

Local anaesthesia for your eye operation

A short guide for patients and families.

This is for anyone expecting to have an eye operation with a local anaesthetic. It does not give detailed information about specific eye operations but suggests where you can find out more.

Throughout this booklet we use symbols



■ To Highlight your option or choices



■ To Highlight where you may want to take a particular action



■ To point you to more information

Introduction

You and your doctor have agreed that you need an operation on your eye. A local anaesthetic has been recommended. Some people find it really useful to know as much as possible about what is going to happen in an operation. For others it's not so important. You will be able to judge for yourself how much you want to know. Eye operations can be done using either a local anaesthetic or a general anaesthetic. Most eye operations are carried out using local anaesthetic.

This leaflet is about the use of local anaesthetic during your eye operation. It will explain what a local anaesthetic is, how it differs from a general anaesthetic and how it works. It also gives a step by step guide to how the local anaesthetic will be given and monitored during your operation.

Anaesthesia – a painless state brought about by different drugs. 'Anaesthesia' means 'loss of sensation'.

Anaesthetics – the drugs (gases, drops and injections) that are used to start and maintain anaesthesia.

Anaesthetists – doctors who have had specialist training in anaesthesia, who look after children and adults before, during and after surgery.

Local anaesthesia

A local anaesthetic is a drug(s) which stops you feeling pain. They can be given as eye drops and/ or injections. Once you have been given the local anaesthetic you should not be able to feel anything around your eye. You will stay awake and be aware of what is happening but you will not feel any pain.

What is the difference between local and general anaesthesia?

With a general anaesthetic you are in a state of controlled unconsciousness during the operation and will not be aware of what is happening.

What are the advantages of local anaesthesia?

Local anaesthesia is useful because it works really well. It also offers pain relief after the operation. It has fewer risks and side effects than a general anaesthetic. This is because it doesn't affect any other part of your body, such as your breathing or your heart. People recover

more quickly following surgery under local anaesthetic and can go home on the same day. You can continue to take any prescribed medicine you are on and may be able to eat and drink as normal. Your hospital will advise you about this.



I would really prefer a general anaesthetic, do I have a choice?

Yes. Nothing will happen to you until you understand and agree with what has been planned for you.

If you do have a preference for a general anaesthetic, you should discuss this with your anaesthetist or surgeon. You may need to wait longer for your operation. Some hospitals may not provide an operation under general anaesthetic if it is normally carried out using a local.

How is a local anaesthetic given?

Your anaesthetist or eye surgeon will give you your local anaesthetic. Eye drops are used first which make the area around the eye numb. Sometimes local anaesthetic cream may be placed under your lower eyelid to numb the skin. Once it is numb a very fine needle or tube is used to inject more local anaesthetic around the eye. This is to make sure that you don't feel anything and to stop the eye from moving during the operation .

Are there any complications of local anaesthesia?

Eye surgery under local anaesthesia is very safe. Sometimes the tissues around the eye can swell after the injection of the local anaesthetic drug or because of a small amount of bleeding following the injection. Bruising around the eye may occur. This type of swelling usually settles within a day or two. If bleeding is severe, your operation may be postponed.

Serious complications are very rare.



Although rare, serious complications such as damage to the eye, blood vessels or muscles or spread of local anaesthetic drugs to other areas of the body are known to occur. These complications are

difficult to predict. The anaesthetist will be able to go into detail about the rare complications of local anaesthesia, should you wish to know about them.

Is there anything that makes people unsuitable for a local anaesthetic to the eye?

Yes. You will need to be able:

Q to lie flat and still for between 45 minutes and an hour

Q to follow simple instructions

Q Local anaesthetic is not normally recommended if you:

Q cannot lie flat

Q have an illness (e.g Parkinson's) that makes being still difficult

Q have a cough you cannot control

Q will have difficulty understanding what is being said

Q are claustrophobic

Q have a known allergy to local anaesthetic drugs

Q have severe hearing difficulties



If any of these points applies to you it is important that you talk or write to your GP, surgeon or anaesthetist before the day of your operation.

