

# Glaucoma Surgery Trabeculectomy

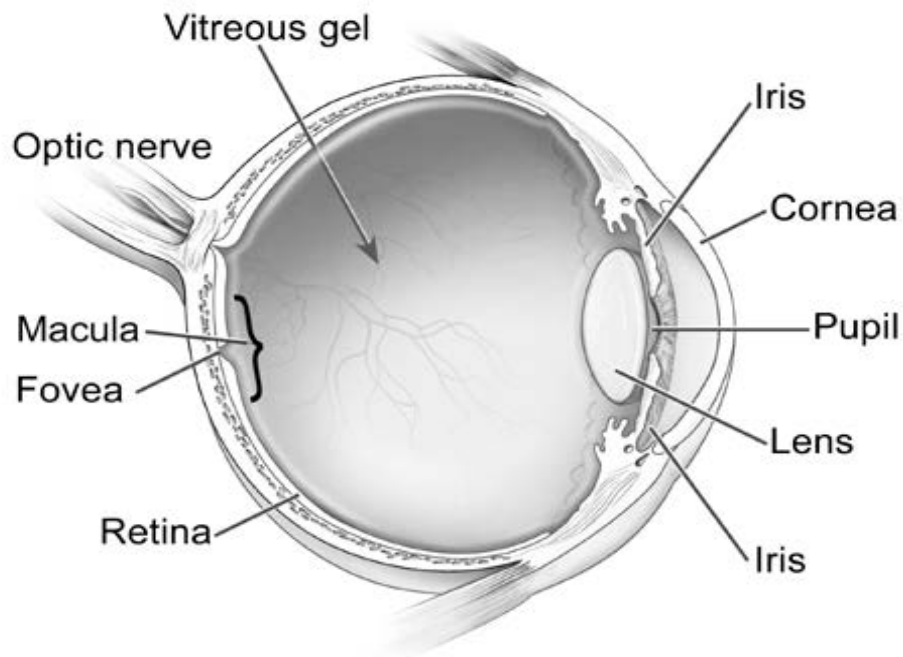
## Information for patients

For contact telephone numbers - see back page

Please bring this booklet with you on the day of surgery.

### What is glaucoma?

Glaucoma is raised pressure inside the eye which causes damage to the optic nerve and nerve cells of the retina (the light sensitive layer lining the inside of the eye). Damage to the nerve cells causes loss of visual field and can lead to loss of sight. Raised pressure in the eye is usually treated using eye drops every day for life.



### Why do I need an operation?

Your eye specialist has recommended surgery as it may now be difficult to control the pressure inside your eye with eye drops. Some people may have developed an intolerance or allergy to their eye drops or may have difficulty putting their drops in.

### How is the operation done?

Almost all glaucoma surgery is carried out under a local anaesthetic as a day case. A new channel is formed through the white of the eye under your upper eyelid to allow the aqueous humour (fluid which nourishes the lens in the front of the eye) to drain away, thus reducing the pressure inside the eye. The operation takes up to 45-60 minutes and you will have an eye pad and /or shield over the eye afterwards.

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## Will the operation improve my sight?

Unfortunately, the operation cannot bring back any sight that has been lost. After the operation your sight may be blurred or seem worse. This is only temporary and is to be expected after the operation. Your eye will need time to heal and settle down following surgery. This generally takes about eight weeks.

## What are the benefits?

The pressure inside the eye is reduced so that further damage to the optic nerve is prevented and the remaining visual field is maintained.

Trabeculectomy is a very successful operation which can save the sight of the eye. Following surgery, in 90% of cases, no further treatment is necessary. In 5% of cases further surgery or treatment is necessary.

## What are the possible complications?

There is a small risk of bleeding in the eye at the time of surgery. However, if this should occur it will gradually clear.

The eye may appear 'bloodshot' and feel gritty and 'water' after surgery.

There is a very rare risk of late infection

Some people develop cataract earlier than they might have following glaucoma surgery, so may require cataract surgery in the future.

## Pre-operative assessment

Pre-operative assessment may be carried out when you have your consultation with the doctor or at a separate appointment with the nurse.

