

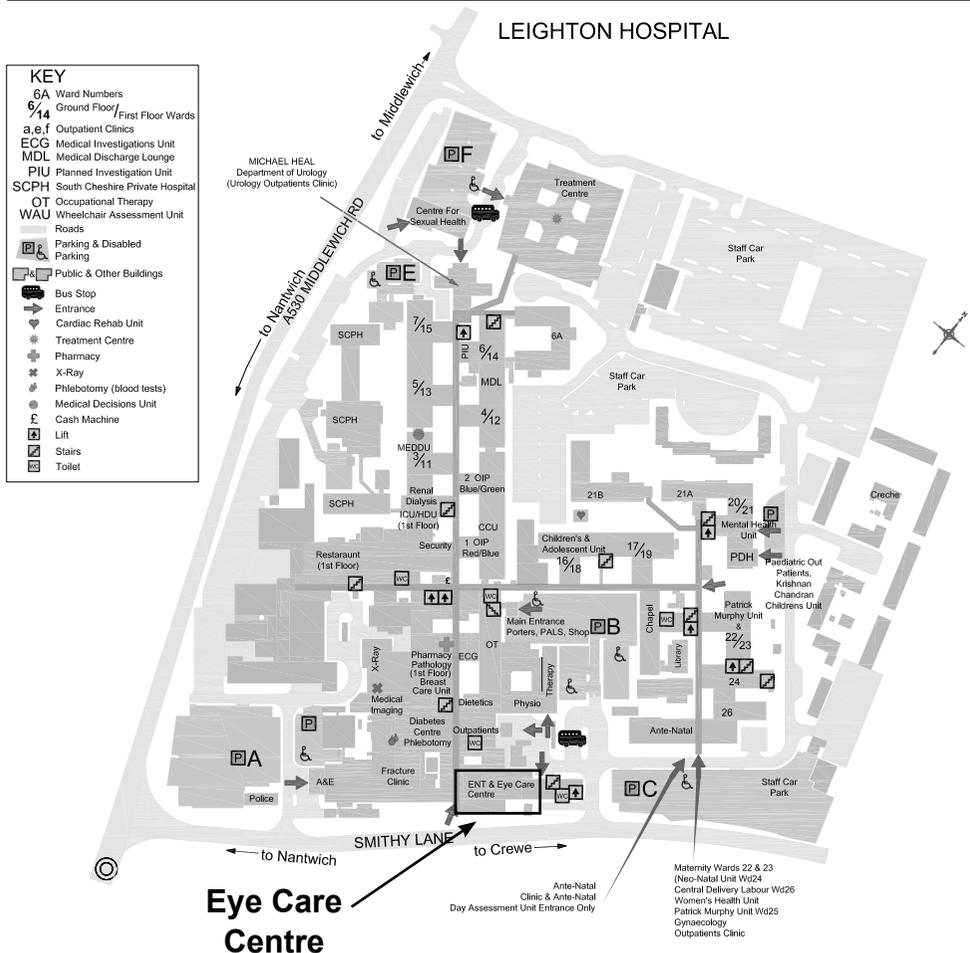
Any questions? Please write them here
and you can ask at your next visit

Eye Care Centre

Information for Patients about Enucleation (Removal of an Eye)

Leighton Hospital
Middlewich Road
Crewe
Cheshire CW1 4QJ
www.mcht.nhs.uk

Telephone: 01270 255141
and ask for bleep 2080



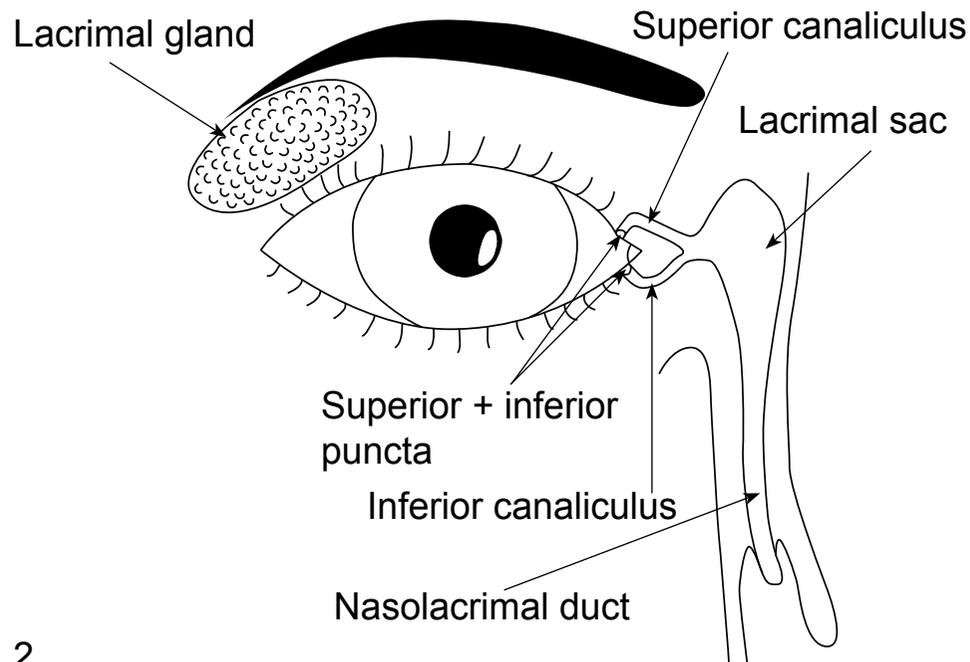
Enucleation

The removal of an eye is a major event in the life of any individual. However, many people have adapted to the loss of their eye and succeed in living a normal life following their surgery.

