

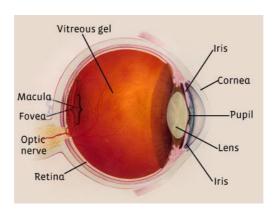
Glaucoma Surgery Trabeculectomy

Information for patients

Ophthalmology Services

What is a 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 drop every day for life.



When 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 45-60mins and you will have an eye pad and/or shield over the eye afterwards.

Consent:

You will be asked to sign a consent form when you see the surgeon on your admission to the department. It is important that you understand the risks and benefits of surgery and that you have realistic expectations regarding the outcome of surgery, especially if you have other eye diseases which may affect your vision. This leaflet is provided to help you make your own decision and forms part of the consent process.

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 to heal and settle down following surgery.

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 filed is maintained.

Trabeculectomy is a very successful operation which can save the sight of the eye. Following surgery, 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 very rare risk of infection.

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

Pre-operative assessment and Pre-admission Questionnaire

Please complete both sides of the Pre-admission Questionnaire before you arrive for your pre-operative assessment. This will be sent to you with your appointment letter. If you are having difficulty completing the questionnaire, please ask a relative or carer to help you. If you are unsure about some of the answers to the questions, please consult your GP's surgery for advice.

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

- 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.
- You will be taught how to put in eye drops.

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/or an up to date optician's prescription.
- 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 on the day before or 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 you are 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 <u>after</u> your operation.
- If you are having sedation or a general anaesthetic you should have no food for 6 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 2 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 stay in after your operation.
- If you are diabetic or take medication to reduce the risk of developing blood clots, i.e. Warfarin, Clopidogrel or Aspirin, please follow the advice given to you at your preassessment appointment.
- 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 GP will need to inform us by letter when you are fit as your name may have been removed from the waiting list. The pre-assessment nurse will inform you of the process if they find you are unfit for the operation and may refer you back to your GP for treatment.

Space for special instruction from pre-assessment nurse:	l
	l
	l
	l

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 still be aware of the sensation of touch or pressure but not pain.

You will be asked to lie flat and not to move during the operation. If you are concerned about lying flat, please discuss this with the nurse at your pre-assessment appointment.

Your other eye will be covered. You may see bright lights and be aware of movement, but will not be able to make out any details.

Admission times

If you are asked to arrive at 7.30am, your operation will take place between 8:30am and 12:30pm. For afternoon operating lists, you will be asked to arrive at 12.30pm and your operation will take place between 1.30pm and 5.30pm.

Discharge home

When you return to the ward from the operating theatre you will be offered refreshments and your blood pressure and pulse will be checked. The nurses will complete your discharge paperwork and dispense your eye drops for you to take home.

Some patient's prescriptions will be sent to our main pharmacy for dispensing and these can take longer to arrive. Please be patient whilst waiting for your medicines. It is difficult for staff to give accurate times when they will be available as the pharmacy is very busy. The nurses will check on the computer to see when your prescription is ready for collection.

Please be aware you may be in the department for up to 6 hours.

Visitors:

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 try to estimate how long you will be in the department but this can change due to circumstances beyond their control especially if there is an emergency which may take priority over elective surgery. If relatives wish, they can return later to collect you.

Patients with additional needs will be able to have their relative or carer stay with them in the Eye Day Care Unit at the discretion of the nurse-in-charge. If this applies to you please inform the nurse at your pre-assessment appointment so

arrangements can be made with the Eye Day Care Unit in advance.

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 unless we are waiting for Pharmacy to dispense your eye drops or the doctor to prescribe your medication. The nurse will explain when to start using your eye drops and an appointment for a check-up will be given or posted to you.

Please be aware, some patients may need to return the following day to see the doctor. The nurse will inform you when you are discharged.

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
- Leave the pad/shield on until the following day

If you feel generally unwell after your surgery, please contact your G.P. or out of hours service for advice. For an emergency relating to your eye(s) please see contact numbers on last page of leaflet.

Caring for your eye after surgery

- On the following day, remove the eye pad and/or plastic shield.
- If your eye requires, you may bathe your eye using a warm clean flannel or cotton make-up removal pads. Use warm, boiled water from the kettle. Do not use an eyebath or cotton wool.

Please commence your eye drops as prescribed.

DO NOT RUB YOUR EYE

Applying your eye drops

- 1. Wash your hands
- 2. Gently pull down the lower eyelid (you may find it easier to lay down to do this)
- 3. Look upwards place a drop/ointment just inside the lower eyelid
- 4. Gently close your eye wait approximately 30 seconds before you open your eye
- 5. Leave a gap of 5 minutes between drops if you have more than one medication to administer
- 6. If you usually take glaucoma eye drops continue as before, unless the surgeon has discontinued/given instructions to stop.

