

Patient information

Ozurdex Implant for Retinal Vein Occlusion (RVO)

St Paul's Eye Department

Macular oedema is waterlogging and thickening of the central part of the retina known as the macula. This occurs in several diseases amongst which is retinal vein occlusion; central retinal vein occlusion (CRVO) or branch retinal vein occlusion (BRVO). Occlusion means a blockage of the blood vessel where by the blood cannot flow.

Macular oedema may be treated in several different ways. These include laser and intra-ocular injections.

Ozurdex is a specially formulated slow-release implant which is injected into the eye using a specially designed applicator. The drug contained in the Ozurdex implant is Dexamethasone which is a steroid. Ozurdex is a solid implant which slowly releases the steroid so that one injection will last for several months.

Please spend a few moments reading this leaflet and then ask any questions you wish. There may be alternative treatments or procedures available. Please ask your doctor or nurse to discuss these with you.

What is an Ozurdex implant?

A thin solid rod-shaped implant which is injected into the back of the eye using a special applicator.

The applicator is approximately the size of a pen and has a sharp needle which is passed through the white of the eye immediately behind the coloured part of your eye.

There is a small button which is depressed releasing the implant into the cavity of the back of the eye. The implant eventually dissolves completely.

How is the implant inserted?

Preparation

Anaesthetic drops are placed in the eye, followed by anti-septic drops to minimise the risk of infection. A drape is placed on your face to minimise the risk of infection and a springy wire device (speculum) inserted to hold your eye open.

Anaesthetic solution may be injected under the white skin of your eye, the conjunctiva, to minimise the discomfort. You will be asked to look either up or down. A measuring device is then used to ensure the injection is given at the correct place.

Insertion

The needle is passed through the skin of the eye (the conjunctiva) then through the wall of your eye (the sclera). Once the needle is inside the cavity of the back of your eye (the vitreous cavity) the button on the applicator is depressed and the implant is released.

Post-insertion of the implant

Antibiotic drops will be placed in your eye immediately after the insertion procedure then the doctor will ensure the injection hasn't caused occlusion of the blood supply to the eye by asking you if you can see a hand waved in front of the eye then by looking at the back of the eye using a headlamp.

After-care

You will be asked to use antibiotic drops four times per day for four days following the insertion and you will be reviewed as an outpatient several weeks later.

What are the benefits of an Ozurdex implant?

The steroid is slowly released from the implant and in most cases the steroid reduces the macular oedema which in turn leads either to either an improvement in vision or prevention of further deterioration in vision.

Will the Ozurdex implant need to be repeated and if so when?

Most patients will require more than one implant as in most patients the beneficial effects (reduced macular oedema and improved vision) are lost as the first implant wears off. However, with repeated implants the beneficial effects become more long-lasting.

It is impossible to know at the beginning of the course of treatment how many implants an individual patient will require or how long each implant will last before wearing off. The implant lasts four to five months in most cases. There is no limit on how many might be given to one patient.

What are the risks of Ozurdex intravitreal implant?

1. Pain during the implant.
2. Damage to the lens inside the eye. This is very unusual.
3. Bleeding either on the surface of the eye (sub-conjunctival haemorrhage), this is relatively common and will go away on its own – or into the vitreous cavity, i.e. the back of the eye. This is unusual and might obscure the vision initially for several weeks, it will go away on its own eventually.

4. Pain shortly following the implant (within three or four hours) which is due to corneal erosion, e.g. loss of the surface layer of the cornea – this will heal quickly but requires the eye to be padded shut with antibiotic ointment.
5. Raised intra-ocular pressure (which is the pressure inside of the eye), steroid, whether as tablets, eyedrops or injections in or around the eye can lead to a rise (or further rise) in intra-ocular pressure and occasionally development or worsening of glaucoma.

High pressure occurs in approximately 25% (one in four) of patients treated with Ozurdex and may require treatment with eyedrops and / or tablets and very occasionally with an operation (1% of cases). For this reason, Ozurdex should not be given to patients who already have advanced glaucoma.

6. Cataract. Steroid eyedrops / injections or tablets will often cause worsening or development of cataract. In studies cataract developed in 5% of cases and was more likely if more than one implant was required.
7. Post-operative infection inside the eye – known as “endophthalmitis”. This occurs in approximately one in every 1000 cases, but it is important as it might lead to loss of sight.
8. Retinal detachment. This is very unusual
9. Failure to improve vision or prevent further deterioration. Ozurdex implant is not effective in every case.

What will I feel during the injection?

The anaesthetic drops may sting, and the injection of anaesthetic may also sting. You may feel some pressure as the implant is inserted.

Can I see the implant?

Usually, the implant is given into the lower part of the eye and isn't seen by the patient.

What may I feel after the injection?

Usually within a day or so the eye is perfectly comfortable. If the eye is painful within the first two or three days, then prompt attention from the eye department should be sought as this may be an indication of infection.

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.

If you are concerned about side effects, particularly if the eye is painful then please contact the Eye Emergency Department at St Paul's Eye Unit at this hospital:

Tel: 0151 706 3949.

Text phone number: 18001 0151 706 3949

Further Information

**St Paul's Eye Unit
Eye Emergency Department**

Tel: 0151 706 3949

Text phone number: 18001 0151 706 3949

Clinical Eye Research Centre

Tel: 0151 706 3994

Text phone number: 18001 0151 706 3994

Hospital Switchboard

Tel: 0151 706 2000

Bleep 724 (Outpatients Sister)

Text phone number: 18001 0151 706 2000

Author: Department of Ophthalmology

Review Date: March 2026

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

يمكن توفير جميع المعلومات المتعلقة بالمرضى الموافق عليهم من قبل ائتمان المستشفى عند الطلب بصيغ أخرى، بما في ذلك لغات أخرى وبطرق تسهل قراءتها وبالحروف الطباعية الكبيرة وبالصوت وبطريقة برايل للمكفوفين وبطريقة مون والكترونياً.

所有經信托基金批准的患者資訊均可以其它格式提供，包括其它語言、易讀閱讀軟件、大字

體、音頻、盲文、穆恩體 (Moon) 盲文和電子格式，敬請索取。

در صورت تمایل می‌توانید کلیه اطلاعات تصویب شده توسط اتحادیه در رابطه با بیماران را به اشکال مختلف در دسترس داشته باشید، از جمله به زبانهای دیگر، به زبان ساده، چاپ درشت، صوت، خط مخصوص کوران، مون و بصورت روی خطی موجود است.

زانیاری پیوندهیدار بهو نمخوشانهی له‌لایمن تراستهوه پسه‌ند کراون، نه‌گمر داوا بکرنیت له فورمات‌هکانی تردا بریتی له زمانه‌کانی تر، نیزی رید (هاسان خویندنه‌وه)، چاپی گهوره، شریتی دمنگ، هئلی موون و هئلیکترؤنیکی هیه.

所有经信托基金批准的患者信息均可以其它格式提供，包括其它语言、易读阅读软件、大字体、音频、盲文、穆恩体 (Moon) 盲文和电子格式，敬请索取。

Dhammaan warbixinta bukaanleyda ee Ururka ee la oggol yahay waxaa marka la codsado lagu heli karaa nuskhado kale, sida luqado kale, akhris fudud, far waaweyn, dhegeysi, farta braille ee dadka indhaha la', Moon iyo nidaam eletaroonig ah.