

Patient information

Endoresection

St Paul's Eye Department

Your Consultant / Doctor has advised you to have Endoresection.

What is Endoresection?

Endoresection means that the tumour is cut away from inside your eye using a specialised microsurgical technique.

What are the benefits of having Endoresection?

Endoresection is performed when it is important to save your vision and when other methods, such as radiotherapy, are unlikely to achieve this aim.

What are the risks of having Endoresection?

The main risk of endoresection is incomplete tumour removal, which is why you will be examined regularly afterwards.

The second main risk is retinal detachment, which may require surgical repair.

A cataract usually develops because of the use of silicone oil at the end of your operation but is easily treated.

Are there any alternative treatments available?

There may be other treatments available and the doctor will have discussed these with you.

If you feel that you need any further information please feel free to ask your doctor or specialist ocular oncology nurse (your key worker).

What will happen if I don't have any treatment?

Your tumour may continue to grow. This might make treatment more difficult and could make the eye painful. There may be an increased risk of tumour spread out of the eye and to other parts of the body.

What sort of anaesthetic will be given to me?

You will be given a general anaesthetic. General anaesthetic is drug induced unconsciousness. It is always provided by an anaesthetist, who is a doctor with specialist training.

Unfortunately, both local and general anaesthetic can cause side effects and complications. Side effects are common, but are usually short-lived: they include nausea, confusion and pain.

Complications are very rare, but can cause lasting injury: they include awareness, paralysis and death.

The risks of anaesthetic and surgery are lower for those who are undergoing minor surgery, and who are young, fit, active and well. For more information, please ask for a copy of the Royal College of Anaesthetists Patient Information "You and Your Anaesthetic".

You will be given an opportunity to discuss anaesthetic options and risks before your surgery.

If you are worried about any of these risks, please speak to your Consultant or a member of their team before you are due to have this treatment.

Getting ready for your operation

You will be admitted to the day ward either the day after your clinic appointment or, if this is not possible, a couple of weeks later. You will have some blood tests and an ECG (heart tracing).

These tests are very important for you. It is better to find out about any problems as soon as possible to help prevent operations being postponed for medical reasons.

If there are any complications, our doctors will refer you to the appropriate hospital specialist or to your own family doctor (GP). You will be told if this is the case.

Interview / teaching session

You will be encouraged to ask questions and talk about your condition and operation. A qualified ophthalmic nurse will explain your care in detail using a specially designed care programme.

The day of your operation

- You will be admitted via the Theatre Assessment Unit (TAU) on the day of your operation.
- Please leave all cash and valuables at home. If you need to bring valuables into hospital, these can be sent to General Office for safekeeping. General Office is open between 8.30 and 4.30 Monday to Friday. Therefore, if you are discharged outside these times we will not be able to return your property until General Office is open. The Trust does not accept responsibility for items not handed in for safekeeping.
- You will be asked to remove jewellery. Band rings can be worn but they will be taped.
- If you are on regular medication, you will be told to take this if necessary.
- You will be asked to take a shower and put on a gown and disposable underwear.
- A bracelet with your personal details will be attached to your wrist.
- You will be asked to sign a consent form.

- You may be prescribed some medication to take before your operation by the anaesthetist. A member of the nursing staff will give this to you.
- Your dentures, glasses or hearing aid can stay with you on your journey to the operating theatre.
- When you arrive in the waiting area, a theatre nurse will check your details with you. You will then be asked to put on a disposable hat.
- The ward nurse will leave you and you will then be taken to the anaesthetic room.

The operation

Three tiny incisions (cuts) are made near the front of your eye, and through these openings the tumour is removed. A special light pipe and microsurgical cutting instrument are inserted through the tiny incisions and directed to the tumour inside the back of your eye. The tumour is then 'hoovered' away.

Because it is necessary to cut through the retina to get to the tumour, silicone oil is inserted into your eye at the end of the operation to keep the retina in place at the back of your eye. This oil usually stays in for about 12 weeks, when a short operation is performed to remove it. The oil is usually removed under local anaesthetic. Some laser treatment will also be carried out during your operation. This helps seal the retina back in place and also destroys any hidden tumour cells which might be present.

