

Pathway	Treatment of chalazion by incision and curettage or triamcinolone injection.
Exclusions	An eyelid swelling with clinical features that raise a suspicion of malignancy.
Commissioned	<p>Removal will only be funded for one of the following indications, when the Chalazion:</p> <ol style="list-style-type: none"> 1. Has been present for more than 6 months and despite <i>conservative management</i> for 4 weeks. 2. By virtue of its size and position interferes with vision. 3. Interferes with the protection of the eye by the eyelid due to altered lid closure or lid anatomy. 4. Has required topical antibiotic treatment twice or more within the last 6 months. 5. Has resulted in cellulitis of the eyelid requiring oral antibiotics. 6. Led to the development of an abscess which required drainage.
Notes	<ul style="list-style-type: none"> ▪ Conservative management involves warm compresses, lid cleaning and massage as described in the patient leaflet https://patient.info/health/swollen-eyelid/chalazion ▪ Photographic evidence is required in cases where the chalazion interferes with vision.
Rationale	<ul style="list-style-type: none"> ▪ Evidence-Based Interventions: Response to the public consultation and next steps. Published by NHS England in partnership with NHS Clinical Commissioners, the Academy of Medical Royal Colleges, NHS Improvement and the National Institute for Health and Care Excellence November 2018. ▪ A chalazion (meibomian cyst) is a benign lesion on the eyelids caused by blockage and swelling of a lubricating gland. Many but not all resolve within six months with regular application of warm compresses and massage. ▪ NICE recommend that warm compresses and lid massage alone are sufficient first line treatment. If infection is suspected a topical antibiotic should be added in addition to warm compresses. Only if there is local cellulitis should oral antibiotics be used. ▪ Most resolve within six months and will not cause any harm however there are a small number which are persistent, very large, or can cause other problems such as distortion of vision. In these cases, surgery can remove the contents from a chalazion. ▪ Following surgery, most people will experience some discomfort, swelling and bruising of the eyelids. Surgery also carries a small risk of infection, bleeding and scarring, and there is a remote but serious risk to the eye and vision from any procedure on the eyelids. ▪ The alternative option of steroid injection (triamcinolone) into the chalazion carries a small risk of serious complications such as raised eye pressure, eye perforation or bleeding.
Cohort	Children and Adults.
Equality	

Compliant with the Equality Act 2010.	
Status	
RED as defined in the Prior Approval Scheme Policy.	
OPCS codes	
Curettage of lesion of eyelid	C12.4
Version History	
New policy.	
Authorised	
April 2019	
Review	
April 2024 Earlier if new evidence published by NICE or other authoritative body.	