

CHALAZIA TREATMENT

PRIOR APPROVAL REQUIRED

This procedure is not normally funded in secondary care.

Referral should be made to a General Practitioner with Extended Role (GPwER) where a service is available.

GPwERS may subsequently refer onto secondary care, without the need for Prior Approval should it be considered appropriate to do so.

When referring from primary care for chalazion, please add a photograph of the chalazion with the referral. BSW ICB will accept patients own photographs and will **NOT** reimburse the costs of medical photography.

Chalazia (meibomian cysts) are benign lesions that will normally resolve within six months with conservative management (see below).

Subject to the criteria stated below, BSW ICB will fund incision and curettage (or triamcinolone injection for suitable candidates) of chalazia where:

- The chalazion has been present for more than six months
- The chalazion has been managed conservatively for four weeks*

AND

The chalazion is a source of infection that has required medical attention twice or more within a six-month time frame

OR

• The chalazion prevents closure of the eyelid.

Please note:

- *In children under the age of eight, if the chalazion has been present for six months
 (regardless of whether conservative treatment has been performed) BSW ICB will fund
 treatment should an Ophthalmologist decide that it is necessary (in view of the risk of
 induced amblyopia). The six-month timeline should include the time needed for referral
 to be received by secondary care.
- If cancer is suspected the lesion should be removed and sent for histology as for all suspicious lesions.
- Recurrence of a chalazion in the same place is a possible sign of malignancy.

CONSERVATIVE MANAGEMENT:

Conservative management of chalazia involves the application of a warm compress (for example using a clean flannel that has been rinsed with hot water) to the affected eye for 10-15 minutes, after which the cyst should be gently massaged (to aid expression of its contents) in the direction of the eyelashes using clean fingers or cotton buds. This should be repeated up to five times a day for several weeks.

Antibiotic treatment is not recommended for a chalazion.

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