It is possible that, at a later stage in your care, you might be asked to attend as an outpatient for further laser treatment.

Very occasionally, a special gas is injected into your eye to apply pressure to the retina and keep it in place. If this is the case then you might be asked to sit with your head in a certain position to direct the pressure to the correct area of your eye. It is not advisable to travel by air whilst this gas is in your eye. The gas dissolves over a few weeks, and does not need to be removed.

What should I expect after my operation?

- A nurse will check your pulse, blood pressure, breathing rate and wound regularly.
- The nursing staff will also advise you when you can start taking sips of water. Anaesthetics can make some people sick. If you feel sick we advise you not to drink until this feeling has passed.
- The nursing staff may offer you an injection to help this sick feeling go away.
- You will have a pad and shield over your operated eye.

Going Home

Usually you are discharged two days after your operation.

Pain relief and medication

- The nursing staff will advise you about painkillers before you leave the hospital.
- Continue any oral medication prescribed by the doctors.
- A member of the nursing staff will show you how to apply antibiotic and anti-inflammatory eye drops. If necessary, a District Nurse will be asked to help you with this once you get home.
- Please wash your hands both before and after applying eye drops.
- Apply your drops at the correct times.

Your eye

For two to three weeks after the operation please:

1. Avoid rubbing or pressing on your eye.
2. Avoid heavy lifting (i.e. heavy shopping bags), strenuous exercise or heavy gardening
3. Avoid getting soap or shampoo in your eye whilst washing.
4. Continue to posture as your doctor has told you.
5. Avoid eye makeup for at least two or three weeks after your operation.

**If you notice any severe pain, sudden loss of vision or excessive stickiness, please contact the Emergency Eye Department on Tel: 0151 706 3949
Text phone number: 18001 0151 706 3949 or your local hospital.**

Getting back to normal

- Ask your doctor when you can restart driving, swimming and other sports.
- You may feel low in mood at times after you have been discharged from hospital. Sister Gillian Hebbar is available to help you and can arrange for you to see a counsellor if required. She works closely with Professor Heimann. If you would find it helpful, you can arrange for her to contact you at home after discharge from hospital. This might be an opportunity for you to ask her any questions you may have.

Returning to work

You can self-certify for the first seven days of sickness. Before you are discharged, a medical certificate (fit note) may be issued by your hospital doctor to cover the expected time off you will need.

Further Appointments

Arrangements will be made for you to be reviewed at your own eye hospital within a week or two of discharge, where you should be advised on further treatment with drops.

It is usually between three and six months before you are reviewed here, depending upon whether your silicone oil is to be removed at your home hospital or here at the Royal Liverpool University Hospital. Your appointment will be sent to you through the post.

If you do not receive an appointment within this time, please telephone 0151 706 3973. Text phone number: 18001 0151 706 3973

You should be reviewed every six months for the first few years, and then once a year for the rest of your life.

At first these appointments will be alternated between here and your home hospital until eventually you will be discharged from the Royal Liverpool Hospital.

If at any time your consultant feels the need to send you back here for review, this can be easily arranged.

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further Information

Clinical Nurse Specialists

- **Gillian Hebbbar**
- **Gwendolyn Hachuela**
- **Shirley Varghese**

Tel: 0151 706 3976 (answer machine out of office hours)

Text phone number: 18001 0151 706 3976

Email:

gillian.hebbbar@rlbuht.nhs.uk

gwendolyn.hachuela@rlbuht.nhs.uk

shirley.varghese@rlbuht.nhs.uk

Theatre Assessment Unit

Tel: 0151 706 3947

Text phone number: 18001 0151 706 3947

Mrs Jenny Pendlebury

Service Administration Manager

Tel: 0151 706 3973

Text phone number: 18001 0151 706 3973

Accredited Websites:

<http://www.looc.uk.com/>

Royal College of Anaesthetists

www.rcoa.ac.uk/patients

www.rcoa.ac.uk/sites/default/files/documents/2022-06/02-YourAnaesthetic2020web.pdf

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All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

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