clean the affected eyelid twice daily (to clear debris and oily secretions from the eyelid and lashes).
- Do **not** prescribe a topical or oral antibiotic.

Referral- NICE

If the cyst does not improve or resolve over 3-4 weeks of conservative management offer:

- Referral to an ophthalmologist for treatment (incision or curettage performed under local anaesthetic, or intralesional corticosteroid injection).
- A 6-month period of watchful waiting
- No treatment.

Referral- Local CCG policy

Incision/excision of chalazia will be funded when all the following criteria are met:

- Chalazia is causing significant irritation, pain or blurring of vision.
- Conservative treatment with heat and compression have been tried for at least three months.

HORDEOLUM

INFECTION OF THE
GLANDS OF THE EYELID

INTERNAL:
MEIBOMIAN
GLAND

EXTERNAL (STYE):
GLAND OF ZEIS
OR MOLL

NO!
STAY BACK!
IT HURTS!



REDNESS, ACUTELY TENDER

CHALAZION

STERILE, CHRONIC INFLAMMATION
THAT RESULTS FROM A BLOCKED
MEIBOMIAN GLAND

MAY DEVELOP FROM AN
INTERNAL HORDEOLUM

DUDE, TAKE
A CHALAZION
PILL.



HARD, NONTENDER

