



Evaluation of ocular surface changes following Levator resection Vs Frontalis suspension operations

Thesis

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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

قالوا

سببنا نك لا علم لنا
إلا ما علمتنا إنك أنت
العليم العظيم

صدق الله العظيم

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List of Abbreviations

Abb.	Full term
BPES	Blepharophimosis-Ptoxis-Epicanthus Inversus Syndrome
CFEOM	Congenital Fibrosis of the Extraocular Muscles
CPEO	Chronic Progressive External Ophthalmoplegia
D	Diopters
Fig.....	Figure
FS	Frontalis Suspension
HS	Highly Significant
K	Keratometric reading
LCT	Lateral Canthal Tendon
LFT	Levator Function Test
LPS	Levator Palpebrae Superioris
LR.....	Levator Resection
m.....	Month
MG	Myasthenia Gravis
ml.....	Milliliters
mm.....	Millimeter
MRD	Margin Reflex Distance
NS	Non-significant
PAS.....	Periodic Acid Schiff
Pre-Op.....	Pre-Operative
S.....	Significant
SD.....	Standard Deviation
Sec	Second
SMAS	Superficial Muscular Aponeurotic System
SR	Superior Rectus
TBUT.....	Tear Break Up Time

INTRODUCTION

Blepharoptosis is defined as an abnormal low position of the upper eyelid; it can be classified into different subtypes according to age of onset, etiology, severity, and levator function. It may be congenital, neurogenic, myogenic, aponeurotic, mechanical or traumatic (*Baggio et al., 2002*).

Blepharoptosis leads to both cosmetic and functional problems. It causes a tired, aged appearance and blurry vision. Significant blepharoptosis sometimes forces patients to tilt their heads back, lift the drooping eyelid with a finger, and raise their eyebrows to see. Because of continuous activation of the forehead and scalp muscles, tension headaches and eyestrain can occur (*Baggio et al., 2002*).

Ptosis repair by levator resection is a versatile procedure. It obviously works best in patients with relatively good levator function (excursion of 7 mm or more), however, it can also be used in patients with poor levator function (*Hartstein et al., 2011*).

Frontalis suspension is the surgery of choice for congenital or acquired blepharoptosis with poor levator function (less than 5 mm). This procedure can be performed unilaterally or bilaterally in both children and adults (*Moscato & Seiff, 2011*).

Dry eye is a frequent condition that is overlooked most of the time, the effect of ptosis surgery on dry eye is not clear;