

Laser retinopexy

Your eye doctor has told you that you have a retinal tear. This leaflet will help you to 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, arrow 1)

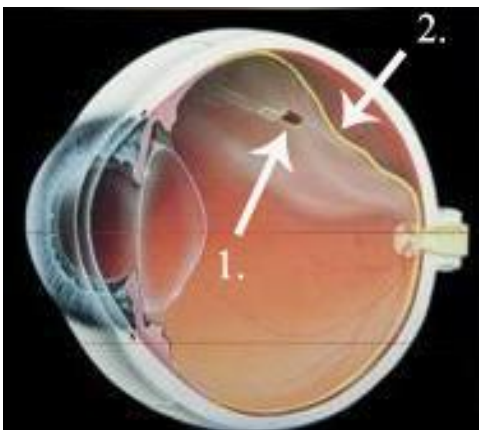


Figure 1 Retinal tear:

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 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, arrow 2). 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. This 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 after the doctor has explained the procedure to you. There are two ways which the laser may be performed, depending on the location of the tears in the retina.

1. 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 “numbing” 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.

2. 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 the eyeball in order to reach 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 allow him/her 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.

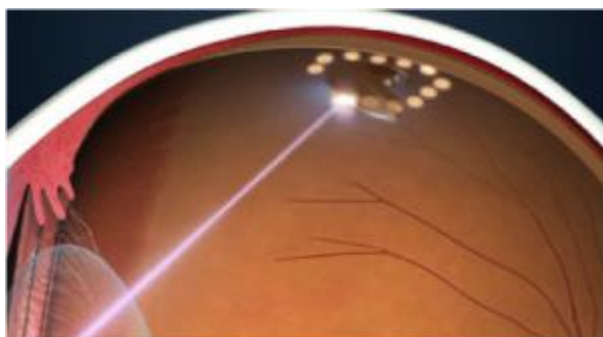


Figure 2: Lasered tear

Does it hurt?

The laser treatment itself can be associated with “stabbing”, “sharp”, and “aching” pains. Very occasionally, there can be a feeling of an “electric shock-like” feeling during the laser treatment. Although these sensations can be worrying, they do not indicate any adverse effects inside the eye related to the laser treatment. Depending on the amount of laser performed, you may also experience a headache after the procedure. Laser treatment with the use of a contact lens can occasionally cause redness of the tissues that cover the eyeball. This settles without any treatment within five days. If we have to “indent” or press on your eye-ball the eye-ball using a small instrument then this can cause redness of the tissues that cover the eyeball, but this also settles without any treatment within five days.

What happens after the treatment?

Immediately after the laser your vision will be dazzled as a result of the bright lights. Your vision will be misty for a few hours and should return to normal by the next day. You should not drive on the day of your laser. It is important to remember that laser retinopexy will not “get rid” of any pre-existing symptoms such as floaters that you experienced before your treatment. Sometimes the floaters may increase immediately after the treatment, but these will settle after a few days. There may be light sensitivity and glare outside.

What are the risks?

Since no incisions are made to the eye, there is no risk of infection inside the eye. Some patients experience a slight irritation after the procedure from the lens being placed on the eye; however, this usually recedes quickly. As stated before, it is important that you do not 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 (i.e. your central vision). There is also a very small possibility that the laser retinopexy does not completely seal the tear. Even after laser retinopexy, a retinal detachment can still form, though the possibility of one is greatly reduced with treatment.

Will I need a follow-up?

Yes, you will be reviewed in the out-patient clinic approximately two weeks after your laser treatment to check that the laser has worked.

Can the retina detach after laser retinopexy?

Laser retinopexy considerably reduces the risk of retinal detachment but it can still occur despite laser retinopexy. You should seek help immediately if you notice:

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

If you experience these symptoms, please ring Accident and Emergency: 0207 253 3411 ext 2080.

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Moorfields Eye Hospital NHS Foundation Trust
City Road, London EC1V 2PD
Phone: 020 7253 3411
www.moorfields.nhs.uk

Moorfields Direct telephone helpline

Phone: 020 7566 2345
Monday-Friday, 8.30am-9pm
Saturday, 9am-5pm
Information and advice on eye conditions and treatments from experienced ophthalmic-trained nurses.

Patient advice and liaison service (PALS)

Phone: 020 7566 2324/ 020 7566 2325
Email: moorfields.pals@nhs.net
Moorfields' PALS team provides confidential advice and support to help you with any concerns you may have about the care we provide, guiding you through the different services available at Moorfields. The PALS team can also advise you on how to make a complaint.

Your right to treatment within 18 weeks

Under the NHS constitution, all patients have the right to begin consultant-led treatment within 18 weeks of being referred by their GP. Moorfields is committed to fulfilling this right, but if



you feel that we have failed to do so, please contact our patient advice and liaison service (PALS) who will be able to advise you further (see above). For more information about your rights under the NHS constitution, visit www.nhs.uk/choiceinthenhs

