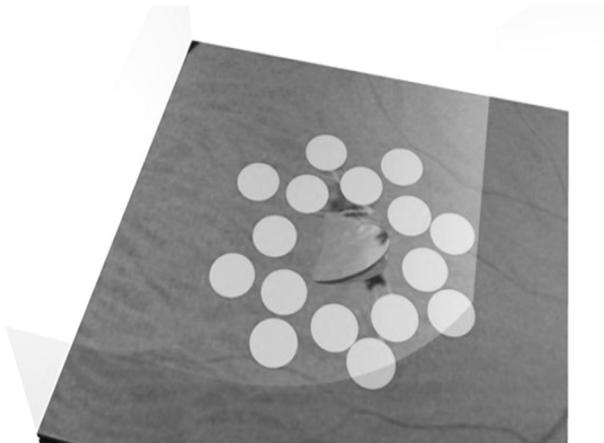


Laser / Cryo Retinopexy for Retinal Tears

Ophthalmology Department



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. The most common questions are listed below and will be addressed in this leaflet.

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What is the retina?

The back of the eye has a light-sensitive lining called the retina, similar to the film in a camera. Light is focused through the eye onto the retina, allowing us to see. The centre part of the retina is called the macula - it is here that light must be focused for us to see fine detail, to be able to read and to see in colour.

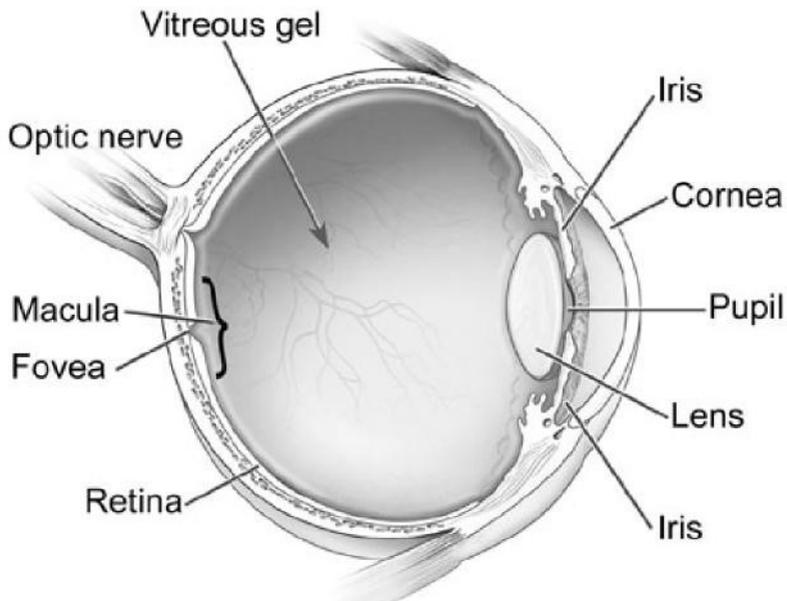


Figure 1: Cross section of eye, showing back (retina & centre of retina- macula) and front (cornea, lens) of eye

What is a retinal tear?

The retina is the light sensitive film at the back of the eye and a retinal tear is a hole that forms in the outer part of the retina (see Figure 1, large arrow). Tears can happen due to the jelly inside the eye coming away from the retina (vitreous detachment, an age-related change) or trauma to the eye. Some people who are very short-sighted are at much greater risk of developing tears.

If a retinal tear is left untreated, there is a high risk of developing a retinal detachment, where fluid passes through the tear and underneath the retina, leading to the retina peeling away from the inner wall of the eye (Figure 1, small arrow). A retinal detachment can lead to a permanent loss of vision.

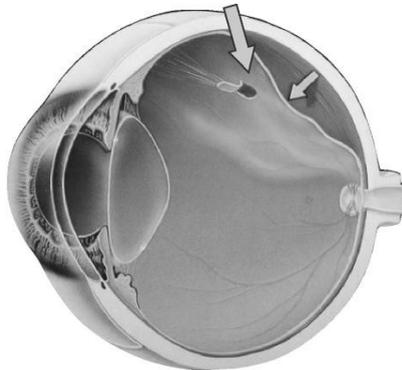


Figure 1: Cross Section of eye with retinal tear (large arrow) and retinal detachment (small arrow)

What is the treatment for a retinal tear?

For retinal tears/holes at high risk of developing a retinal detachment, to prevent a retinal detachment from happening the doctor will seal the retina (retinopexy) around the tear by placing laser spots (laser retinopexy) or a frost ball (cryo retinopexy) around the tear. This then forms a scar around the tear acting like a barrier to prevent the retina from detaching (Figure 2). The scar can take several weeks to form.

