

Evidence Update

Other Infectious Diseases Series

What is the best way to treat trachoma trichiasis?

Some forms of surgery can help prevent eyelashes touching the eye globe.
For temporary care, taping the eyelid back with double-sided sticking plaster is more effective than removing the eyelashes.

Inclusion criteria

Studies:

Randomized controlled trials.

Participants:

People with trachoma trichiasis.

Intervention:

Any intervention designed to prevent prolonged contact between the eye and eyelashes, compared with another intervention or no intervention.

Outcomes:

Primary: recurrence of trichiasis.

Adverse events: any adverse events.

Results

- Seven trials were included. Four had adequate allocation concealment.
- Surgery where the tarsal plate is cut, and the margin of the eyelid is rotated through 180 degrees was better than other procedures at preventing recurrence of trachoma at 5 to 11 months.
- For temporary, non-surgical treatment, taping the eyelids back, compared with removal of the eyelashes, was better at preventing recurrence of trichiasis at 3 months (odds ratio 0.01, 95% confidence interval 0.001 to 0.22; 1 trial, 68 eyes).
- For minor trichiasis, one trial showed that surgery (bilamellar tarsal rotation) was more effective than destruction of the eyelashes (recurrence of trichiasis at 9 to 21 months: odds ratio 0.08, 95% confidence interval 0.03 to 0.20; 1 trial, 172 eyes).
- One trial comparing post-operative azithromycin with no post-operative antibiotics showed no difference in trichiasis recurrence rates 12 months after surgery (1 trial, 451 participants).
- One trial showed no difference in outcomes between trichiasis surgery in the patient's own village compared to surgery in a health centre; but attendance at the health centre was more costly and time consuming.

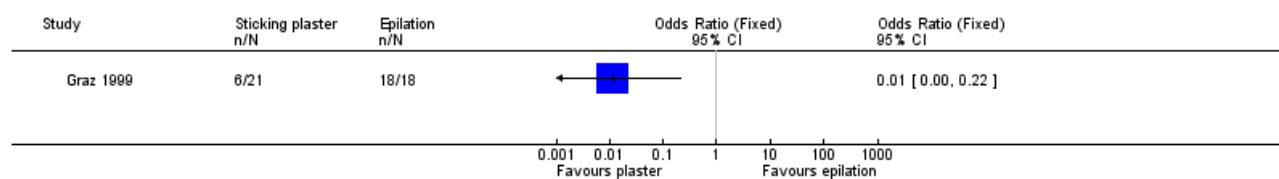


DFID Department for International Development

Adapted from Yorston D, Mabey D, Hatt S, Burton M. Interventions for trachoma trichiasis. *Cochrane Database of Systematic Reviews* 2006, Issue 3. Art. No.: CD004008. DOI: 10.1002/14651858.CD004008.pub2. *Evidence Update* published in July 2007.

Produced by: the Effective Health Care Alliance Programme (www.liv.ac.uk/evidence), Liverpool School of Tropical Medicine, supported by the Department for International Development UK; and the Australasian Cochrane Centre. *Evidence Update* can be distributed free of charge.

Taping eyelids back versus removal of the eyelashes: one or more lashes touching the globe at 3 months



Authors' conclusions

Implications for practice:

The surgical procedures with the lowest risk of recurrence of trichiasis involve incising the full thickness of the tarsal plate, rotating the lid margin through 180 degrees and suturing it in its new position. As a temporary measure, taping the eyelashes back with sticking plaster is more effective than removing the eyelashes.

Implications for research:

The risk of recurrence of trichiasis remains high regardless of the procedure used. Research is therefore needed to better understand why this happens and how it can be prevented. Further research is also needed to explore how take-up rates for eyelid surgery can be improved.