

Forehead, Eyebrows, and Eye: Preferred Terms

Blepharochalasis – should be differentiated from Dermatochalasis. It is an uncommon condition characterized by episodic edema and erythema of the eyelids.

Blepharochalasis is more common in young women and may result in premature relaxation and laxity of the eyelid skin with wrinkling and hooding [2].

Blepharoptosis –the ptosis of the upper lid over the eyeball. The grade of blepharoptosis is evaluated measuring the palpebral aperture in the primary, upward and downward position of gaze.

Connell's Sign – the lateral extension over the eyelid and onto the lateral periorbital region of the upper lid crease. Connell's Sign is considered to be a hallmark of forehead ptosis [7].

Crow's Feet and Eyelid Wrinkles –fine wrinkles or lines developing on the lower lid and the lateral aspect of the orbital region perpendicular to the fibers of the underlying orbicularis oculi muscle (see Mimetic lines on chapter 10).

Dermatochalasis – the excess of eyelid (redundant) skin that is usually more prevalent in the upper eyelids. It is a frequent condition in middle-aged subjects and a common one in the elderly.

Ectropion – the eversion of the eyelid margin away from the globe. It is more common in lower eyelid.

Enophthalmos – the abnormal recession of the eyeball into the orbit.

Entropion – the inward rotation of the eyelid in such a way that the eyelid margin, eyelashes, and skin of the eyelid rub against the globe resulting in irritative symptoms and possibly abrasion and scarring of the cornea.

Epiphora – the overflow of tears due to impeded outflow or excessive secretion.

Exophthalmos – the abnormal prominence or protrusion of the eyeball.

Eyebrow Ptosis – the inferior migration of the eyebrow below its natural position over or above the superior orbital rim.

Eyelid Bags (Baggy Eyelid) – the visible bags of the lower eyelid caused by the processes of pseudoherniation of orbital fat and attenuation and lengthening of the orbital septum, orbicularis oculi muscle, skin, and lower canthus (see also festoons).

Eyelid Laxity – (see Lid Tone).

Eyelid rims (upper and lower) – the free margins of the eyelids.

Festoons (or Cheek Bags, Malar Bags) – the ptosis of the sub-orbicularis oculi fat (SOOF). Malar bags can be differentiated from eyelid bags because they occur below the inferior orbital rim.

Forehead Transverse Furrows – the long horizontal mimetic furrows developing on the forehead perpendicular to the fibers of the underlying frontalis muscle.

Glabellar creases (Frown Lines, Vertical Glabellar Lines) – the mainly vertical oriented mimetic skin lines developing on the glabella perpendicular to the fibers of the underlying corrugator muscle (see Mimetic lines on chapter 10).

Herniated Orbital Fat (Pseudoherniated Orbital Fat) – the anterior displacement of the fat located under the orbital septum. It should be examined with the patient in the upright sitting or standing position. The orbital fat pads are classically divided into two upper compartments (medial and central) and three lower compartments (medial, central, and lateral). Usually is due to the attenuation of the orbital septum.

Horizontal Palpebral Aperture – the distance between the lateral and medial canthus. The average length is 30 to 40 mm [1].

Hypertrophic Orbicularis Oculi Muscle – a horizontal band or ridge of the pretarsal portion of the lower lid orbicularis oculi muscle that is accentuated by smiling.

Inferior Scleral Show – see scleral show.

Intercanthal axis – the imaginary line connecting the medial and lateral canthus.

Lacrimal Glands – a small gland that normally occupies the lacrimal fossa of the frontal bone inside the upper temporal angle of the orbit (see also prolapsed lacrimal gland).

Lagophthalmos - incomplete eyelid closure.

Lateral Canthus – the lateral angle formed by the junction of the two free margins of the eyelids.

Lid Tone – the ability of the lids to maintain spontaneously and recover (recapture) quickly its normal position against the globe when pulled away. The presence of horizontal lid laxity can be assessed performing the snap test and the lid distraction test. The lid should not be pulled more than 7 mm away from the globe (distraction test) and should snap back into its normal position immediately (snap test).

Limbus (Iris Limbus) – the circular margin of the iris with white sclera.

Lower Palpebral Fissure Width - the distance from the central point of the cornea to the central lower eyelid margin with the patient's eye in straight gaze. It is normally about 5.5 mm and increases with lower lid retraction [8].

Malar Hypoplasia – the condition of skeletal flatness of the malar region that is normally prominent.

Margin Crease Distance (MCD) - the distance from the central upper eyelid margin to the tarsal crease measured with the eyelid fold elevated by the examiner and as the patient looks down. The normal range reported by Putterman is 9-11 mm [8], whereas for Wolfort, Baker and Kanter is 8-10 mm [10]. An elevated upper lid crease may be a sign of disinsertion of the levator aponeurosis.

Medial Canthus – the medial angle formed by the junction of the two free margins of the eyelids.

Palpebral Fissure Width (Vertical Palpebral Aperture) - the distance from the central lower eyelid to the central upper eyelid margins with the patient's eye in straight gaze. Normally it is about 10 millimeters [8]. A smaller measurement usually indicates ptosis of the upper lid whereas a bigger one could be a sign of eyelids retraction. It can be divided into the Upper and the Lower Palpebral Fissure Width.

Prolapsed Lacrimal Gland – a prolapsed lacrimal gland can produce an excessive fullness of the upper eyelid in the temporal third (there is no orbital fat in the upper temporal angle of the orbit).

Scleral Show (Inferior Scleral Show) – is the presence of a strip of white sclera between the iris and the lower lid margin with the subject in Natural Head Position and straight gaze. It may be a sign of exophthalmos, previous trauma, prior surgery, lower lid laxity or dentofacial deformities with maxillary hypoplasia.

Tarsal Crease of the Upper Lid (Upper Lid Crease) – is the horizontal sulcus of the upper lid that normally divides it into an inferior tarsal portion and a superior septal portion. It is frequently hidden in adult and aged subjects by skin redundancy.

Trichion – the hairline midline point.

Trichiasis – the condition in which eyelashes are in contact with the eye globe.

Upper Palpebral Fissure Width - the distance from the central point of the cornea to the central upper eyelid margin with the patient's eye in straight gaze. Its normal range is 4-4.5 millimeters [8]. A lower value usually indicates ptosis of the upper lid whereas a larger one could be a sign of upper lid retraction. If a ptotic eyelid covers the central point of the cornea, the number of millimeters that the eyelid must be raised is recorded as a negative number.

Vertical Palpebral Aperture – see Palpebral Fissure Width.