Chalazion

**WHAT IS A CHALAZION?**

A chalazion is a localized bump in the eyelid of varying size. [See Figure 1]. More than one chalazion can occur in an eyelid at the same time. The plural of chalazion is chalazia. Both eyes can be involved, and both upper and lower eyelids may be affected as well.

![Fig. 1: A chalazion is a bump in the eyelid.](image)

**WHAT CAUSES A CHALAZION?**

Small glands lining the edge of the eyelids produce oil that helps to lubricate the surface of the eye (meibomian glands). When one of these glands becomes blocked, oil backs up inside the gland and forms a bump in the eyelid. Break down of the oily secretions causes inflammatory cells to rush to the area. This irritates the surrounding eyelid skin causing it to become red and swollen and sometimes painful.

**IS A CHALAZION THE SAME THING AS A STYE?**

A chalazion is not exactly the same thing as a stye, although the terms are often used interchangeably. A stye, medically referred to as a **hordeolum**, is a bump in the eyelid that occurs when an oil gland becomes infected. It is like a small abscess or “boil” on the edge of the eyelid. A chalazion is an accumulation of material in the eyelid as a result of a blocked oil gland. Another condition called idiopathic facial aseptic granuloma (IFAG) may also mimic a chalazion, but may have a similar bump on the cheek or other part of the face, and resolves more quickly than a chalazion. In addition, IFAG usually responds to oral antibiotics.
WHY DO CHALAZIA OCCUR?

Usually there is no known underlying cause. However, chronic inflammation of the eyelid near the oil gland openings (blepharitis), predisposes to the development of a chalazion. Persistent blepharitis may result in recurrent chalazia. Blepharitis may be aggravated by poor eyelid hygiene that includes eye rubbing in children. Certain skin types, such as rosacea may be more prone to chalazia and blepharitis. Hormonal influences may make oil secretions more thick which may explain an increase in chalazion around adolescence. In rare cases, deficiencies in the immune system with high IgE can result in skin abscess including chalazion.

WHAT ARE THE TREATMENT OPTIONS FOR CHALAZIA?

Most chalazia resolve by themselves within several days to weeks, but sometimes they persist for months. Warm compresses over the affected area can promote drainage of the blocked gland. Since they are not caused by an infection, antibiotic drops are not usually helpful. Anti-inflammatory eye drops, ointments or an injection of steroid into the bump may be helpful. Steroid injections though, may cause lightening of the surrounding skin which can be permanent. Oral antibiotics may be indicated if the chalazion is associated with bacterial infection of the surrounding eyelid tissues (cellulitis).

A large, swollen, or persistent chalazion might require surgical drainage. Although older children and adults can undergo the procedure in a doctor’s office under local anesthesia, general anesthesia is usually necessary to drain chalazia in young children. Large, chronic chalazion could press on the surface of the eye (cornea), causing astigmatism and decreased vision. In young children, this possible complication needs to be monitored and treated if necessary.

HOW CAN CHALAZIA BE PREVENTED?

A consistent daily regimen of eyelid scrubs using baby shampoo or pre-moistened eyelid cleansing wipes can reduce the chances of developing new chalazia. This is especially useful when blepharitis is present. Use of supplemental oral omega-3 and/or flaxseed oil may reduce inflammation of the eyelids as well. For those with a recurrent problem, regular use of topical or oral antibiotics for its anti-inflammatory effect is sometimes prescribed.

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