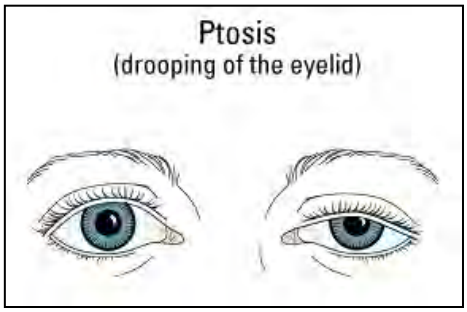
Royal Berkshire
NHS Foundation Trust

Acquired ptosis

This leaflet is for patients with acquired ptosis and explains the treatment, including risks and benefits.

What is acquired ptosis?



Ptosis is the medical term for drooping of the upper eyelid, a condition that may affect one or both eyes. Ptosis that presents itself after childhood, and usually later in life, is called an acquired ptosis. When the edge of the eyelid drops and covers part of the pupil, it blocks the upper part of your vision. In severe cases, the patient may have to tilt their head back or lift the eyelid with a finger in order to see out from under the drooping lid.

What causes acquired ptosis?

In most cases, an acquired drooping of the upper eyelid results from the ageing of previously normal muscles and nerves. Typically, the tendon that attaches the 'lifting' muscle to the eyelid stretches and the eyelid droops low. Occasionally, the condition results from other general conditions, such as Myasthenia Gravis

What is the treatment and how is it done?

The treatment involves an operation, usually carried out under local anaesthetic as a day case. Local anaesthetic eye drops are used, along with an injection into the upper eyelid to numb the area. We now often use dissolving stitches at the site of the operation.

What to expect after the operation?

A dressing may be applied for 24 hours. The upper eyelid will usually appear swollen but this tends to subside over 7-10 days. Make sure you keep the wound clean and dry. There should be very little discharge from the wound and if necessary, you may clean it using cooled, boiled water and a clean cosmetic pad or tissue. Use a separate pad or tissue for each wipe to the area.

You will be prescribed some antibiotic eye drops and cream – please use as directed.

Are there any risks or side effects of surgery?

- There may be bruising and swelling around the eye.
- There is a small risk of infection of the eyelid or the eye.
- There is a possibility of under or over correction of the eyelid or asymmetry with the eyelid opposite, which may require further operations.
- There is a possibility of inability to close the eyelids permanently.
- Sometimes, if your other eye has a tendency to droop, it may be more noticeable after this operation. Your eye specialist may warn you of this possibility, where applicable.

What are the benefits of surgery?

- Restoring normal appearance of the eyelid.
- Improved upper part of your vision and improved quality of vision where the pupil was previously blocked by the droopy upper eyelid.

Contacting us

If you have a minor eye problem, please seek advice from your GP, optician or pharmacist. If urgent, please attend Eye Casualty or call 111.

Eye Casualty (Reading):	Mon-Fri 8am to 5pm; Sat & Sun & bank holidays 9am-12.30pm; Closed Christmas Day and New Year's Day.
Eye Casualty: Prince Charles Eye Unit (Windsor):	Mon-Fri 8am to 5pm; Sat 8.30am-12.30pm; Closed Sun & bank holidays.
Greenlands Ward (Reading):	0118 322 7172 (24 hours a day)
Eye Day Unit (Reading):	0118 322 7123 (Mon-Fri 7am to 6pm)

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Ophthalmology, October 2026
Next review due: October 2028