This information leaflet is designed to provide the factual information needed to support you through the decision to have your eye removed.

The main reasons for removing an eye are:

1. to provide relief from a painful blind eye.
2. to create a better cosmetic appearance following an injury to an eye.
3. to remove a tumour.



Potential Risks

1. Pain: take what you would normally take for a headache.
2. Infection: you will be given some antibiotic ointment to use when you are discharged.
3. Bruising / swelling: use small ice packs several times a day until it subsides.
4. Exterior: exposure of implant or migration of implant.
5. Sunken socket / lid defects.

It is important to understand that all steps are taken to maximise cosmetic appearance. The artificial eye will never look completely natural compared to your normal eye.

Useful Contacts

Patient UK
www.patient.co.uk

The Royal College of Ophthalmologists
17 Cornwall Terrace, London, NW1 4QW
Tel: 020 7935 0702 www.rcophth.ac.uk

Moorfields Eye Hospital NHS Foundation Trust
162 City Road, London, EC1V 2PD
Tel: 020 7566 2345 (9am-4.30pm, Mon-Fri)
www.moorfields.nhs.uk

- Then look down, and the shell should easily flip out. Once the shell is removed, bathe the eyelids with boiled water that has been cooled, and cotton wool.

To insert your shell

- Look down and put the shell, with the notch upwards and nearest to your nose, underneath your upper lid.
- Slide the shell upwards, and at the same time pull down on your lower lid. The shell should easily flip into place.

On discharge home

Your lids and surrounding area will appear bruised and red. The socket itself will also appear swollen and red. This is normal. If, however, the eye becomes more painful, swollen and starts to discharge, please contact your nurse.

Remember that the shell is a temporary measure. You will be sent an appointment for a false eye fitting, which will take place in about 6 weeks time.

You will only need to remove your shell twice a day after your surgery. When the socket starts to heal (about 6 weeks) this can be reduced to once a day.

The procedure will involve either:

Evisceration

The removal of the contents of the eye leaving the conjunctiva (clear outer layer covering the eye ball and lids) and sclera (white layer under the conjunctiva covering the whole surface of the eye ball).

or Enucleation

The removal of the eye ball as a whole.

The operation to remove an eye and insert an implant is usually performed with a general anaesthetic and can take up to one and a half hours to perform.

Orbital implants

It is common surgical practice to replace the removed eye with an orbital implant. The implant is inserted to replace volume in the orbit so that the artificial eye fitted later will give a better result.

Over the past 10 years implants have been developed to allow for the in-growth of naturally occurring tissues and blood vessels. This reduces the risk of the body rejecting the implant at a later stage, which has, in the past, been a problem because of introducing artificial material in to the body. It also allows for better eye movement and position of the false eye.

However, some patients are not suitable for such implants when the tissue of their socket has shrunk due to injury, disease or previous radiotherapy treatment.

Post operative care

It is normal for a pressure dressing to remain over the eye for 48 hours after the operation. This aims to reduce the risk of haemorrhage, bruising and swelling. During this first 2 days, anti-inflammatory pain relieving tablets will be given to you on a regular basis. They also help to reduce swelling and reduce pain.

If an orbital implant has been used, you may also be given a course of oral antibiotics.

Once the dressing has been removed, the eye lids are cleaned and a shield or sunglasses are worn to protect the eye and help with adjusting to the change in the appearance of the eye. It is normal for the eye lids to look bruised and swollen and to weep blood stained tears. If the lids are parted, the tissues will look like the inside of the mouth.

The eye socket will be uncomfortable for 24-48 hours after surgery. Please take painkillers.

The timing of discharge from hospital is discussed with each individual according to progress. Sports, swimming and strenuous exercise is not recommended for at least

one month. Driving is permitted with one eye (provided DVLC requirements are met), but is not advisable within 48 hours of a general anaesthetic. Returning to work will vary depending on the nature of employment, but can be anything from 2 - 4 weeks.

It is normal for there to be 2 return visits to the hospital to see the surgeon. The first of these will be 2 weeks following surgery. Reviews by the prosthetist (who fits the artificial eye) will require additional visits (approximately 6 weeks after surgery).

Artificial eye fitting

In all cases, a clear 'shell' or 'proformer' is fitted at the time of surgery. This will be replaced by a temporary artificial eye which is individually fashioned from 6 to 8 weeks after surgery. A permanent artificial eye will be supplied later.

Post-operative advice

You will be instructed on when to commence your eye bathing.

- **Wash your hands**
- Look up, and using a finger, pull down your lower lid. with a finger from your other hand, flip out the shell by pressing down on the bone. This may be easier using a plastic rod.