

Macular hole

Information for patients

If you need this leaflet in a different language or accessible format please speak to a member of staff who can arrange it for you.

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Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil, vă rog să discutați cu un membru al personalului să se ocupe de acest lucru pentru dumneavoastră

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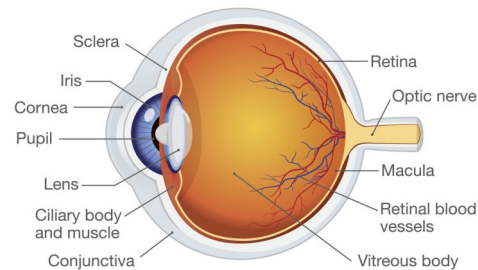
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What is the macula?

The macula is the name given to a sensitive part of the retina. The retina is like a photographic film at the back of the eye that captures the image. The macula is the part of the retina that enables us to make out fine details and to see colours.

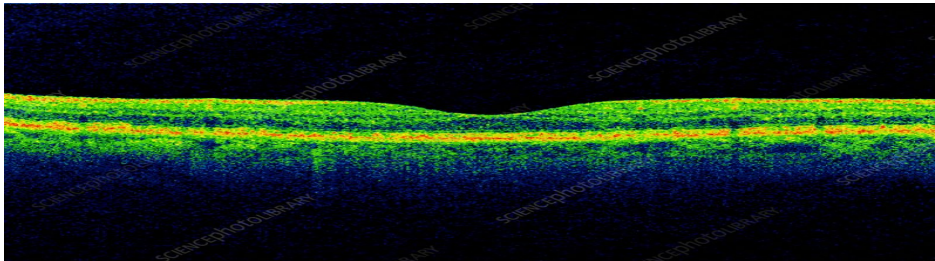
Human Eye Anatomy



What is a macular hole?

A macula hole is as it sounds 'a hole in the macula'. This is caused by a separation or loss of cells in the macula. You will have a scan taken of the back of your eye called Optical Coherence Tomography (OCT). This provides very detailed pictures of the retina and macula, that helps your doctor to diagnose and manage your condition. The OCT uses light waves to generate a cross-sectional image of your eye and make a map of the retina at the back of your eye, to show up any damaged areas.

Normal macula on an OCT scan:



Will I have to get my glasses changed?

Most people will need to change their spectacle prescription at some point after surgery, especially if cataract surgery was performed as part of the macular hole repair surgery. This would normally be at about 3-4 months following the operation, after the gas bubble has gone.

For further advice, please contact the eye clinic between 9am-5pm, Monday to Friday on 01744 646136/37 to speak to a nurse.

What will my vision be like after the operation?

Your vision will be very blurred for a few weeks following the operation, whilst the gas/air bubble is in your eye. The gas/air bubble will gradually get absorbed, which will appear as a wobbly black ring in your line of vision. The bubble will move as you move and gradually get smaller or break into smaller bubbles, and eventually disappear. You may or may not notice a significant improvement in your vision after the operation. The main aim of the operation is to prevent your vision from getting worse. Most people will notice an improvement, but it may take several months before this happens.

Am I able to drive after macular hole surgery?

Your vision will be blurred following surgery so you should not drive until your vision improves and meets the standard of vision for driving.

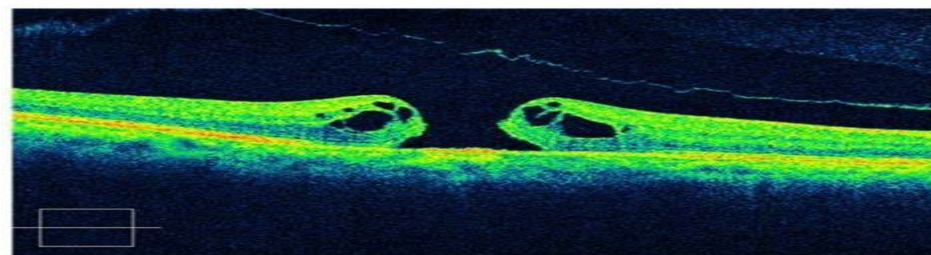
Am I able to travel after macular hole surgery?

