Patient Information:

Vitrectomy, Scleral Buckle & Air Fluid Exchange

Overview
A pars plana vitrectomy is a surgical technique used to extract the vitreous from the eye, and in place of the vitreous, a solution is placed inside the eye. A sclera buckle is a silicone band that is placed around the eye, pushing the sclera (outside white part of the eye) closer to the tear that caused the detachment. An air-fluid exchange is used to place a gas bubble inside the eye, which holds the retina in place.

A combination of vitrectomy, sclera buckle and air-fluid exchange is used for retinal detachments that have tears in several spots or for large tears in a single spot. The vitrectomy is used to fully detach the vitreous from the retina, preventing future tears from occurring. A sclera buckle relaxes the pull (traction) on the retina, allowing the retinal tear to settle against the wall of the eye. The bubble has two purposes; it seals the tear causing the retinal detachment, and it pushes the area of detached retina against the underlying tissue, allowing it to become reattached.

It takes about two weeks for the tear to seal and the retina to become reattached and the doctor may have you position your head certain ways for the whole 2 week period. It is important to follow these directions to ensure that the retina becomes fully attached.

What are the risks?
Vitrectomy with Sclera Buckle is an outpatient procedure and is considered intra-ocular vitreoretinal surgery. The major risks of this type of retinal surgery include:
1. Formation of cataract in operated eye
2. Double vision
3. Change in refraction (eyeglasses prescription)
4. Infection inside the operated eye
5. Glaucoma or temporary increase in eye pressure
6. Retinal detachment in the operated eye

IMPORTANT: Do not go above 2,000 feet or serious and possibly irreparable damage may occur to your eye.

How is it done?
You will check into the hospital at the specified time (1.5-2 hours before surgery time, and depends on what the hospital says). After being prepped for surgery, you will be taken into the surgery bay and in most cases, will be placed under twilight or general anesthesia. Depending on the extent of the surgery, it can last anywhere from 1-2 hours. No overnight stay in the hospital is necessary and you may go home afterwards.

What can I expect as my eye heals?
Even though retinal surgery is a routine procedure, it is still invasive. It is common to experience one or more of the following:
1. Lid swelling and/or droopy lid
2. Eye redness
3. Tearing (a slight amount of blood in the tears is normal, especially during the first week)
4. Some pain or dull aching due to the buckle
5. Foreign body sensation or a feeling like something is rubbing on the outside of the eye. This is usually due to the sutures on the outside of the eye and should dissolve after 2 weeks.

When should I call my Doctor if I think I am having a problem?
Infection or retinal detachments are rare after retinal surgery, however you should call our office IMMEDIATELY if you experience one or more of the following symptoms:
1. Severe pain within the eye
2. Nausea or vomitting
3. Sudden, large decrease in vision
4. Pus-like discharge
5. New onset of flashes, floaters and/or a black curtain coming across your vision

Do I need to take any special care or medications after my retinal surgery?
Yes. It is important that you position your head as directed. Do not engage in any strenuous activity, jogging or other exercise, or roller-coasters after retinal surgery. Your doctor will inform you when normal activities can be resumed. It is important that you wait 5 minutes between drops.

My post surgery instructions
- Important: Position your head as directed
- Important: Do not go above 2,000 feet
- Take the antibiotic eye drop (beige top) in the operated eye; 1 drop, 4 times/day until the bottle is gone.
- Take prednisolone eye drop (pink top) in the operated eye: 1 drop, 4 times/day until the bottle is gone.
- Take antibiotic ointment (tube); small amount in lower lid, 2 time/day until the tube is empty.
- If prescribed, take atropine (red top) eye drop in the operated eye; 1 drop, 2 times/day until the doctor tells you to discontinue.
- Showering is ok, however avoid getting water in the eye for two weeks.