

→ Glaucoma

Glaucoma is a chronic condition characterized by typical changes in the optic nerve and visual field. In many cases, high eye pressure is responsible. The goal of surgery is to improve drainage of fluid within the eye to give better pressure.

Glaucoma surgery has been performed for over 50 years with constant improvements in operation technique and postoperative care. The goal of the operation is to lower the eye pressure in order to slow the progression of the disease (damage to optic nerve and visual field). The operation is performed in local anesthetic and it is strongly advised to remove bloodthinning medications before the operation. This must be coordinated with your primary doctor (fastlege) at least one week before the operation.

If a XEN-device is planned, you will get specific information from your doctor.

DAY OF THE OPERATION

- Be bathed without jewelry
- Do not use make-up or face cream
- Meet promptly at the time of your appointment
- *Patienthotell* can be contacted beforehand if you require to overnight at the hospital

Preparation, operation and post-operative recovery take time, so plan to use an entire day. You may wish to bring something to eat.

Local anesthetic is used. The operated eye will be covered with an eye shield, and this should remain covering your eye until your appointment on the following day.

- If your eye is painful after surgery, you may take painkillers (for example, Paracetamol)
- You must return to the hospital the day after surgery for an eye exam

THE OPERATION

The operation often takes about one hour to perform. There are many sutures both within and under the eye's mucous membranes. The external sutures will dissolve by themselves and do not need to be removed. The sutures under the mucous membrane influence postoperative pressure, and therefore may or may not be removed postoperatively.

During the operation, a special medicine (Mitomycin), so-called "anti-metabolite", is used to decrease the chance that the operation area heals too quickly. Usage of this medicine is well-established and used around the world and is of great benefit to the operation's effect and durability.

AFTER THE OPERATION

After the operation, the eye is covered with an ointment and a shield. The shield should be used at night for the first 7-10 days. It is common for the eye to be sore and red in the early post-operative period. It is not uncommon to experience tearing and sticking pain the first night. The doctor will remove the eye shield during the examination on the following day.

You will be prescribed eye drops that protect against infection and help to calm the eye down. These drops are used often in the beginning, but reduced over 2-3 months.

- Do not remove the eye shield or rub your eye. Contact the eye department if you lose vision, have strong pain or lose parts of your visual field.
- You do not need to use any eye drops after the operation until after the doctor has examined you on the following day.
- You will stop using "pressure-lowering" eye drops on the operated eye, but the other eye will use the same medicine as before.

- Remember to wash your hands before using eye drops.
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- Avoid heavy lifting and hard physical activity for 3-4 weeks.
- Avoid swimming for 4 weeks.
- Avoid getting soap or foreign material in your eye.
- Wash the eye by closing it and drying from your temple to the inner corner with a clean cloth.
- You should not drive to appointments unless previously agreed upon with the eye doctor.

YOU MAY:

- Bend over, but not for extended periods
- Watch television
- Read
- Do handwork
- Go for walks

FOLLOW-UP

After the operation, the eye's pressure and your vision may vary a great deal for many weeks. The artificial opening that is created during the operation has a tendency to heal/close after surgery and that is why there are many postoperative follow-up examinations during the first 2-3 months. It may be necessary with small procedures after the first surgery to give better filtration.

In some cases the doctor may remove sutures to lower the. In other cases, injection of an antimetabolite (5-Fluorouracil or Mitomycin) under the eye's mucous membrane may be required. This treatment can be repeated many times during the first post-operative months. This medicine is used in many of the country's large eye departments, but is not made specifically for eye treatment – the usage is therefore called "off-label". That means the medicine is used in an area that it was not originally conceived of or approved for. There is, however, many years of national and international experience of using this medicine in these situations.

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