

The American Academy of Ophthalmology is the world’s largest association of eye physicians and surgeons. A global community of 32,000 medical doctors, we protect sight and empower lives by setting the standards for ophthalmic education and advocating for our patients and the public. For more information, visit [www.aao.org](http://www.aao.org).

COMPLIMENTS OF:

Watch a ptosis video from the American Academy of Ophthalmology’s EyeSmart program at [aao.org/ptosis-link](http://aao.org/ptosis-link).

people with acquired ptosis, the eyelid opens wider after using the drops. It needs to be used every day to keep working.

Oxymetazoline does not work for certain types of droopy eyelid, like those arising from injury or nerve problems. So ask your ophthalmologist if it is right for you.

### Adult ptosis surgery

Ptosis surgery is usually done as an outpatient procedure, which means you can go home the same day as the surgery. A local anesthesia will be used to numb your eye and the area around it.

Sometimes, the surgeon may only need to make a small adjustment to the lid’s lifting muscle. For more severe ptosis, the levator muscle may need to be strengthened and reattached to the eyelid.

Before eyelid surgery, be sure to tell your ophthalmologist about all the medicines you take. Include all prescription and over-the-counter medications, vitamins, and supplements. It is important for your eye surgeon to know if you take aspirin (or aspirin-containing drugs) or blood thinners, or if you have a bleeding problem.

As with any type of surgery, there are possible risks and complications with ptosis repair. Your ophthalmologist will discuss these with you.

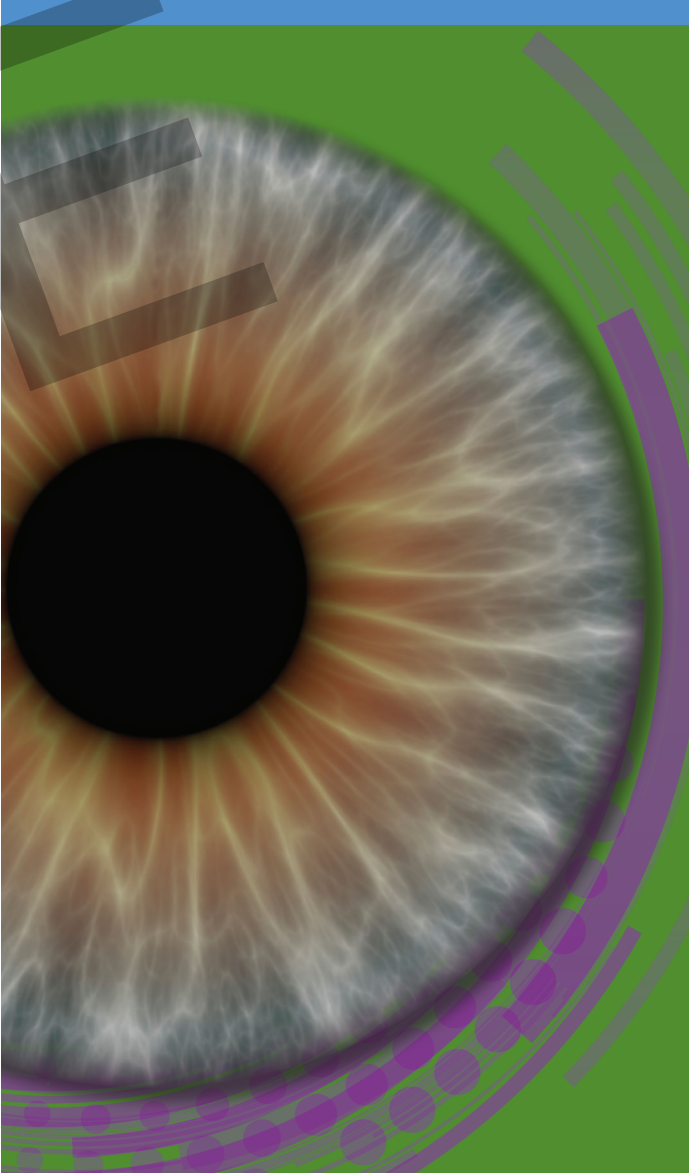
### Summary

Ptosis, or a droopy eyelid, can affect both children and adults. This condition can limit vision and affect how you look. It is very important that children with ptosis have regular eye exams with an ophthalmologist early in life. They are at risk for developing poor vision in the eye with the droopy lid.

