

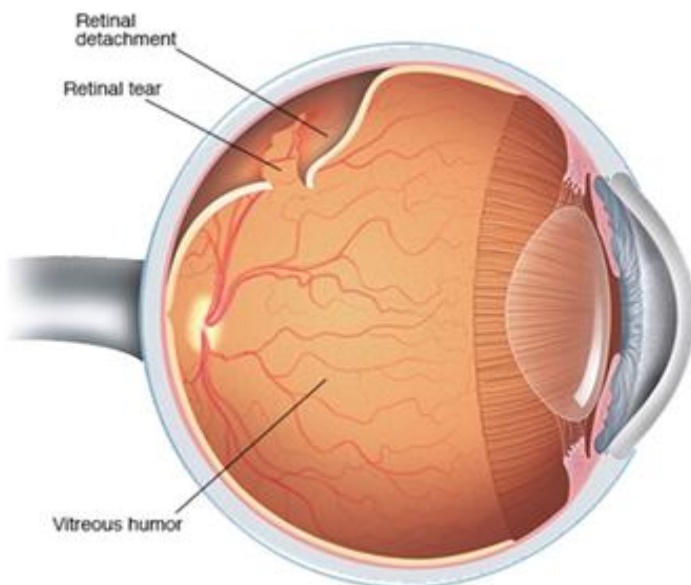
Patient information

Laser retinopexy

Your eye doctor has told you that you have a retinal tear. This leaflet will help you understand what has happened to your eye and the treatment that we can offer. You might want to discuss the information with a relative or carer. We will ask you to sign a consent form, so it is important that you understand the information in this leaflet before you agree to go ahead with the treatment. If you have any questions, you might want to write them down to help you remember to ask one of the hospital staff.

A retinal tear is a hole that forms in the outer part of the retina (figure 1 below).

Figure 1



Tears can happen due to the jelly inside the eye coming away from the retina (vitreous detachment) or trauma to the eye. Some people who are very short-sighted are at a much greater risk of developing tears.

We know from several studies that if retinal tears are left untreated, then there is a very high risk of developing retinal detachment (figure 1). The retina can become detached

because fluid from inside the eye is able to enter the tear, causing the retina to lift off from the underlying tissue below.

To prevent this from happening, the doctor will seal the retina around the tear by placing laser spots around the hole, which then forms scar tissue, acting like a barrier to prevent the retina from detaching. The procedure is called a laser retinopexy. It usually takes about 14 days for the scar tissue to develop.

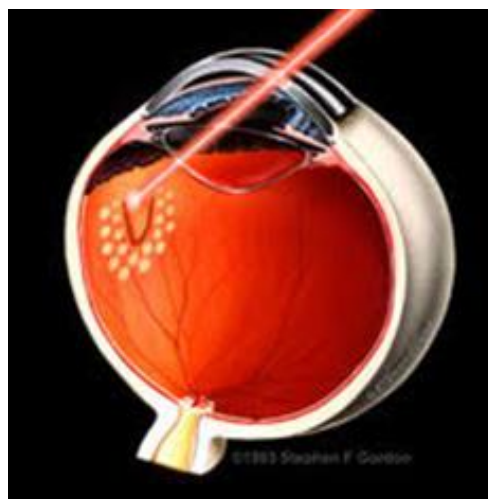
How is it done?

You will be given drops to dilate your pupil. There are two ways which the laser may be performed, depending on the location of tears in the retina.

- An anaesthetic drop will be put in your eye. The doctor will then place a contact lens on the surface of your eye. This will focus the laser, which is then performed sitting upright on the slit-lamp. The anaesthetic drops do not completely anaesthetise the eyeball itself, but should allow the contact lens to be placed comfortably on the surface of the eye. This is not always possible despite sufficient eye drops.
- The laser may be delivered through a special device worn on the doctor's head. This technique of "indirect laser" for treating retinal tears involves the use of an instrument to press on the wall of an eyeball in order to reach certain parts of the retina that contain the retinal tear. In this case, you will be asked to lie flat and the doctor will press on your eye using a small instrument to visualise the tear.

In both techniques, the doctor surrounds the hole/weak spot with laser (figure 2). It is important that you keep your head still throughout the procedure. You will see a series of bright flashes.

Figure 2



Can I drive myself to the hospital for the laser appointment?

It is not advisable to drive after laser treatment, as you may have blurred vision from the eye drops and feel temporarily dazzled from the laser light. It is helpful if you can arrange someone to collect you after the treatment and take you home, or you may use public transport.

Does it hurt?

The laser treatment itself can be associated with “aching” pains. Very occasionally, there can be a feeling of an “electric shock-like” feeling during the laser treatment. These sensations do not indicate any adverse effects inside the eye related to the laser treatment. Use of a contact lens can sometimes cause redness of the eyeball. This settles without any treatment within five days.

What happens after the treatment?

Immediately after the laser treatment your vision will be dazzled as a result of the bright lights, this resolves in half an hour. Your vision will be misty for a few hours and should return to normal by the next day.

What are the risks?

- It is important to remember that the laser retinopexy will not “get rid” of any pre-existing symptoms such as floaters that you experienced before your treatment. Sometimes floaters may immediately increase after the treatment, but these will settle in a few days.
- There may be light sensitivity and glare outside.
- Some patients experience slight irritation from the contact lens used, however this usually recedes quickly.
- As stated before it is important not to move during the procedure, if you do, there is a possibility that the laser will affect a portion of your vision that it was not intended to (ie your central vision).
- There is also a possibility that the laser retinopexy does not completely seal the tear, and further laser retinopexy may be required again in the future.
- Even after laser retinopexy, a retinal detachment can still form, though the

possibility of one is greatly reduced with treatment.

- There is a risk of bleeding to your retina.

How do I look after my eye at home?

Avoiding any strenuous activity until your follow-up appointment.

Will I need follow-up?

Yes you will be reviewed in the outpatient clinic in approximately two weeks after your laser treatment.

Can a retina detach after laser retinopexy?

You can still have a retinal detachment despite laser retinopexy.

You should seek help immediately if you notice:

- New floaters (any floaters that were present before the laser will still be there afterwards but with time they will become less)
- Flashing lights in the eye
- A change in vision (like a curtain coming across your vision)

If you experience any of these symptoms, you should contact the emergency ophthalmology service — see contact details overleaf.

Eye Treatment Centre

Telephone on **01284 713815 / 01284 712636**

Monday to Thursday 9.00 am — 5.00 pm

Friday 9.00 am — 1.00 pm

For emergencies and at the weekend and out of hours:

Telephone 01284 713000 and ask to speak to the 'on call' Ophthalmic Doctor.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo)
<https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>



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