

Oxford Eye Hospital

Glaucoma filtration surgery (Trabeculectomy)

Information for patients



This leaflet gives you information that will help you decide whether to have glaucoma surgery. You might want to discuss it with a relative or carer. Before you have the operation, you will be asked to sign a consent form and so it is important that you understand the information in this leaflet before you decide to have surgery. If you have any questions, you may wish to write them down so that you can ask one of the hospital staff.

Treatment

Glaucoma is usually treated successfully with medication to lower the pressure in the eye. If medication is not effective, laser and other surgical procedures may be of value in controlling the pressure and preventing further vision loss. Your eye surgeon has recommended glaucoma surgery because the eye pressure in your eye is uncontrolled. If left untreated it is very likely you will gradually lose vision in that eye.

Glaucoma surgery

Your doctor has informed you that a microsurgical drainage operation called a trabeculectomy is necessary to help control the pressure in your eye. This procedure allows your eye surgeon to create a new drainage channel for the eye, which results in a filtering area called a "bleb". The bleb is mostly hidden under the eyelid. When successful, this procedure will lower the pressure in your eye, minimizing the risk of further visual loss from glaucoma.

The operation

The purpose of the operation is to control the pressure and preserve vision; any vision lost to glaucoma cannot be restored.

An experienced eye surgeon will carry out the operation or may supervise a doctor in training.

This operation is usually carried out under local anaesthetic – you will be awake during the operation. You will not be able to see what is happening, but you will be aware of a bright light. Just before the operation, you will be given an anaesthetic to numb the eye. This may consist of injecting local anaesthetic around the eye. Intravenous sedation is sometimes used to help relax you. Some patients may have a general anaesthetic – in this case you will be unconscious and not be aware of what is happening during the operation.

During the operation, if you are awake, you will be asked to keep your head still, and lie as flat as possible. The operation normally takes 40 minutes. A member of the nursing staff is usually available to hold your hand during the operation, should you want them to.

At the end of the operation, a pad or shield may be put over your eye to protect it.

Benefits of trabeculectomy surgery

The most obvious benefit of the surgery is to lower pressure inside your eye and ultimately to prolong useful vision. The vision will not improve. Often vision is temporarily worse as the level of pressure inside the eye stabilizes. The benefit is long term (years), rather than immediate.

Risks of trabeculectomy surgery

However, you should be aware that there is a small risk of complications, either during or after the operation. In most cases the complications can be treated and in a small proportion of cases, further surgery may be needed. Very rarely some complications can result in loss of sight.

- **Vision**

Sight may take several weeks to return to normal. Some patients will find their vision is not quite as sharp after surgery. The benefit is slowing (or stopping) the rate of deterioration of glaucoma. However, the operation cannot be totally guaranteed to stop the loss of vision in your eye. Eye surgery for any condition ALWAYS carries a small risk that vision may be worse or the eye may become blind after the operation.

- **Eye pressure control**

Failure to lower eye pressure enough, with the need for another operation or the need to recommend pressure lowering eye drops. If the eye pressure becomes too low after surgery further surgery may be necessary.

- **Bleeding**

There is a small chance of bleeding inside the eye immediately after surgery (called “suprachoroidal” haemorrhage). This may require further treatment, and may ultimately result in loss of sight.

- **Infection**

There is a small chance of infection inside the eye after surgery. This may require further treatment, and may ultimately result in loss of sight. This operation will make your eye more prone to infection, even in years to come. If your eye becomes painful or red or the vision becomes blurred, you should seek immediate medical help.

- **Cataract**

There is a reasonable chance that a cataract (cloudy lens) may develop some years after surgery. This may require an operation.

- **Irritation**

Irritation (grittiness) or discomfort in the eye that may persist.

- **Droopy eyelid**

Eyelid may become droopy on side of operation.

After the operation

If you have discomfort, we suggest that you take a pain reliever such as paracetamol every 4-6 hours (but not aspirin – this can cause bleeding). It is normal to feel itching, sticky eyelids and mild discomfort for a while after trabeculectomy surgery. You will be given eye drops to reduce inflammation and protect against infection. The hospital staff will explain how and when to use them. Please don't rub your eye. You will be seen very frequently by the eye team for a number of weeks after the operation.

Certain symptoms could mean that you need prompt treatment, including:

- **Excessive pain**
- **Loss of vision**
- **Increasing redness of the eye**

You will be given an emergency telephone number to ring in case you develop any of the above, or if you need urgent advice about your eye. This number is:

Tel: **01865 234800**.

We hope this information is sufficient to help you decide whether to go ahead with surgery.

Please use the space on the back to write down any further questions to ask the doctor or nurse when you come to the hospital for your appointment. Don't worry about asking questions. Our staff will be happy to answer them.

Otherwise, if you have any non-urgent questions or concerns about your eye, please telephone and ask to speak to one of the nurses:

Tel: **01865 231117**.

Further information

Further information about treatment for glaucoma may be found on the NHS Conditions website:

www.nhs.uk/conditions

If you need an interpreter or need a document in another language, large print, Braille or audio version, please call **01865 221473** or email **PALSJR@orh.nhs.uk**

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