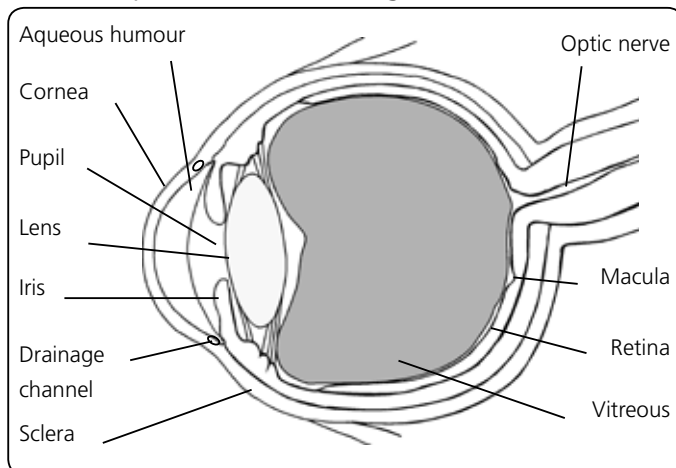


Trabeculectomy

What is a Trabeculectomy?

It is an operation to treat glaucoma.



Glaucoma is an eye condition which causes gradual loss of vision due to damage of the optic nerve at the back of the eye. Usually this happens because of a raised pressure within the eye. Reducing the pressure is the only proven method of controlling glaucoma. Normally daily eye drop treatment is effective but sometimes laser treatment or an operation (trabeculectomy) is needed.

The purpose of the operation is to prevent further damage to the optic nerve at the back of the eye. A drainage channel is made to allow the fluid in the front part of the eye (aqueous humour) to bypass the normal channels which are not working properly.

The fluid passes through a small incision in the upper part of the thick white coat of the eye (the sclera). It can be seen as a small whitish swelling underneath the upper eyelid (known as 'a bleb'). The fluid is then absorbed and returns to the bloodstream.

Success rate:

It is an operation which aims to save the remaining sight in the eye.

Over the first 1- 2 years following surgery approximately 80% of people will have good eye pressure without additional drops. The success rate decreases with time following the surgery with an increasing proportion of people needing to restart glaucoma drops or undergo further surgery in order to control their eye pressure. Some people are at higher risk of having a complication or the surgery failing compared to others. If you are in this group you will be informed by the glaucoma clinic staff.

Risks

- **Decreased vision:** vision is reduced in all patients immediately following surgery. In most patients the vision will return to normal within three months, although this may require a change in glasses. A small proportion of patients feel their vision is permanently impaired following trabeculectomy surgery. This is usually mild but can be severe, especially in patients who have very advanced glaucoma. The risk of visual impairment following trabeculectomy surgery must be balanced against the risk of visual loss from glaucoma.
- **Bleeding within the eye:** there is a small risk of bleeding in the eye at the time of the operation. If this happens it will gradually clear.
- **Excessive drainage of fluid:** there is also a small risk of over drainage of fluid which could make the pressure too low.

This usually settles but may need further treatment or an operation.

- **Infection in the eye:** this is very rare but may cause permanent loss of vision.
- **Excessive pressure in the eye:** this is rare after the operation but may occur due to poor drainage of the fluid or through an abnormal flow of fluid.

Later after the operation:

- There is an increased risk of a cataract forming after trabeculectomy. Up to 50% of patients will develop worsening vision due to cataract. If the cataract is severe enough, further surgery may be required to improve the vision.
- **Scar formation:** your body may heal too well and this may cause a scar to form over the drainage site ('bleb'). This will cause the operation to fail and the pressure will rise again within the eye. Anti-scarring medication Mitomycin C (MMC) will be used during the operation to reduce this risk.
- **Infection:** the drainage 'bleb' increases the risk of infection within the eye. If you develop a red, painful eye please contact the Eye Unit (*see page 3*).
- **Droopy eyelid:** a slight droop of the upper eyelid is common.

Before the Operation

You will be asked to attend a pre-operative assessment clinic to discuss your general health and to make sure you have all the information you need about the operation.

Patients who are taking a tablet to thin the blood such as warfarin, clopidogrel or aspirin are given special instructions before the operation, so it is important that you bring all your tablets with you in their original boxes.

The Day of the Operation

You will be asked to arrive at our Day Case Unit at either 8am for morning operations or 12.45pm for afternoon operations. You will be in our Unit for about 4-5 hours.

The operation is normally carried out under a local anaesthetic and may take 40-50 minutes.

After the Operation

You will need to rest at home after the operation. It is important that transport is arranged and that you have a relative or carer with you overnight. You will need to return to the Eye department the next day so transport for this visit, which may take up to an hour, is also important. Further appointments will be necessary in the Out Patients Department.

You will be given eye drops to use following the operation. These may include a drop to reduce inflammation, one drop to prevent infection and one drop to dilate the pupil of your eye. Please continue these drops until you are advised in the clinic to stop them.

You should stop your normal glaucoma eyedrops for the eye which has had the operation but continue them to the other eye if needed.

You will also be given a plastic shield to wear over your eye at night for 1 week.

The vision will be blurred after the operation. This may take several weeks to settle. The eye may also be sore, watery and gritty for a few days after the operation. A pain-killing tablet such as paracetamol should help to keep the eye comfortable. Please do not take aspirin as

a painkiller on the day of your operation as it can increase the risk of bleeding in your eye.

If you have severe pain in your eye you should contact the Triage Team or Otter Ward on the telephone numbers on page 8 of the leaflet.

Please avoid heavy lifting, gardening and active sports for at least four weeks after the operation. Your eye doctor will advise you about driving and answer any other questions you may have.

We hope this leaflet has been helpful. If you have any comments about the leaflet or questions about the operation please ask our staff.

How to contact the eye department after surgery

In regular hours.

For post surgery queries or problems phone the:

Eye Triage Team 01392 402399

Monday - Friday between 09:00 to 12:30 and 14:00 to 16:30, this line may be busy at peak times so you may need to call back later.

Alternatively you can leave a **call back request** with **Parkerswell ward staff on 01392 406013**. Monday - Friday between 07:30 and 17:00.

Outside of normal eye department working hours.

Between 17:00-07:30 for **emergencies and urgent queries only** please call **Otter ward on 01392 402807**. Please be aware that Otter ward is an inpatient area and they will take your phone number and call at a point when the patient workload is safe to do so.

If you have a non-urgent specialist query the staff may need to take your details for a **call back request** by the eye triage team in normal working hours.

Useful websites/addresses

International Glaucoma Association (IGA)

108, Warner Road, London SE5 9HQ
www.iga.org.uk

The Trust cannot accept any responsibility for the accuracy of the information given if the leaflet is not used by RD&E staff undertaking procedures at the RD&E hospitals.

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