

Successful Surgical Management of Prolapse of Third Eyelids (Cherry Eye) in Crossbred Dog: A Case Report

Abstract

A two-year-old crossbred dog was diagnosed with cherry eye after presenting with a reddish mass of tissue protruding from the medial canthus of the left eye. Surgical correction was performed, and the combined surgical approaches and postoperative management were clearly described. Physiological parameters were normal.

Keywords: Third eyelid , Prolapse, Cherry eye

Introduction

In dogs more often than in cats, prolapse of the third eyelid is a prevalent eye problem. Other names for it include Glandular hyperplasia, Nictitating gland adenoma, and hypertrophy. Cherry eye usually affects puppies under the age of two to three years, and several breeds, such as the Pekingese, Neapolitan Mastiff, Cocker Spaniel, Beagle, Bulldog, and Basset Hound, are more prone to the condition. Cherry eye is more common in male dogs than female dogs, and unilateral cases are more frequent than bilateral ones. Inflammation and a weakening supporting ligament cause the third eyelid gland to expand, which makes it protrude and become everted. Cherry eye is an unclear specific aetiology, but it is assumed to have a genetic susceptibility and may be connected to inflammation. The gland's inflammation and hypertrophy, which prevent it from moving back to its original location, are what cause the pink, fleshy lump to appear close to the inner corner of the eye. In order to protect the eye and distribute the tear film, the third eyelid is crucial.

Material and Methods

Case History

A two-year-old mixed-breed dog was brought to the vet clinic with a complaint of a reddish growth on the left eye's medial canthus. About 25 days before, the mass had first surfaced, and it had grown ever since. The dog also had ocular secretions from the afflicted eye and conjunctivitis. The dog had all the required vaccines, and its diet mostly comprised of canned, packaged, and milk foods. Haematological and serum biochemical values, as well as other physiological indicators, were all normal for the dog. It was determined that the ailment was "Cherry Eye."



Figure 1: - The Prolapsed third eyelid before surgery.

Surgical Procedure

Preoperatively

The dog received eye drops containing Gentamicin and Ciprofloxacin prior to surgery, which were administered four times daily for three days. The dog was placed on its side with the injured eye facing upward during the procedure and was given general anaesthesia. The animal received atropine sulphate, diazepam, and pentazocine before the procedure. The third eyelid gland prolapsed mass was entirely removed by the surgeon using artery forceps and thumb forceps. The procedure was carried out ventrally to the prolapsed gland using interrupted horizontal sutures, and the anterior side was knotted. The gland was cut out after ligation, just above the suture line. The dog received 5% DNS (500 ml) constantly during the procedure.

Post Operative Management

Following surgery, the dog was given instructions to administer Ciprofloxacin and Gentamicin eye drops four times daily for seven days. A prescription for flurbiprofen eye drops was also issued, to be applied topically three times a day for four days. As a post-operative care strategy, an Elizabethan collar was recommended for three weeks to stop the dog from scratching or touching its eye with its paws.



Figure 2:- Left eye after surgery.