Ophthalmology Department

Vitrectomy and Floaters

Vitrectomy for floaters

When the normally transparent jelly (vitreous) that fills the back of the eye contains opacities they cast shadows on the retina (the light sensitive membrane lining the back of the eye) which are seen as strands or spots, cobwebs or insect-like images which drift across the vision. These are floaters, sometimes called muscae volitantes or flitting flies.

Vitreous floaters are harmless and many patients can live with the symptoms. However in some patients persistent, distracting disabling floaters remain and cause visual disability. The perception of floaters in the visual field can affect concentration while driving and reduce productivity at work.

Floaters are not obvious all the time to most people but in bright light, when the pupil goes small, and against a pale background such as the sky, a pale wall or the page of a book they are most evident.

Many people have some floaters especially if they are short sighted when the jelly tends to be more fluid with strands in it. As people age the jelly naturally becomes more fluid in everyone. Sometimes the jelly develops watery spaces within it and collapses inward separating from the retina. When this happens, (posterior vitreous detachment or PVD), the person may experience a sudden shower of floaters. These are usually simply opaque strands where the jelly was attached to the back of the eye round the optic disc, the point of entry of the optic (sight) nerve. Often these floaters are oval, circular or C shaped.

The floaters following PVD usually become less evident with time but they will not disappear altogether. We do not offer treatment for removal of floaters except in exceptionally rare circumstances when they are visually incapacitating when an operation can be done to remove the jelly and floaters.

compassionate care

What is the treatment?

For persistent vitreous opacities, an operation is required to remove the vitreous humour in order to reduce the visual disability secondary to floaters. A bubble of air/gas is injected into this space by the surgeon. This operation is called a VITRECTOMY and is generally performed under a general anaesthetic or a local anaesthetic. The surgery involves the removal of vitreous gel and injection of an air or gas bubble. It is highly likely that you will develop a cataract (an opacity or misting within the lens of the eye) after vitrectomy.

Therefore removal of cataract and insertion of lens implant is often performed at the same time as the vitrectomy. This avoids having subsequent cataract surgery within two years after vitrectomy.

What happens after the operation?

Following the operation you will be required not to lie on your back for a few days, until the air/gas bubble dissolves away.

What will my vision be like after the operation?

Your vision will be blurred for up to a week following the operation. You may be able to see the bubble which will appear as a wobbly black ring in your line of vision. The bubble will move as you move and gradually get smaller or break into smaller bubbles, which in turn will be totally absorbed. The bubble will eventually be replaced by the natural fluids produced in the eye.

What are the benefits of surgery?

Vitrectomy surgery for floaters removes persistent central floaters and improves visual function.

Are there any risks involved?

As with any procedure there may be risks involved and you should discuss these fully with the consultant involved prior to your operation.

Some possible but rare complications are listed below:

- **Bleeding inside the eye (1 in 4000).**
- **Detached retina which can be repaired with further surgery (1 in 200).**
- **Infection in the eye (1 in 2000), which can lead to loss of sight.**

What else do I need to know?

1. You must not travel in an aeroplane until the bubble has been completely absorbed. This is due to the possible risk of expansion of the bubble in the eye owing to the change in atmospheric pressure.

You can contact the Eye clinic (HRI and CRH) on - 01484 355085 from Monday to Friday (not bank holidays) 9am - 5pm or Saturday 9am - 12 noon

If it is an emergency out of hours, you can contact Ward 8C through the hospital switchboard at Calderdale Royal Hospital.

If you have any comments about this leaflet or the service you have received you can contact :

Ophthalmology Department

Telephone No: 01484 355085

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

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"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم المذكور أعلاه"