

TO PROVIDE **THE VERY BEST CARE** FOR EACH PATIENT ON EVERY OCCASION

Vitreoretinal surgery and posturing Post-operative advice

An information guide



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Vitreoretinal surgery and posturing

Post-operative advice

Following your operation, you have been advised that you need to posture. This leaflet explains posturing to you and offers other useful advice and information. **Your posture is**



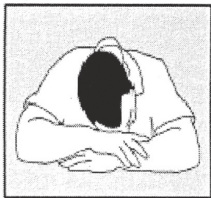
Sitting upright
head tilted
to right



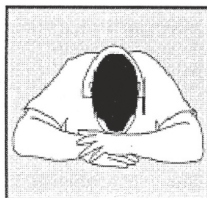
Sitting upright



Sitting upright
head tilted
to left



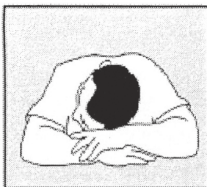
Face down
right cheek
to pillow



Face down



Face down
left cheek
to pillow



Left side



Right side

What is posturing?

Posturing is the term we use to describe the position that you need to adopt following your operation.

Why must I posture?

You have been advised to posture after your operation because a bubble of gas, air or silicone oil was injected into your eye during the operation, to assist in keeping your retina flat. By holding your head in a certain position the bubble will float towards the problem area of your eye. This is achieved by the bubble floating up and supporting the retina from the inside of your eye.

How do I posture?

There are a number of positions that may be used, but only one will apply to you. This is indicated on the first page of this information leaflet. It will have been discussed and demonstrated to you before you left the hospital. Posturing equipment is sometimes available to help you maintain your position. The nursing staff will discuss this with you.

How long must I posture for?

Posturing is an extremely important part of your treatment. In order for you to have the best possible outcome, your posturing instructions need to be followed, and the posturing position you have been given should be adopted for ____ days.

A break from posturing of _____ minutes in every hour is allowed.

Whilst posturing you may move about, but you need to maintain your head in the correct position. It is important that you take your allocated breaks from posturing in order to relieve pressure on your skin. Short walks and leg exercises are important and will promote good circulation. Try altering your body position from lying to sitting whilst maintaining your posturing position.

Never lie on your back or have your head tilted backwards for longer than the time it takes to put your eye drops in.

Feedback from patients who have postured suggests that you may feel isolated and a 'bit down'. The nursing staff are there to reassure you that these feelings are normal. Please speak to your named nurse, or contact the staff at the hospital, if you are experiencing feelings of isolation or depression.

Whilst you are posturing, we advise you to follow a light diet with plenty of drinks and fruit/vegetables. Due to the inactivity you may suffer from constipation and dehydration. If this is the case, please contact your GP for treatment and advice. If you are allowed a break from posturing use this time to eat and drink. It is useful to keep your head down leaning forward and bending at the waist when eating, as this will assist you in swallowing.

What happens to the gas/oil in my eye?

If a gas bubble has been used this will gradually be absorbed and replaced by the natural fluids produced in the eye. You may be able to see the bubble, 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, which in turn will be totally absorbed. The time this takes varies from approximately 1 to 4

weeks. This depends on the type of gas/oil used. Your vision will be poor until the gas bubble is absorbed.

You must not travel in an aeroplane until the gas bubble has completely absorbed. This is due to the possible risk of expansion of the bubble in the eye, owing to the change in atmospheric pressure. If you require a general anaesthetic whilst the gas bubble is still in your eye, then you must inform the anaesthetist.

You may notice a reflection of light from the gas bubble on a bright day. You may feel more comfortable wearing tinted sunglasses.

If silicone oil is used, this will usually require surgical removal later. You may travel in an aeroplane if you have a silicone bubble, as this does not expand.

Having gas in your eye can lead to the formation of a cataract. If this does occur, you will require further surgery.

What else do I need to know?

Following the operation you may:

Find that your neck muscles ache and become stiff. This is due to the unusual position you have to adopt. A warm bath or gentle massage can be useful in relieving muscle discomfort.

Your eye may:

- be red for between 2 and 4 weeks, and feel uncomfortable and gritty for 3-5 days. Your vision will also be blurred for 2 to 3 weeks following your operation
- a mild painkiller, for example paracetamol, may help to relieve your muscle stiffness and eye discomfort. If you are already taking painkillers for a different condition continue with these but **do not take both.**

You should

- ask your eye doctor, either at your clinic appointment or before you leave hospital, when you can return to work, and return to driving, as this will depend on your vision
- if you are advised to return to work in 7 days, then you can cover your sickness absence with a self-certification form, available from the General Office on all hospital sites. The ward will issue you with a medical certificate to cover your anticipated sickness or until your follow-up appointment (where relevant). **Please ask a member of staff for this certificate before you are discharged home**
- if required bathe the operated eye(s) with cotton wool and water that has been boiled and allowed to cool
- the doctors and nurses will tell you about your eye medication, including how often it needs to be used and for how long
- a nurse will be available to show you how to put your eye drops in safely
- always wash your hands before and after you put eye drops in. This is to prevent infection
- avoid touching any part of your eye with the dropper, to avoid contamination of the drops or injury to the eye. Make sure the dropper lid is placed on a clean surface