Fortunately, children and adults with ptosis usually can have surgery to improve vision as well as cosmetic appearance. Prescription eye drop medicine can also treat some types of ptosis.

If you have any questions about your eyes or your vision, speak with your ophthalmologist. They are committed to protecting your sight.

# Ptosis



## What is ptosis?

Ptosis is when the upper eyelid droops over the eye. The eyelid may droop just a little, or so much that it covers the pupil (the black dot at the center of your eye that lets light in). Ptosis can limit or even completely block normal vision.

Children and adults can have ptosis. Fortunately, this condition can be treated to improve vision as well as appearance.



A child with ptosis, or drooping eyelid, in their right eye.

## Ptosis in children

Children born with ptosis have what is called congenital ptosis. This can be caused by problems with the muscle that lifts the eyelid (called the levator muscle).

The most obvious sign of ptosis is a drooping eyelid. Another sign is when the upper eyelid creases do not line up evenly with each other. A child with ptosis may tip their head back, lift up their chin, or raise their eyebrows to try to see better. Over time, these movements can cause head and neck problems.

Sometimes, a child born with ptosis can also have other eye-related problems. They can include eye movement issues, eye muscle disease, tumors (on the eyelid or elsewhere) and other problems.

Having ptosis puts a child at risk for vision problems. If the child's eyelid droops so much that it blocks vision, amblyopia (also called "lazy eye") can develop. One eye will have better vision than the other. A child with ptosis can also have astigmatism, where they see blurry images. The child may also develop misaligned (crossed) eyes.

Ophthalmologists consider the following factors when deciding the best way to treat ptosis in children:

- The child's age
- Whether one or both eyelids are involved
- The eyelid height
- The strength of the eyelid's muscle
- The eye's movements

In most cases, ophthalmologists recommend surgery to treat ptosis in children. This is to either tighten the levator muscle or attach the eyelid to other muscles that can help lift the eyelid. The goal is to improve vision.

If the child also has amblyopia, that condition must be treated as well. Amblyopia may be treated by wearing an eye patch or special eyeglasses, or using certain eye drops, to strengthen the weaker eye.



A child with amblyopia, or a weaker eye, may need to wear a patch.

**All children with ptosis—whether or not they have surgery—should see their ophthalmologist regularly for eye exams.**

Ask your child's ophthalmologist how often exams are needed. Because kids' eyes grow and change shape, they need to be checked for amblyopia, refractive disorders, and other eye problems.

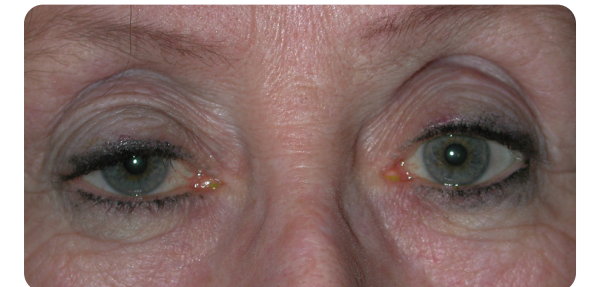
## Ptosis in adults

Adults get ptosis (called involutional or acquired ptosis) when the levator muscle stretches or separates away from their eyelid. This can be caused by aging or an eye injury. Sometimes ptosis happens as a side effect after certain eye surgery. Rarely, diseases or tumors can affect the eyelid muscle, causing ptosis.

Your ophthalmologist will find the cause of your ptosis in order to recommend treatment. They will do a complete eye exam, and may also want you to have blood tests and imaging tests. The ophthalmologist will likely recommend surgery to help the eyelid muscle work better.

## Medication for adult ptosis

There is a new prescription eye drop for some adults with acquired ptosis. The medication—oxymetazoline—targets the muscle that raises the eyelid. In some



An adult with ptosis (drooping eyelid) in their right eye.