Use your drops in the operated eye as prescribed at the times ticked. RIGHT EYE / LEFT EYE (Delete as applicable)	Breakfast	Mid-morning	Lunch time	Mid- afternoon	Evening meal	Bedtime	Duration of use
DEXAMETHASONE 0.1% (Maxidex)							Use for weeks
CHLORAMPHENICOL 0.5%							Use for weeks
							Use for weeks

Chart for your medication after your operation

Please continue to use your drops until told otherwise at your post-operative appointment, which will be 2-4 weeks after surgery. If you think you are running out of eye drops or need more to complete the course, please obtain a further prescription from your G.P.

Please note that some surgeons may give additional advice on an individual basis.

Frequently asked questions - post operative care

What can I do at home?

Have a rest for the remainder of the day. You may resume your light activities the day following your surgery. Do not go swimming or engage in contact sports for 6 weeks. You may do a little light gardening but be aware of your surroundings i.e. overhanging branches and stakes etc. and wash your hands thoroughly to help prevent infection.

Can I bend forwards?

Please continue with your usual daily activities including bending. Just be aware of your surroundings or you may bump your head.

When can I wash my hair?

You can wash your hair, just be careful not to get shampoo or water in the eye.

Vision after the operation:

Your vision may not be clear immediately after the operation and your pupil may remain dilated (enlarged) for up to 72 hours. The surface of your eye needs to heal and until this occurs your sight may be blurred. You could also experience transient double vision and your eye may feel gritty for up to 3 weeks.

How much time do I need off work?

You may need up to a week off work, although if your job is not physically demanding, you may be well enough to return after 2-3 days.

When can I drive/ fly?

If your vision fulfils the D.V.L.A. criteria and you are not experiencing double vision you may drive. As a general rule, it is advisable to avoid driving for the first week following surgery.

Please do not drive yourself to your first check-up appointment in case you need dilating drops.

If you have a holiday planned it is advisable to wait until you have had your 2-4-week postoperative check-up to make sure all is well before your holiday or taking a flight.

IMPORTANT CONTACT NUMBERS

If you experience any of the following within 2 weeks of having surgery:

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

Please contact the Rapid Eye Clinic for emergencies only on:

Rapid Eye Clinic Answer Phone Mon-Fri 9-5 only Maidstone Hospital **2** 01622 226228

Eye Day Care Unit

Maidstone Hospital 226238

Nurse's Station (routine enquiries)

Eye Clinic 2 01892 633877

Mon-Thurs. 9-5 only Pembury Hospital Friday 9-1pm only

1 01892 633877

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.

Further information and advice can be obtained from:

Clinical Administration Unit (for appointments) \$\alpha\$ 01622 228218

NHS 111

NHS Choices online

** 111

www.nhs.uk

For Cataract Information Video log on to:

<u>www.mtw.nhs.uk/service/ophthalmology/about-the-ophthalmology-service/cataract-surgery-at-maidstone/</u>

Or scan this code:



MTW NHS Trust is committed to making its patient information accessible in a range of languages and formats. If you need this leaflet in another language or format please ask one of your clinical care team or the Patient Advice and Liaison Service (PALS). We will do our best to arrange this.

Maidstone and Tunbridge Wells NHS Trust welcomes all forms of feedback from our service users. If the standard of service you have received from the Trust does not meet your expectations, we want to hear from you. Please speak with the ward manager or the nurse in charge in the first instance, or you can contact the **Patient Advice and Liaison Service (PALS)** on:

Telephone: \$\alpha\$ 01622 224960 or \$\alpha\$ 01892 632953

Email: mtw-tr.palsoffice@nhs.net

or visit their office at either Maidstone or Tunbridge Wells Hospital between 9.00am and 5.00pm, Monday to Friday.

You can be confident that your care will not be affected by highlighting any areas of concern or making a complaint. The Trust will retain a record of your contact, which is held separately to any medical records. If you are acting on behalf of a patient, we may need to obtain the patient's consent in order to protect patient confidentiality. More information on PALS or making a complaint can be found on the Trust's website: www.mtw.nhs.uk or pick up a leaflet from main reception.

Issue date: December 2023 Review date: December 2027

Database reference: RWF-HNK-OPH-LEA-PAT-35 © MTW NHS Trust

Disclaimer: Printed copies of this document may not be the most recent version.

The master copy is held on Q-Pulse Document Management System

This copy – REV1.0