

## Patient information leaflet

# Floaters

Your eye specialist has told you that you have floaters. This information leaflet has been written to inform you of what floaters are and the possible treatments available. If you have any questions, we suggest you write them down so you will remember to ask one of the hospital staff.

### **What is a floater?**

Patients often describe floaters as moving or floating opacities in their vision that may look like cobwebs, dots or lines that make up various shapes. Floaters tend to be more frequent in short-sighted people or as we get older.

The vitreous is a jelly like substance that supports the eye as it develops in the womb. At birth, the vitreous gel is a clear and is firmly attached to the retina, the light sensitive film at the back of our eyes. However, natural ageing changes causes the vitreous to breakdown into small debris that float around the back of the eye. The breakdown gel is associated with a separation of the vitreous from the retina. This is called a posterior vitreous detachment or abbreviated to **PVD**.

### **How floaters affect your vision?**

Floaters are generally harmless and represent a normal and natural ageing changes in the vitreous. However, the breakdown of the jelly like structure and separation from the retina (PVD) may cause a retina

tear. A tear in the retina results may lead to a retinal detachment as the retinal seal is broken, allowing fluid to track behind the retina causing it to detach. This is an uncommon occurrence (1:10 000). Signs and symptoms of this include thousands of smaller floaters or bright flashing lights. Should this happen, you should have a dilated eye examination urgently.

### **How are floaters treated?**

Since floaters are largely harmless surgery is not generally recommended. On occasion, the floaters may cause significant visual symptoms that affect the quality of vision and may impair an individual function or quality of life. In such cases the vitreous gel maybe removed through an operation called **vitrectomy**. Some eye specialist may offer YAG laser treatment for floaters. We do not recommend or offer this type of treatment.

### **What does the surgery involve?**

Vitrectomy is a surgical procedure in which the vitreous gel is removed from inside your eye. The operation is done through openings in your eye, using keyhole surgery. Sometimes these openings are closed with a small stitch at the end of the operation. These dissolve after 4 to 6 weeks. You will usually have a pad and shield over your eye after the operation. This is removed the next day.

### **What are the benefits of surgery?**

The majority of patients find that following surgery vision is cleared and void of floaters.

### **What are the risks of surgery?**

Rarely a retinal tear or detachment can develop after the operation, or a severe infection develops inside the eye. There is a very small chance (less than 1:1000) that you could lose sight completely in the eye. Cataract is common after this type of operation but it can be treated easily with standard cataract surgery. Your surgeon may use a gas bubble to support the retina. In which case the gas may cause pressure in the eye to increase and this could damage your eye if it is not treated.

### **After the operation**

Your eye will feel uncomfortable, gritty, and itchy for a week or two. It may also look red or bruised. Regular pain relief is usually enough to treat the discomfort. You will receive eye drops to reduce inflammation and prevent infection. Please **do not rub your eye** as this can introduce infection. Your eye will heal over the next 6 to 8 weeks but your vision might continue to improve for several months following the surgery.

If a retinal tear develops during surgery your surgeon may put a bubble of gas inside your eye to stop the retina from detaching. In this case you may have to posture with your head in a certain position, and your vision will be blurry until the gas disappears.

**You must not fly until the gas has disappeared** as the bubble will expand and damage your eye. You must also **not have nitrous oxide anaesthetic** ('gas and air', or 'laughing gas') for the same reason.

### **When to seek help**

It is normal to have some discomfort after any operation, but you should contact The Edinburgh Clinic **0131 447 2340** (opening hours 0800-2000 Monday to Friday and reduced hours at weekends) Clinic out of hours number **07885 448248**.

Call NHS24 on **111** immediately if you have:

- Severe pain not helped by paracetamol
- Headache and nausea, or vomiting
- Loss of vision after initial improvement
- Worsening redness of your eye.

### **General advice after retinal surgery**

- Use your eye drops as instructed
- Stay off work and take it easy for 3 weeks
- Feel free to read or watch TV in moderation
- You can shower, but avoid getting water or soap in your eye
- Wear your own glasses if they help you see
- Wear sunglasses for comfort
- Avoid heavy lifting or straining for 3 weeks. For example, refrain from gardening and sport, and take a less active role sexually
- Do not drive until after your first clinic appointment
- Do not rub your eye.

### **Keeping your Appointment**

If you cannot keep your appointment, or have been given one that is unsuitable, please change it by phoning **0131 447 2340**. Your call will give someone else the chance to be seen and will help us keep waiting times to a minimum.