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A stye is a common but painful eyelid infection. It usually looks like a small yellow pus-filled spot on the edge of the eyelid. Most styes get better on their own and do not need medical treatment. Hot compresses can ease the pain and encourage the stye to burst.

What is an eye stye?

The medical name for a stye is **hordeolum** (or hordeola if there are more than one). Styes are a very common type of infection of the eyelid. They usually develop quite quickly, over a few days. Usually only one eye is affected, although you can develop more than one stye at a time, even on the same lid. There are two types of stye: external styes (the common type) and internal styes (which are quite uncommon).

External stye (external hordeolum)

This is the common type of stye. Technically it is an external stye; however, it is often just called a stye. It appears along the edge of the eyelid, due to infection in the root (follicle) of an eyelash. It may start off as a small red lump but, as it develops into a collection of pus (a little abscess), it looks like a yellow pus-filled spot. The edge of the eyelid around it becomes reddened and swollen, and the lid is painful.

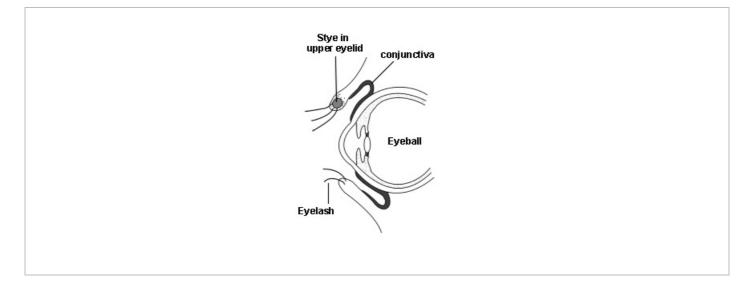


Internal stye (internal hordeolum)

An internal stye arises when a type of gland in the main part of the eyelid (meibomian gland) becomes infected. The infection comes to a head on the inner surface of the eyelid, against the eyeball, so that from the outside it is visible only as a swelling. Internal styes may be painful, although often they cause a dull aching in the eyelid, sometimes with the sensation of a lump.



What causes a stye?



Most styes usually occur for no obvious reason, although if your eyelids are itchy or rubbed a lot this may make an external stye more likely. The usual germ (bacterium) that causes the infection is called *Staphylococcus aureus*. It is a common germ that is often found on healthy skin. It usually does no harm. However, it can occasionally get into the skin, where it causes infections such as spots, abscesses, and styes.

Some people have an eyelid condition called blepharitis. This is an inflammation of the eyelids in which they can become swollen, dry and itchy. Blepharitis can make you more prone to developing styes. See separate leaflet called Blepharitis for more information.

How to treat a stye

- Styes often need no treatment. The 'head' usually bursts within 3-4 days.
- · Hot compresses may help to ease soreness and draw the pus to a head.
- You should avoid contact lenses and eye make-up until it resolves.
- Taking antibiotics (ointments or medicines) is not recommended.

It is sensible to discard mascara and eyeliners that you used along the edge of your eyelid as the stye was forming. Options to speed up resolution of the stye are:

No treatment

Often, no treatment is necessary. Once a 'head' has formed on a stye, most burst within 3-4 days, with the tiny amount of pus draining away and leaving no further problem.

Hot compresses

These may help to ease soreness and draw the pus to a head. You can do this yourself: Hold a clean flannel, which has been dipped in hot water and squeezed dry, gently but firmly against the closed eye. Do this for 5-10 minutes, 3-4 times a day. (The water should be hot; it should be comfortable and not scalding.) Eventually the stye will 'pop' and drain - but do not be tempted to try to pop it yourself. You may make things worse by injuring the delicate eyelid, or by spreading infection deeper into the tissues.

Epilation of the eyelash

This is a treatment for an external stye. It means that the eyelash is plucked out. Epilation is briefly uncomfortable but it can help the infection from the hair follicle to drain.

Incision and drainage of an external stye

A health professional can perform this procedure, which is a treatment for an external stye. It is like lancing a boil. A sterile needle (or perhaps a scalpel) can be used to open the stye and drain the pus. You should not attempt this yourself, as you might spread the infection to the eyelid, with serious consequences.

Drainage of an internal stye

This procedure involves using an injection of local anaesthetic to numb your eyelid, which must be flipped 'inside out' in order to expose the stye before it can be scraped out. Very occasionally this procedure is done under general anaesthetic, as it is uncomfortable and children, in particular, do not tolerate it. After this procedure, antibiotic eye drops are usually given.

Are styes contagious?

To reduce the chance of the infection spreading:

- Don't share facecloths/flannels or towels with anyone whilst you have a stye.
- Always wash your hands after touching the affected eyelid.

• Avoid eye make-up or contact lenses until the infection has settled.

Are there any complications?

Most styes are very minor infections that clear without any treatment and cause no problems. Styes do not affect your vision.

Sometimes the stye doesn't go away, and can turn into a cyst called a chalazion. If this happens it doesn't look particularly red and it doesn't hurt. However, you will have a lump on your eyelid.

Very occasionally the infection can spread. It may spread to the surface of the eye, causing conjunctivitis, which may need antibiotic ointment or drops to clear the infection. Alternatively the infection can spread around the eyelid, causing it to become more red and swollen. If this happens you should see your GP as you may need antibiotic tablets.

An extremely rare complication is the infection spreading to involve the whole eyelid and tissues surrounding and behind the eye. The eyelid may be very swollen and red, it may hurt or be impossible to open the eye and you may have a lot of pain and a high temperature (fever). Sometimes the eyeball is pushed forwards so that it bulges, and you may be very sensitive to the light. If you develop this type of complication, which is called orbital cellulitis, you need to see a medical professional urgently. Treatment of orbital cellulitis is with antibiotics, usually given into a vein (intravenously) via a drip, in hospital.

Further reading & references

• Styes (hordeola); NICE CKS, August 2015 (UK access only)

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Author: Dr Mary Lowth	Peer Reviewer: Dr Colin Tidy	
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