

Patient information

## **Plaque Radiotherapy for Ocular Tumours**

St Paul's Eye Department

**Your Consultant/Doctor has advised you to have Plaque Radiotherapy.**

### **What is Plaque Radiotherapy for Ocular Surface Tumours?**

It is radiotherapy used to treat tumours on the ocular surface.

#### **It involves two operations:**

- The first operation is to fix the plaque to your eye where it can deliver radiation directly to your tumour or the site where the tumour was removed from.
- the second operation is to remove the plaque once the tumour cells have been killed.

### **What are the benefits of having Plaque Radiotherapy for Ocular Surface Tumours?**

Compared to other methods, plaque radiotherapy is relatively straightforward and reliable.

### **What are the risks of having Plaque Radiotherapy for Ocular Surface Tumours?**

Risks include local tumour recurrence, dry eye cataract formation and limbal stem cell deficiency.

Limbal stem cell deficiency develops when there is damage to the stem cells which restore and maintain the surface of the eye; this may result in pain and reduced vision, and may require further treatment including surgery.

### **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 or the residual tumour cells left after the tumour was removed may continue to grow.

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

### **What sort of anaesthetic will I need?**

The first operation is carried out under general anaesthetic, while the second is usually carried out under local anaesthetic.

General anaesthetic is drug-induced unconsciousness. It is always provided by an anaesthetist, who is a doctor with specialist training.

Local anaesthetic is drug-induced numbness: it may be provided by an anaesthetist, surgeon or other healthcare professional, depending on the technique used.

Both local and general anaesthetics can cause side effects, which 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 anaesthesia 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.

### **Getting ready for your operation**

You will have some blood tests and an ECG (heart tracing). These tests are 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 plan 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 take a bath or shower at home before you come in.

- Please leave all cash and valuables at home. If you need to bring valuables into hospital, these can be sent to General Office for safe keeping. General Office is open between 8.30am and 4.30pm, 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 safe keeping.
- 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 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 or your consent will be confirmed if you have signed this previously.
- 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.
- A nurse will take you to the operating theatre.
- Your dentures, glasses or hearing aid can stay with you on your journey to the operating theatre.
- When you arrive in the anaesthetic room, a theatre nurse will check your details with you. You will then be asked to put on a disposable hat.

## **The Operations**

### **❖ First Operation**

This operation is to insert the plaque and takes about 45 minutes. Once the plaque is in position, calculations are carried out to specify how long the plaque needs to stay in place to kill the tumour cells.

This is usually less than two days.

### **❖ Second operation**

This operation is to remove the plaque within a given time frame, and usually takes about 15 minutes.

## **What should I expect after my operations?**

- After your operation you will be kept in the theatre recovery room before being transferred to the ward.
- 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 an injection to help this sick feeling go away.
- You will have a pad over the operated eye.
- After your first operation, you may feel as if there is something in your eye while the plaque is in place.
- You may feel some slight discomfort. You will be offered pain-relieving medications if needed.

- While the plaque is in place, you will need to stay in your room or near your bed as much as possible. This is to limit the amount of radiation that other patients and visitors might be exposed to.
- You will be allowed visitors, but they will be asked to sit a few feet away from you. Children and pregnant women should not visit whilst you have the plaque in place.
- Ocular radiotherapy does not cause tiredness, hair loss or any generalised side effects. The treated eye might be red and possibly swollen for a few days, but this should settle quite quickly once the plaque has been removed.

## **Going home**

You can return home the day the plaque is removed or the day after.

## **Discharge Information**

### **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.

**If any severe pain or excessive stickiness are noticed, please contact the Emergency Eye Department**  
**Tel: 0151 706 3949**  
**Text phone number: 18001 0151 706 3949**  
**Or your local hospital.**

## **Your eye**

### **For two weeks after the operation please:**

- Avoid rubbing or pressing on your eye.
- Avoid heavy lifting, exercise or gardening.
- Avoid getting soap or shampoo in your eye while washing.
- Avoid eye makeup.

## **Getting back to normal**

- Ask your hospital doctor or your own family doctor (GP) when you can take up driving, swimming and other sports again.
- 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 St Paul's Eye Department at the Royal Liverpool Hospital or your own local eye hospital within a couple of weeks of discharge, where you will be advised on further treatment with drops.

Most patients also require chemotherapy eyedrops and we will be in contact with you to arrange this if necessary.

It is usually between three and six months before you will be reviewed here at the St Paul's Eye Department at the Royal Liverpool Hospital. This is to allow enough time to pass so that your consultant can assess the effectiveness of your treatment. This appointment will be sent to you through the post.

**If you do not receive an appointment within this time, please telephone the Service Administration Manager on Tel: 0151 706 3973.**

**Text phone number: 18001 0151 706 3973**

You will need to be reviewed every four-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.

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**

### **Ocular Oncology Clinical Nurse Specialists**

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

**Tel: 0151 706 3976 Answer Machine out of office hours**

**Email:**

**[gillian.hebbbar@rlbuht.nhs.uk](mailto:gillian.hebbbar@rlbuht.nhs.uk)**

**[gwendolyn.hachuela@rlbuht.nhs.uk](mailto:gwendolyn.hachuela@rlbuht.nhs.uk)**

**[shirley.varghese@rlbuht.nhs.uk](mailto: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](http://www.rcoa.ac.uk/patients)**

**[www.rcoa.ac.uk/sites/default/files/documents/2022-06/02-YourAnaesthetic2020web.pdf](http://www.rcoa.ac.uk/sites/default/files/documents/2022-06/02-YourAnaesthetic2020web.pdf)**

# Author: St Paul's Eye Department

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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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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.