



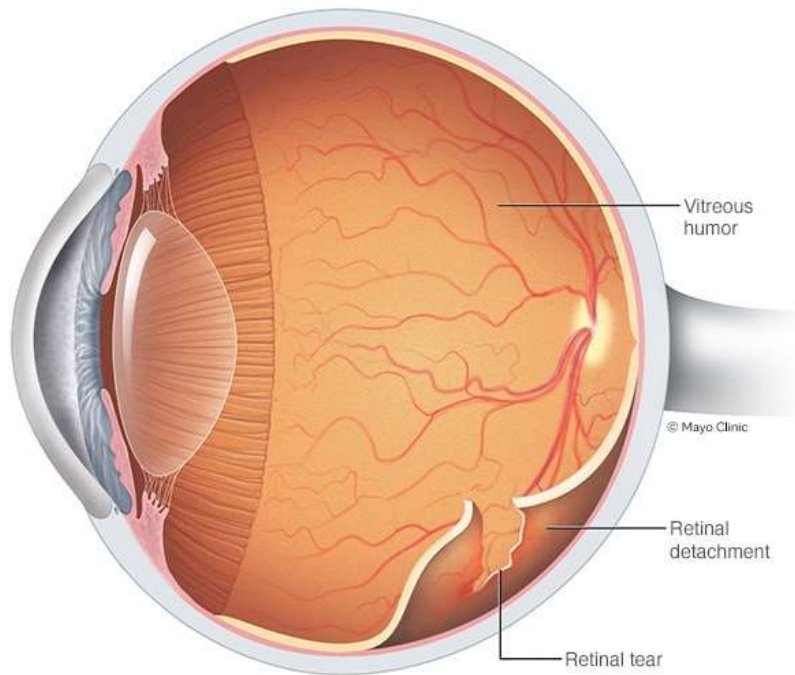
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## Retinal Detachment Aftercare Instructions



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# 1. Introduction of retinal detachment surgery

There are 3 types of surgery performed to repair a detached retina:

- (1) **Vitrectomy.** Removal of the vitreous provides better access to your retina and reduces tension. During a vitrectomy, your ophthalmologist uses small instruments to cut and suction out the vitreous. Subsequently, any other necessary repairs, such as laser or cryotherapy for a hole in your retina, are performed by your doctor.
- (2) **Scleral buckling.** In scleral buckling, your doctor exposes your eyeball and uses a freezing instrument to help seal your retina back together. Following this, a small device known as a scleral buckle may be used to hold your retina in place.
- (3) **Pneumatic retinopexy.** During pneumatic retinopexy, your doctor injects an expanding gas bubble into your eye. The bubble pushes your retina back into place, allowing your doctor to use laser or freeze treatment to repair any holes or tears (Figure 1).

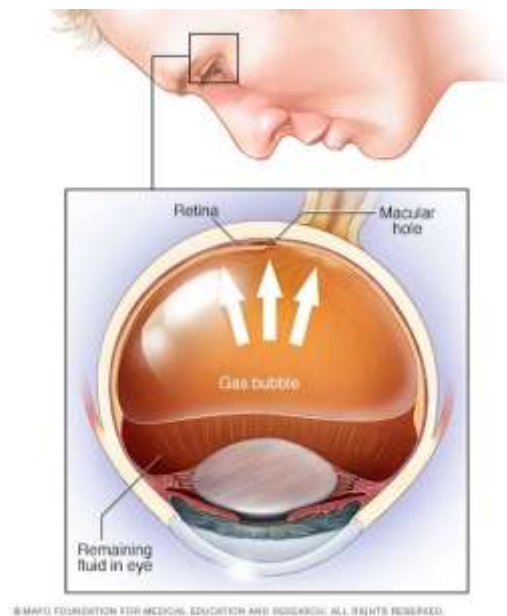


Figure 1.

However, the final outcome of vision depends on the location, the severity, and the duration of the detachment. Vision recovery is typically good if the detachment doesn't involve the macula and the duration is not too long.

Surgery for retinal detachment may be performed under general or local anesthesia. When under local anesthesia, patients should avoid moving their head or hands, coughing, sneezing, talking, or falling asleep (to prevent sudden awakening or unconscious actions). The success of the surgery depends on the full cooperation of patients with their doctors.