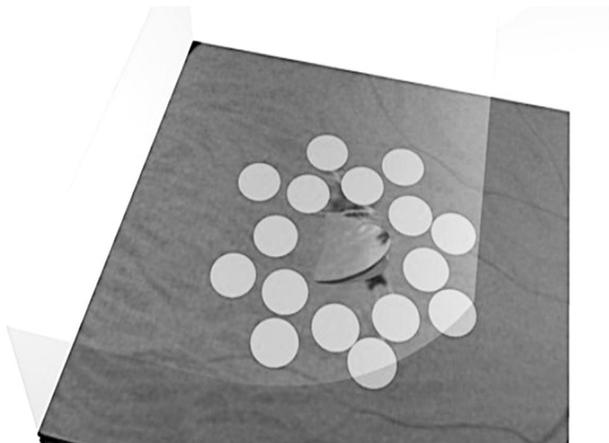


Figure 2: Laser spots applied to area around the tear to create a barrier to prevent the retina from detaching

Can I drive myself to hospital for the treatment appointment?

You should not drive after the treatment, as you may have blurred vision from the eye drops and feel temporarily dazzled from the laser light. Either arrange for someone to collect you after the treatment and take you home, or use public transport.

You can drive the next day if you wish to.

How long will I be at the hospital?

The procedure can be performed in an outpatient clinic or as a daycase procedure in theatres, and does not need an overnight stay in hospital.

Allow one to two hours for your appointment. However, please be aware that you may be at the hospital longer or need extra visits as this is usually done as an urgent procedure.

What happens before my treatment?

You may have a sight test so please bring your distance glasses with you. If you wear contact lenses please be prepared to remove them for your appointment and bring your distance glasses if you have them. You will be given drops to enlarge your pupil. You will have your procedure explained to you before treatment begins, and you will be able to ask any questions before giving your consent to the procedure. Remember you can withdraw your consent for treatment at any time.

How is it done?

An anaesthetic drop will be put in your eye to numb it, however you may still feel some discomfort. There are three ways in which the treatment can be performed, depending on the location of the tears in the retina:

1. The laser can be performed in outpatients with you sitting upright at a slit-lamp (the microscope that the doctor uses in clinic to examine you). The doctor will then place a contact lens on the surface of your eye, which focuses the laser on the retina. It is important that you keep your head still throughout the procedure. You will see a series of bright flashes.
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 on your back and the doctor will press on your eye using a small instrument to allow the them to visualise the tear. It is important that you keep your head still throughout the procedure. You will see a series of bright flashes.
3. Cryo retinopexy involves the use of a probe to create an ice ball over the surface of the eyeball, which then penetrates to reach the area that contains the retinal tear. In this case, you will be asked to lie flat on your back and the doctor will press on your eye using a small instrument to allow the them to visualise the tear.

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.

How do I look after my eye at home?

There is no special aftercare advice that you need to follow but the laser doctor will advise you of any precautions, if necessary, such as avoiding strenuous activity.

Will I need a follow-up appointment?

You will generally be seen again in the eye clinic at a later date to check your condition, usually within 2-6 weeks. If you do not hear from us before then, please contact the eye clinic to arrange an appointment.

Can the retina detach after treatment?

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

1. 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)
2. Flashing lights in the eye
3. A change in vision (like a curtain coming across).

What are the risks of treatment?

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 however, this usually resolves with paracetamol or within a few days. You can also buy dry eye drops/lubricants from the chemist for symptomatic relief.

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.

Other uncommon risks (less than 1 in 100) of retinopexy treatment include bleeding within the eye or scar tissue forming over the retina leading to distorted vision (epiretinal membrane).

What if I don't have any treatment?

If a retinal tear is left untreated, there is a high risk of developing a retinal detachment, where fluid passes through the tear and underneath the retina, leading to the retina peeling away from the inner wall of the eye. A retinal detachment can lead to a permanent loss of vision and it may not always be possible to recover your vision, even if a retinal detachment is treated.

Depending on the type of retinal tear, the risk of a retinal detachment can vary between 5-50%.

Contact Details

If you have any questions, please contact your consultant's secretary. Their phone number will be listed on your appointment letter.

We want to hear from you if you are worried about anything after treatment:

- Ashford Hospital: **01784 884402**
- St Peter's Hospital: **01932 722686**

If you feel you need an emergency consultation after treatment and there is nobody available on the numbers above, please contact the eye doctor oncall via the St Peter's Hospital Switchboard (01932 872 000).

Senior Nurses

Sister, Dorothy Adjorlolo, Ashford Hospital

Deputy Sister, Candy Bhadaye, Ashford Hospital

Deputy Sister, Sherly Joseph, St. Peter's Hospital

Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty.

If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email asp-tr.patient.advice@nhs.net. If you remain concerned, the team can also advise upon how to make a formal complaint.

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To use the Text Relay service, prefix all numbers with 18001.

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Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

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