Case Report :

Bleeding Post Chalazion Surgery Managed by Cauterization: A case report

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Abstract

Chalazion is an eye lid lesion caused by the blockage and swelling of Meibomian glands and are very common in occurrence. Incision and curettage of chalazion is a minor procedure and is recommended for the ones resisting conservative medical treatment. Here an atypical case report of surgical management of post procedural haemorrhage of an upper left eye chalazion in a hypertensive patient is presented. The patient reported with haemorrhage soon after an uneventful chalazion incision procedure. The site of incision was successfully cauterized to manage the bleeding as it did not respond to pressure applications to stop the bleeding. Cauterization is a minimally invasive approach which is effective and safe method to manage post-operative bleeding complications from a chalazion incision.

Keywords:
case report, chalazion, incision, post-operative hemorrhage, cauterization.

Introduction

Chalazion is a benign lipogranulomatous condition of the eyelids, that is common in both children and adults.[1] Chalazia has been reported to have increased incidences worldwide including Saudi Arabia[2-4]. Studies have reported that, upper eyelid lesions were more common[5]. Conservative treatment like washing and warm compression along with topical antibiotics are the typical initial treatment approach to a chalazion [6], while in stubborn cases minor surgical procedure of incision and curettage surgery are deemed necessary [7,8]. Chalazion surgery is a minor surgical procedure with minimal post operative complications and is performed under local anesthesia[9]. Post operative bleeding are uncommon side effects of the procedure and if reported are handles by pressure application to the site.[10,11]

The present case involves the management of a 45 year old hypertensive male patient presenting with bleeding after chalazion

surgery.

Case Report

A 45-year-old male presented to the Ophthalmology department, in 16th September, 2022 with a lump on the upper eyelid of the left eye. The lesion was diagnosed as Chalazion, and the patient was recommended to clean the eyelids thoroughly and apply frequently hot compress to the lesion area. On follow up, after 2 weeks, he still suffered from the inflamed lump and was posted for a planned chalazion excision surgery under local anaesthesia.

The medical history of patient revealed primary hypertension and unremarkable observations on ocular examinations. He had a normal coagulation profile and platelet count in his haematological investigations prior the procedure. The patient underwent a planned chalazion excision surgery under local anaesthesia. The surgery was uneventful, and the cyst was successfully removed. The patient however presented soon after the procedure with sudden onset of profuse bleeding from the surgical site.

Management

All the vital signs on patient were normal and on removal of the gauze dressing and inspection, blood was found oozing from the site of incision. A tight pressure patch was applied, and the patient was kept under observation. After reinspecting the site after 30 minutes bleeding was found to be persisting. It was decided to perform cauterization of the site of incision due to the continuous bleeding. The patient was monitored on systemic intravenous antibiotics in addition to his regular antihypertensive medication. There was no further bleeding was reported, and the eye pressure was patched. Follow up six weeks post cauterisation was unremarkable with patient having no lumps in the eyelid or bleeding from the incision site. Figure 1 shows the left upper eyelid chalazion incision six weeks post management of the persistent bleeding by cauterisation.



Fig.1. Upper left eye lid six weeks follow up with no lumps and bleeding.

Discussion

Postoperative haemorrhage from the chalazion excision surgery is a mild complication and usually occurs within 24 hours of

surgery and can lead to delay in the healing process. Different approaches have been accepted to control and stop the postoperative bleeding among which cauterization an effective and safe method to manage such complications[12,13]. It is a minimally invasive procedure that can be done in the minor operation clinic or outpatient department under local anaesthesia.

Conclusion

Systemic and local management of post operative bleeding of chalazion surgery is required for the optimal response. Bleeding after chalazion incision and curettage can be managed by cauterization which is a simple and effective Being a safe and minimally invasive procedure it can be done in minor operation rooms, reducing the need for general anaesthesia and hospitalization .

Ethics statement

The patient gave oral and written consent to publish the data. The report does not include personal information that could identify the patient directly or indirectly. All medical interventions have been carried out according to the latest protocols of therapy. Reporting and writing are all in compliance with the Declaration of Helsinki.

Conflict of interest.

The author have no conflicts of interest to declare.

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