

INCISION AND CURETTAGE VERSUS STEROID INJECTION FOR THE TREATMENT OF CHALAZIA: A META-ANALYSIS

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Objective To compare the efficacy of the chalazia treatment modalities of incision and curettage (I&C) and intralesional steroid injections (SI).

Clinical relevance Chalazia are the most common eyelid lesions seen in ophthalmological practice. They are often cosmetically disfiguring but may also cause ptosis and visual disturbances. Despite studies comparing chalazion treatment by either I&C or SI, controversy remains. This uncertainty prompted us to attempt to determine the best approach to chalazion treatment for our patients. **Methods** Full publications of randomized controlled trials that compared I&C to SI were identified. Aggregated success rate, weighted summary proportions and weighted pooled relative risk (RR) for success was calculated for each method. **Results** Data was extracted from eight publications that met our criteria, between 1984 and 2013. There were 288 patients treated by SI with aggregate success rate of 60.4% with one injection and 72.5% with one or two injections. There were 264 patients treated by I&C with aggregate success rate of 78.0% with one procedure and 86.7% with one or two procedures ($p < 0.05$ for both comparisons). Compared to I&C, the overall RR for SI with one procedure was 0.77 ($p = 0.05$) while the overall RR for one or two procedures was 0.89 ($p = 0.002$). **Authors' conclusions** Our analysis shows that I&C is more effective than SI with one procedure. This benefit is reduced when comparing one or two attempts of I&C and SI. Studies failed to show difference in the incidence of complications with either procedure.