- hold your head back, with the dropper bottle in one hand and, with the fingers of the other hand, gently pull the lower lid to form a gap
- squeeze the dropper bottle so that one drop goes into the gap between the eyeball and the lower eyelid. You may find that the drops sting, this is normal
- close your eye gently and keep it closed for a slow count of 60. This will help the drops work
- wipe away any liquid that did not go into the eye with a clean tissue
- if you are having more than one type of drop, they will be labelled A, B, C etc. This is the order they should be used in. Leave it at least 3 minutes between each drop
- replace bottle lid immediately after use and store the drops as instructed
- keep the eye clean. If the lids are sticky, clean them using cotton wool balls and cooled boiled water
- if you lose or run out of your drops before the end of your treatment, get more from your general practitioner. Once opened, the drops can be kept for 4 weeks and then **MUST** be thrown away
- it is important that you continue to use your eye drops as prescribed. If you are posturing face down, you should put drops in by turning your head to the side and then promptly resume your facedown position again. You may find it useful to purchase a drop aid from your local chemist, which can help you when putting in your eye drops.

You should not:

- swim for 4 weeks. This is to reduce the risk of infection
- participate in contact sports for 4 weeks. This is to reduce the risk of accidents to the operated eye
- use eye make-up for 4 weeks, or until all redness has gone from your eye.

You may

- bath, shower, shave and wash your hair, but do avoid getting soap into your eye and keep your head in the correct position. Never put your head right back
- resume normal household activities and sexual activities once you feel able and are no longer required to posture. Light housework is possible as long as you keep your head in the correct position. Avoid vacuuming and gardening and accept any offers of help from family and friends
- go out with friends and family once you feel well enough, but again, keep your head in the correct position and maintain the posturing regime
- feel bored. Try reading, listening to music, playing board games or watching television using an angled mirror
- find it more difficult to sleep. Try not to sleep during the day and try and alternate your position from lying in bed to sitting in a chair. Warm drinks and a variety of pillows may help you get a more restful night
- your eyelids may appear swollen during the posturing period. This is normal and will subside in time. If you develop nausea, vomiting, sudden loss of vision or a reaction to your eye drops, please contact the ward staff

- if you have loaned any posturing equipment/pillows, you will be required to sign the loan book before leaving the hospital and will be advised of the return date. It is very important that the equipment/pillows are returned on time for other patients to use
- please use the space provided to write any questions you have, and bring this to your outpatient appointment.

Contact Details

If you are experiencing any symptoms, or need to speak with a member of staff, then please contact us on the following numbers.

The Royal Oldham Hospital

A&E department – 0161 627 8923 – Friday 5pm till Monday 9am

Oldham Integrated Care Centre – Eye Clinic – 0161 621 3813 –
Monday – Friday 09.30-16.30.

Rochdale Infirmary, Rochdale

Eye Clinic – 01706 901757

Monday, Tuesday, Wednesday and Thursday between 9am and
5pm

Friday 9am and 12.30pm

Eye Ward – 01706 901765

Monday to Friday between 8am and 8pm
(answer machine after 8pm)

Urgent Care Centre

After 8pm Monday to Friday

Friday 8pm to Monday 9am

Fairfield Hospital, Bury

Eye Ward and Eye Clinic

as per Rochdale Infirmary numbers.

Accident & Emergency – 0161 778 2600

After 8pm Monday to Friday

Friday 8pm until Monday 8am

Notes

If English is not your first language and you need help, please contact the Ethnic Health Team on 0161 627 8770

اگر انگریز آپ کی مادری زبان نہیں ہے اور آپ بات چیت کرنے میں دقت محسوس کرتے ہیں، تو ہم آپ کو مدد کرنے کے لیے آپ سے رابطہ کر سکتے ہیں۔ ہمارے نمبر پر رابطہ کریں۔

0161 627 8770

若英語並非閣下的第一語言和需要幫忙的話，請致電 0161 627 8770 聯絡少數民族健康組。

ইংরেজী যদি আপনার মাতৃভাষা না হয় অথবা ইংরেজী বলতে ও বুঝতে আপনার অসুবিধা হয় তাহলে এথনিক হেলথ টীমের সাথে নীচের টেলিফোন নাম্বারে যোগাযোগ করুন।

0161 627 8770

જો અંગ્રેજી આપની પહેલી ભાષા ન હોય અને આપને મદદની જરૂર હોય તો મહેરબાની કરીને અથનિક હેલ્થ ટીમનો ઉપર-ઉપર નંબર પર સંપર્ક કરો

Jeżeli angielski nie jest twoim pierwszym językiem i potrzebujesz pomocy proszę skontaktować się z załogą Ethnic Health pod numerem telefonu 0161 627 8770

For general enquiries please contact the Patient Advice and Liaison Service (PALS) on 0161 604 5897

For enquiries regarding clinic appointments, clinical care and treatment please contact 0161 624 0420 and the Switchboard Operator will put you through to the correct department / service

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