

Patient information

Vitrectomy

St Paul's Eye Department – Royal Liverpool Hospital

Vitrectomy

The vitreous is a normally clear, gel-like substance that fills the eyes volume, giving it form and shape from before birth. After birth the vitreous does not have a particular function in the eye and can be removed.

Certain problems affecting the back of the eye (Retina) may require removal of this gel:

- As part of the surgery to repair retinal detachment.
- To enable the removal of scar tissue.
- To close a macular hole.
- Remove bleeding as seen in diabetic eye disease.
- To prevent pulling or tugging on the retina, from it's normal position.
- Injury or infection.

The Anaesthetic

Local Anaesthetic

If you have a local anaesthetic, you will be awake during the operation. You will not be able to see what is happening, but you may be aware of a bright light.

Before the operation, we will give you eye drops to enlarge your pupil (The pupil is the black circle at

the front of your eye). After this, we will give you an anaesthetic to numb your eye. This involves injecting local anaesthetic solution into your eyelid and the area around your eye. During the operation we will ask you to lie as flat as possible and keep your head still.

You should not have a local anaesthetic if you cannot lie flat on your back for an hour, suffer from breathing problems or think you might get anxious if your face is covered for about an hour.

The operation normally takes about an hour but may sometimes take a little longer.

A nurse will hold your hand throughout the whole operation:

To comfort you and as a point of communication if you experience any discomfort/problems during the surgery.

General Anaesthetic

If you are having a general anaesthetic, we will ask you to not to eat, drink or smoke for six hours before we take you to the operating theatre, this includes tea or coffee, water, chewing gum or biscuits. Before the operation, we will give you eye drops to enlarge your pupil.

When you arrive in the anaesthetic room, the anaesthetist will give you an injection.

You will then stay asleep for the whole operation. The anaesthetist will monitor your heart rate, breathing, blood oxygen and blood pressure while you are under the anaesthetic. You may feel tired and sleep for about six to twelve hours after the operation.

What are the Risks of Anaesthesia?

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

Local anaesthesia 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 anaesthetic can cause side effects and complications. Side effects are common but are usually short lived: they include nausea, confusion and pain.

There is a risk of damage to teeth, particularly caps or crowns and veneers. Your anaesthetist will take every care, but occasionally damage can occur. Complications are rare but can cause lasting injury. They include 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.

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

The Surgery

The surgery is performed using a microscope and special lenses to enable a clear view. Several small incisions are made on the eye to allow insertion of microsurgical instruments in order to:

- Illuminate the eye.
- Infuse fluid in order to maintain the eyes shape during surgery.
- Allow instruments to cut and remove vitreous.

Your surgeon may also decide to use other techniques such as: Laser in order to rectify specific conditions as necessary.

A gas bubble may be placed inside the eye to provide temporary support (tamponade) to a particular area of the retina or silicone oil may be used as an alternative internal support for the retina.

If you have gas placed in your eye it is important that you do not fly until the gas has absorbed. Your eye doctor will inform you of this. Also if you are admitted into hospital for an operation you must inform the anaesthetist.

Sometimes it may be necessary for the small cuts to be stitched, however these do not normally need to be removed.

At the end of the operation your eye will be covered with an eye pad or shield and this will be removed the following morning.

Risks of Surgery

Every patient is different and some vitrectomy surgery is more complicated than others. Your surgeon will talk to you about the chances of success.

Potential Complications During the Operation

- Bleeding inside the eye.
- Further holes in the retina.

Potential Complications After the Operation

- Bruising of the eye or eyelids.
- High pressure inside the eye.
- Inflammation inside the eye.
- Cataract.
- Double vision.

- Allergy to the medication used.
- Infection in the eye (endophthalmitis). This is very rare but can lead to serious loss of sight.
- Drooping of the upper eye lid.
- Change in the size of the pupil.

Cataracts

Like a camera, the eye has a lens, which focuses light onto the retina. When the lens becomes cloudy, this is called a cataract. Most patients following a vitrectomy will develop a cataract, which may be removed at a later date, on average one year after the procedure.

What Vision Can I Expect After Surgery?

After surgery it usually takes some weeks for your vision to recover. If we have used a bubble of gas or silicone oil your vision will be blurred, this is normal and you should not be alarmed. If silicone oil is used, this will have to be removed at a later date, which will be decided by your surgeon.

Frequently Asked Questions

May I Read or Watch TV After Surgery?

Yes using your eye following surgery will not damage or hurt the eye. However, if you are posturing face down this is not recommended.

What About Bending and Activities Within the House?

You can resume normal activities within the household. Regarding more vigorous activities, ask your treating eye doctor.

Are there Any Restrictions with Regards to Diet?

There are no particular restrictions. As always, a healthy diet is advisable.

Can I Drive?

You are not allowed to drive following retinal surgery. Please ask your eye doctor when you will be allowed to drive again.

Do I Need to Wear Sunglasses?

You may find it more comfortable wearing sunglasses; however, there are no rules.

How Long Will I Need to Continue with My Eye Drops?

Most post-operative drops will continue for approximately four to five weeks, however, your surgeon will instruct you individually.

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

St. Paul's Eye Unit

Tel: 0151 706 3948

Text phone number: 18001 0151 706 3948

Some helpful web site links for more information

www.stlukeseye.com

www.patient.co.uk

www.eyemdlink.com

www.rnib.org.uk

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