Before the operation


Health Check: The Pre-Assessment Clinic

Once the operation date is planned, your health check is essential. You may be asked to attend a pre-operative assessment clinic. Nurses usually conduct the pre-assessment clinic with a doctor available for immediate advice. Your health is checked and a full medical history is taken. If you need any tests these will be arranged at this clinic.

You will be asked about:

- Q general health and fitness
 - Q medical problems
 - Q heart disease
 - Q lung disease
 - Q pain in the chest during exercise or at rest
 - Q diabetes
 - Q your current medication
 - Q allergies
 - Q smoking
 - Q alcohol
 - Q help you have at home
-

The day of the operation

 You will be told in advance if and when you should stop eating and drinking. You can continue to take any prescribed medication as normal, including up to and on the day of your operation. If you are taking aspirin, please check with the hospital. You may need to stop it a few days before your operation.

Please bring any medication you are taking with you to the hospital on the day of your operation so the doctors and nurses can check them. You may need to continue taking your medication while you are in hospital.

In hospital

You will be seen by your eye specialist (ophthalmologist) and anaesthetist. Your eye specialist will check and mark the eye that is being operated on and discuss the operation with you. Your anaesthetist will explain the anaesthetic.

What happens next?

- Q You will be asked to put on a hospital gown.
- Q Depending on the type of operation you are having the ward nurses may give you some eye drops to dilate your pupil (make your pupil bigger). These may make your sight slightly blurred.
- Q They may place local anaesthetic cream under your lower eyelid.
- Q The operating theatre staff will accompany you to theatre.



They will ask you some questions to check who you are and check that you have signed a consent form. You will be brought to the anaesthetic room by trolley, wheelchair or, if you prefer, you can walk.

Can I have something to help calm me down?

The practice of sedatives varies amongst anaesthetist and you should discuss this with your anaesthetist.



Please discuss your wishes with your anaesthetist.

What happens in the anaesthetic room?

To monitor you during your operation, your anaesthetist will attach you to machines to watch:

- Q **your heart:** sticky patches will be placed on your chest (electrocardiogram or ECG)
- Q **your blood pressure:** blood pressure cuff will be placed on your arm (a sphygmomanometer)
- Q **the oxygen level in your blood:** a clip will be placed on your finger (pulse oximeter).

Your anaesthetist may need to give you drugs into a vein. A needle will be used to put a thin plastic tube (a cannula) into a vein in the back of your hand or arm. This is taped down to stop it slipping out.



The anaesthetist will give you either:

- Q anaesthetic eye drops
- Q and/ or an injection around the eye through a fine needle or a tube.

Once your eye begins to feel numb it will be kept closed to prevent any damage. A small weight may be placed on your closed eyelids. This helps the anaesthetic drug to work evenly.

Will the local anaesthetic injection hurt?

This varies from person to person. There may be some discomfort or a slight stinging or burning sensation. The anaesthetic drops used before the injection help to numb this area.

How do I know that the anaesthetic is working?

Your doctor will check your eye to make sure it is numb. You may be asked to look in different directions to assess the effects of the anaesthetic. Once you and the anaesthetist are happy that the anaesthetic has worked, the monitors will be temporarily detached and you will be taken into the operating theatre.

The operation

What happens in the operating theatre?

- Q The nurse will check you are lying comfortably on the operating table and that your head is supported.
- Q A sterile surgical sheet will be placed over your face to keep the area around your eye clean. The sheet will have a hole in it so the surgeon can see your eye to be operated on.
- Q A tube may be placed under the surgical sheet which will blow fresh air around your mouth and nose. This is to help you breathe easily during the operation and to feel comfortable.
- Q You may be aware of the area around your eye being cleaned with a cold fluid to keep it sterile.
- Q The heart and pulse monitors will be reattached.

Q You may feel a bit of water running down your face. This is quite normal as the surgeon uses a very weak salt-water solution to keep your eye moist.

Your anaesthetic nurse will be with you and hold your hand throughout the operation.

Can I speak during the operation?

No, It is best not to speak whilst the surgeon is operating on your eye as this will make your face move and could affect the surgery. If you want to say something, you will be asked to squeeze the hand of the anaesthetic nurse, who will ask the eye surgeon to stop operating. You can then speak.