You must not fly or travel to high altitude on land whilst the gas bubble is still in your eye (up to 12 weeks). If ignored, the bubble will expand at altitude, causing very high pressure resulting in severe pain and permanent loss of vision. In addition, if you need a general anaesthetic whilst gas is in your eye, then it is vital that you tell the anaesthetist this fact so they can avoid certain anaesthetic agents (nitrous oxide) which can cause similar expansion of the bubble. None of these exclusions apply once the gas has been fully absorbed. You will notice the bubble shrinking and be aware of when it has completely gone.

How much time will I need off work?

Most people will need two weeks off work. However, it depends on the type of work you do and the speed of recovery. This should be discussed with your surgeon.

Macula hole on an OCT scan:



Why does it happen?

A macula hole is caused by an ageing process in the eye and is most commonly found in patients aged between 60-75 years. It is more common in females. The eye contains a clear jelly like substance called 'vitreous humour' which is attached, in parts to the retina. Because of ageing, the vitreous humour shrinks and this can pull on thin areas of the retina in the macula area and cause a hole to appear.

What is the treatment & how successful is it?

A macular hole can often be repaired by an operation called a vitrectomy, peel and gas. If the hole has been present for less than a year, the operation will be successful in closing the hole in about 90% of cases. In a minority of patients the hole does not close despite surgery and the central vision can continue to deteriorate; however, a second operation can still be successful in closing the hole.

It is important to understand that return to completely normal vision is not usually possible and it can take up to 6 months (sometimes longer) for maximum recovery in sight.

What would happen if I did not have my macular hole treated?

If untreated, there is a small chance that some macular holes can close spontaneously, with improvement in vision. In the vast majority of patients, the central vision will gradually get worse to a level where the patient is unable to read even the largest print on an eye test chart. The condition does not affect the peripheral vision, and so patients will not go completely blind from this condition.

What does the operation involve?

You could have your operation under a general anaesthetic (while you are asleep) or a local anaesthetic (while you are awake). Your eye doctor will discuss this with you. Your surgeon makes three very small incisions through the sclera (the white part of your eye) and using very fine instruments, removes the vitreous jelly and fill the space with a bubble of gas. In addition, if you have an early cataract (changes in the lens of your eye) the doctor will often remove this as part of the same procedure. A special dye is then used to stain the scar tissue and the membrane is then peeled off and removed.

What happens after the operation?

Following your operation, you will most likely be required to adopt a 'face down' position, which we call posturing. This position helps the bubble float towards the macular hole and flatten it. Posturing is an extremely important part of your treatment. You will need to posture for between 1-14 days, or until your surgeon advises you to stop.

- Your eye will be mildly gritty, sensitive, red and swollen.
- You will be prescribed a combination of eye drops to use when you go home. These will help to prevent infection, reduce inflammation and rest your eye following surgery.
- You will be reviewed the day after your surgery where the doctor will examine you and discuss your progress.

Will I have to take any drops or medication after the operation?

Three types of drops are usually prescribed after surgery: an antibiotic, a steroid and a pupil-dilating agent.

What are the risks of surgery?

The important potential risks are:

- A cataract will develop in virtually everybody who undergoes macular hole surgery. Infection and bleeding in the eye can occur. The risk of these occurring is very low but they are serious if they occur and can result in a permanent, severe visual loss.
- Inflammation in the eye, which is treated with eye drops.
- Retinal detachment could occur if tears develop on the retina. If this happens, the doctor will laser the tears and put a bubble of gas into the eye.
- Raised pressure can occur in your eye. It is usually a temporary problem occurring the first few days after surgery. In most cases this can be successfully treated with eye drops or tablets.
- A very small proportion of patients might need a surgical procedure to treat high pressure following surgery. Low pressure can also occur in the eye after surgery. Depending on the cause of the low pressure, some patients might require surgery to correct the problem.
- Failure of surgery/need for further surgery. In some cases, more than one surgery is required.

When will I need to be seen again after the surgery?

Post-operative review is usually performed the next day (or within a few days) after surgery; then 10-14 days later and, provided all is well, about 3 months later.