## **2. Preparing for your surgery**

- (1) Before undergoing general anesthesia, you will follow an outpatient routine, including blood tests, EKGs, and chest X-rays. If you have a fever, high blood sugar, high blood pressure, or any issues with the heart, lungs, or kidneys, necessary treatments will be administered before the surgery.
- (2) On the day of hospitalization, the doctor will perform a comprehensive eye exam to assess the extent of your retinal detachment.
- (3) Fill in the surgery/ anesthesia consent form.
- (4) Take a bath, shampoo, braid your hair (female), and shave your face (men) one day before surgery.
- (5) Diet: Patients undergoing local anesthesia can follow their regular meal schedule. For those undergoing general anesthesia, it is recommended to fast for 8 hours prior to surgery.

- (6) Trim your eyelashes to remove hidden dirt, prevent postoperative infections, and avoid any interference with your eyes during surgery.
- (7) If necessary, take prescribed sedatives the night before surgery to alleviate anxiety and nervousness.
- (8) Apply mydriatic eye drops on the day of surgery. You may experience mild pain and discomfort. Since dilating drops can cause temporary blurred vision, be careful with every activity.

### **3. Post-operative care**

- (1) After surgery, remain in bed for as long as possible. Upon waking from anesthesia, you will be taken to the recovery room. You will receive instructions regarding your postoperative position if necessary. If no specific instructions are provided, lie on the non-operated side to avoid putting pressure on the treated eye. You may resume your regular diet.
- (2) After surgery, your eye may produce a watery substance that may mix with blood. Cover your eye with a pad to maintain cleanliness and comfort, and wear a metal shield to protect the healing eye. You can remove the pad the day after surgery, but continue wearing the metal shield at night and during naps for at least one week. This helps protect the healing eye from injury and prevents pressure on it while you sleep.
- (3) Eye drops should be continued to prevent infection and ease inflammation.

- (4) It is normal for your eye to appear red or swollen after surgery. These features are part of the standard postoperative healing process. Swelling and redness of the eyelids will gradually subside.
- (5) You may experience moderate pain in your eye, temple, and forehead. This is common and can be relieved by taking some analgesics.
- (6) If you experience severe headache with nausea or vomiting, be aware that it may be related to elevated intraocular pressure (IOP). If elevated IOP occurs, intraocular pressure lowering drugs or eyedrops will be prescribed by your doctor.
- (7) If you have a gas bubble in your eye, you should lie face down while sleeping or resting to allow the gas bubble to hold the retina in place as it reattaches to the back of your eye. Usually, you will be asked to keep your face down or lie on your side for at least 14 to 21 days, until the gas bubble is completely absorbed.
- (8) After discharge, follow the doctor's instructions and continue using steroids and antibiotics eye drops for 4 to 6 weeks. Ensure you are familiar with the correct technique for applying eye drops.
- (9) Avoid reading books and newspapers for one week after discharge from the hospital. Watching television is acceptable. Avoid rapid eye movements to reduce eye discomfort.

- (10) Avoid constipation, sneezing, sudden head movements, and vigorous exercise for two months after discharge from the hospital.
- (11) You may gradually resume all non-strenuous activities three weeks after discharge. After six weeks, you can resume physical activities and mild exercise.
- (12) Your doctor will arrange follow-up appointments to monitor your recovery.

#### **4. Conclusion**

Retinal detachment occurs when your retina is pulled away from its normal position. Retinal detachment is a medical emergency, and the longer it remains untreated, the higher the risk of permanent vision loss in the affected eye. Early treatment is crucial for preserving your vision.

#### **5. References**

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Let us take the quiz to make sure you understand.

1. Pneumatic retinopexy involves injecting an expanding gas bubble into the eye to pull the retina back into place during retinal detachment surgery.

Yes No Don't know

2. After retinal detachment surgery, patients may need to adopt a specific head posture during the recovery period.

Yes No Don't know

3. Recovery of vision after surgery typically depends on the severity of the detachment rather than the location of the detachment.

Yes No Don't know

4. Read books and newspapers should be avoided for at least one week after being discharged from the hospital after retinal detachment surgery.

Yes No Don't know

5. A metal shield should be worn at night and during naps for at least one week after retinal detachment surgery to protect the healing eye.

Yes No Don't know