Will I see anything?

It is not unusual to see some strange lights and movements during the operation and this experience varies amongst patients.

Can I wear my hearing aid during the operation?

It is usual practice to remove hearing aids because, no matter how careful your surgeon is, water can enter the ear and the hearing aid may start to make noises. However speak to your anaesthetist first occasionally we have just covered them with a plastic seal to protect them.

After the operation

The operation usually lasts approximately 30 minutes. Your eye may be covered with a shield or pad until the following day to protect it and stop you from rubbing it whilst asleep. You may experience double vision for a time, due to the after effects of the anaesthetic.

A nurse will escort you back to the ward in a wheelchair.

What about going home?


Once you have recovered and your transport arrives, you may go home. Before you go the ward nurse will give you written instructions about recovering from your operation, for example what activities to avoid. He or she will also tell you about any medication you need to take and will show you how to put your eye drops in if you are unsure what to do. Drops are used following surgery to stop inflammation (swelling) and help prevent infection. You will be asked to attend the ward or the outpatient clinic for a further check up.

How long does the anaesthetic last?


Usually 2-3 hours, although it can last up to 4 hours.

Sometimes double vision may persist for several hours.

Will I be in pain?

 You may feel some discomfort when the anaesthetic wears off and a mild painkiller such as paracetamol may be required. The hospital will advise you on this before you are discharged. For this reason it is good if you can have someone to help you at home and stay with you for the first night following surgery. If you experience severe pain contact your GP or the hospital immediately.

When can I drive?

 You will need to ask the surgeon how long you should wait before driving, as each case is different.

Do I need to take any special care?

You will receive individual instructions about the care of your eye, but you should think about the following:

Q Avoid rubbing your eye

Q If you are a restless sleeper wear an eye shield so you can't rub your eye without knowing when asleep

- Q Avoid very heavy lifting, strenuous exercise and swimming until you get the all-clear from the hospital.
- Q Take care in windy weather in case you get something in your eye. Sunglasses can help to give some extra protection from dust and grit.



Where can I get further information?

If you want to ask any further questions about the type of anaesthetic planned for your operation please contact your local hospital or clinic before you come into hospital.

Useful organisations

Association of Anaesthetists of Great Britain and Ireland

21 Portland Place London WC1B 1PY

Phone: +44 20 7631 1650 Fax: +44 20 7631 4352

E-mail: info@aagb.org Website: www.aagbi.org

This organisation works to promote the development of anaesthesia and the welfare of anaesthetists and their patients in Great Britain and Ireland.

Royal College of Anaesthetists

48-49 Russell Square London WC1B 4JY.

Phone: + 44 20 7813 1900 Fax: + 44 20 7813 1876

E-mail: info@rcoa.ac.uk Website: www.rcoa.ac.uk

This organisation is responsible for standards in anaesthesia, critical care and pain management throughout the UK.

Royal College of Ophthalmologists

17 Cornwall Terrace London NW1 4QW

Tel: +44 20 7935 0702 Fax: +44 20 7935 9838

The organisation responsible for the standards, education and research for ophthalmology, throughout the UK. It has a series of information leaflets about different types of eye surgery at

<http://www.rcophth.ac.uk/genpublic.html>

Royal National Institute for the Blind (RNIB)

105 Judd Street

London WC1H 9NE

Telephone 020 7388 1266

Fax 020 7388 2034

Website www.rnib.org.uk

RNIB's work helps anyone with a sight problem – not just with braille, Talking Books and computer training, but with imaginative and practical solutions to everyday challenges. If you or someone you know has a sight problem, RNIB can help. Call the RNIB Helpline on 0845 766 9999 (Monday to Friday 9.00am to 5.00pm. Calls charged at local rates to UK callers) or visit www.rnib.org.uk

The RNIB can provide a confidential interpreter in your language within minutes of your call. Simply state in English the language you prefer to use.

Questions you may like to ask your anaesthetist

Q *Who will give my anaesthetic?*

Q *Have you often used this type of anaesthetic?*

Q *What are the risks of this type of anaesthetic?*

Q *Do I have any special risks?*

Q *How will I feel afterwards?*