At this appointment you will be assessed to ensure you are fit enough for surgery.

- You will have measurements taken of your eye(s). The nurse will ask questions about your general health check your blood pressure and test your vision.
- You may be required to have an E.C.G. (electrocardiogram) and a blood sample taken.

The nurse or doctor will be happy to discuss any concerns you may have.

Please bring with you:

- A current list of any medication you take
- Your glasses and an up to date opticians prescription
- A urine sample
- If you are taking warfarin, please bring your yellow book to show the nurse.

## Pre-operative advice

- Please have a bath/shower and wash your hair the day before or on the morning of admission. Please wear clean, comfortable clothing as you will be wearing your own clothes in the operating theatre (unless having a general anaesthetic). The nurse will need to check your blood pressure so please wear short sleeves or loose fitting clothes where the sleeves can be rolled up easily.
  - **If having a local anaesthetic** you may have a light diet and take your usual medication. If you wish, you can bring your own snacks to eat after your operation.
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- **If having sedation or a general anaesthetic**, you should have no food for six hours prior to surgery and may have clear fluids (without milk, avoiding acidic drinks such as fruit squash, juices, fizzy drinks and alcohol) up to two hours pre-operatively. You may take your usual medication with some sips of water. Do not suck sweets or chew gum. Please bring an overnight bag in case you need to stop in.
  - If you are diabetic, or take Warfarin, Sinthrome, Clopidogrel, Prasugrel, Aspirin or Tamsulosin, (Flomax), please follow the advice given to you at pre-assessment.
  - Please bring any medications you may need to take whilst you are in hospital.
  - Remove any make-up, nail varnish and jewellery other than a wedding ring.
  - If you feel unwell prior to your operation e.g. you have a cough or cold, have (or have recently had) diarrhoea and vomiting, please contact the Eye Day Care Nurses for advice. Please find telephone numbers at the end of this leaflet. You will be offered an alternative date as soon as possible.
  - If your illness is more long term, your doctor will need to re-refer you when you are fit as your name may be removed from the waiting list.

### Your anaesthetic and operation

It is usual for most glaucoma operations to be carried out under a local anaesthetic, so you will be awake. Local anaesthetic drops and/or an injection around the eye is given to numb the eye.

You will be asked to lie flat and not to talk during the operation. If you are concerned about lying flat, please discuss this with the nurse at your pre-assessment. Your other eye will be covered and you may see bright lights and be aware of vague movement, but will not be able to make out any details.

You will be asked to **arrive** at 7.30am and your operation will take place between 8.30am and midday. For afternoon operating, you will be asked to **arrive** at 12.30pm and your operation will take place between 1.30pm and 5.00pm. **You may be in hospital for 4- 6 hours.**

Unfortunately, due to constraints on space in the departments, relatives or friends accompanying patients will be asked to wait in a separate area. If you have small children it is advisable to make alternative arrangements for their care. The nurses on duty will be able to estimate how long you will be in the department. If relatives wish, they can visit the hospital restaurants or return later to collect you.

Patients with special needs will be able to have their relative or carer with them in the Eye Day Care Unit at the Sisters discretion.

**Please use this space to make a note of any questions you may have:**

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## How soon after the operation can I go home?

When you return to the ward following a local anaesthetic you are usually ready to go home within one hour. You will be given some eye drops to start using the following day and an appointment for a check-up.

## After care advice for the day of operation

- You should rest at home until the following day.
- Take extra care when moving around the house, as one eye may be covered.
- Once the local anaesthetic has worn off, take your usual pain killers if required.
- You may read, watch television and undertake light activities around the house.

**If you feel unwell after your surgery, contact your G.P. for advice.**

## Will I have pain after the operation?

You may experience some discomfort or a gritty sensation in the eye. Please take your usual headache tablets to relieve this. If you notice sudden loss of vision, increasing discharge and/ or redness or have any other concerns, please contact the eye department for advice (see back page for contact details).

## What can I do at home?

You may resume light activities the day following your surgery. However, do not go swimming or engage in contact sports for six weeks. You can bend forwards but be aware of your surroundings so you do not bump your head.

## Vision after the operation

Your vision will be blurred after the operation. You will be using drops which dilate (enlarge) the pupil in the operated eye, which will affect the eye's ability to focus.

## How much time do I need off work?

You may need one-two weeks off work, although if your job is not physically demanding, you may be well enough to return after two to three days (on surgeon's advice)

## When can I drive/fly?

If your vision fulfils the DVLA criteria and you are not experiencing double vision you may drive. If you have a holiday away planned, it is advisable to wait until you have been seen at your post-operative check-up two to three weeks after surgery.

## Caring for your eye after surgery

**Do not rub your eye.**

## Applying your eye drops

1. Wash your hands.
  2. Gently pull down the lower eyelid.
  3. Look up place a drop/ointment just inside the lower eyelid.
  4. Gently close your eye. Wait approximately 30 second before you open your eye.
  5. Leave a gap of five minutes between drops if you are given more than one type.
  6. If you usually take **glaucoma eye drops** in your other eye, continue as before.
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### Chart for your medication after your operation

Use your drops in the operated eye as prescribed at the times ticked.  <b>Right eye / left eye</b>  (Delete as applicable)	Breakfast	Mid Morning	Lunch time	Mid Afternoon	Evening Meal	Bedtime	Duration of use
<b>Prednisolone 1%</b> (Pred Forte)							Use for    weeks
<b>Chloramphenicol 0.5%</b>							Use for    weeks
<b>Cyclopentolate 1%</b>							Use for    weeks

Please continue to use your drops until told otherwise at your outpatient appointment. If you think you are running out of eye drops, please get some more from your GP.

- **You will be seen the following day by the doctor to check the eye pressure. Please leave the dressing over your eye and bring your eye drops to the appointment.**

**Please note:** Some surgeons may give additional instructions on an individual basis

#### **Important**

If you experience any of the following within two weeks of having had surgery:

- Sudden loss of vision
- Pain unresolved by your normal pain killers
- Increasing discharge and/or redness
- Or you have any other concerns

## Further information and advice can be obtained from:

### Maidstone

Eye Day Care (Reception) ☎ 01622 226224  
Nurse Station ☎ 01622 226238

### Tunbridge Wells

Eye Clinic ☎ 01892 633877  
Answer Phone (Monday - Thursday 9.00am – 5.00pm only)

Eye Clinic ☎ 01892 633877  
Answer Phone (Friday 9.00am – 1.00pm only)

### Medway Eye Unit

☎ 01634 830000  
extension 5792

If your call goes through to the answer phone, leave a brief message with your name, hospital number, date of birth and your telephone number so we can call you back.

### Planned Care (for appointments)

☎ 01622 228218

Please ask for 'Eye' Inpatients

### Head and Neck Management Team

For any unresolved issues, please speak to one of our management team:

Alison Gamble	Lead Nurse	☎ 01622 226222
Kym Sullivan	General Manager	☎ 01622 226221
Anita Wybourne	Business Manager	☎ 01622 226287
Andrew Esling	Assistant Business Manager	☎ 01622 220248

### Please contact the Rapid Eye Clinic for emergencies only on:

#### Rapid Eye Clinic

☎ 01622 226228

Answer Phone (Monday -Friday 9.00am – 5.00pm only)

#### Maidstone Hospital

☎ 01622 729000

Evenings and weekends ask the switchboard operator to put you through to the Eye Doctor on call (Maidstone, Medway and Tunbridge Wells patients)

NHS 111

☎ 111

NHS Direct online

[www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)

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### Patient Advice and Liaison Service (PALS)

If you would like to raise any concerns, make comments and suggestions or require information on Trust services, you can contact **PALS**. Office opening times are Monday to Friday 10.00am to 4.00pm. Both offices offer a 24 hour answering machine. Messages will be responded to within one working day, so please do leave a contact number.

PALS Maidstone Hospital

☎ 01622 224960

PALS Tunbridge Wells

☎ 01892 632953

PALS Email

[mtwpals@nhs.net](mailto:mtwpals@nhs.net)

PALS SMS

☎ 07747 782317

PALS Maidstone Fax

☎ 01622 224843

PALS Tunbridge Wells Fax

☎ 01892 632954

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