

Eye Unit: Retinal Services

Anti-VEGF Treatment (Intravitreal Injection) Explained (Large print)

Treatment

What is an Intravitreal Injection of Anti-VEGF treatment?

Anti-VEGF treatment involves drugs that are injected directly into the eye to treat the abnormal blood vessels that grow under the macula which can cause water logging and bleeding. The macula is the centre of the retina which is responsible for sharp vision. Currently there are three drugs available;

- Lucentis (ranibizumab)
- Eylea (aflibercept)
- Avastin (bevacizumab) unlicensed drug



Basically all three drugs work in a similar way and are administered as an injection using the same method. The choice of drug will be discussed with you as each has a certain criteria to fulfil depending on the condition its being utilised for. Overall the drugs are used to try to treat and achieve stability for Wet Macular Degeneration, Retinal Vein Occlusions, Diabetic Maculopathy and inflammatory eye conditions.

How do they work?

The drugs work by counteracting the chemicals that cause leakage and bleeding from the abnormal blood vessels under the macula before a permanent and untreatable scar develops.

What are the risks of receiving Anti-VEGF?

Your condition may not get better or may become worse.

Any or all of the following complications may cause decreased vision and/or have a possibility of causing blindness. Additional procedures may be needed to treat these complications. During the follow up visits, you will be checked for possible side effects and the results will be discussed with you.

Complications of the anti-VEGF procedure are uncommon. They include but are not limited to:

- Damage to the front part of the eye (cornea) from the disinfectant causing a temporary but painful corneal “scratch”
- Severe eye infection inside the eye (endophthalmitis)
- Retinal detachment
- Bleeding inside the eye
- Inflammation inside the eye
- An allergic reaction to the drug
- Cataract formation (clouding of the lens of the eye)
- Increased pressure in the eye (glaucoma)
- Reduced pressure in the eye (hypotony)

Risks to your general health you need to be aware of include:

There is a theoretical concern of a greater risk of stroke or heart attacks. However, years of practice and in-depth studies have not confirmed this. The anti-VEGF drugs injected into the eye have shown to be safe.

Your instructions on the day of the injection:

- Please arrange for someone to drive you to and from your appointment because you will have your pupils dilated for the procedure.
- Please bring your spectacles with you as your vision needs to be tested.

What will happen when you attend for the injection?

- Your pupil will be dilated.
- Your eye will be cleaned with an anti-bacterial solution to prevent infection. If you are allergic to iodine you need to inform the doctor
- A drape may be used onto your face around your eye
- Numbing drops will be put into your eye
- A small clamp like device (speculum) may be put around your eye to hold your eye lids apart to prevent you from blinking/ alternatively we may use a small funnel like device (Invitria) which keeps the eye open and has a small opening which is a guide for the injection to be inserted.

Patient Information

- The medication is injected into the vitreous (a jelly-like substance in the back chamber of the eye).
- Following the injection, the doctor may apply some pressure on the eye
- You may have your eye checked after the procedure
- You may have some eye ointment or drops put into your eye
- You will be given eye drops to take home to use and you will be instructed how to use them
- Please do not rub your eye and avoid swimming until your eyes feel comfortable

Patient Information

Drops	10am	12pm	2pm	4pm	6pm	8pm	10pm
Celluvisc Day 1	√	√	√	√	√	√	√
Day 2	√	√	√	√	√	√	√

Instil drops 2 hourly on the day of the injection and the following day. The times stated are a guide only. These are lubricating drops to keep your eye moistened and comfortable after exposure to the disinfectant, which is the “nasty stuff”, essential to minimise the risk of infections.

You may adjust the frequency of Celluvisc to more or less frequent use according to how comfortable is your eye.

What to expect after the procedure:

- You may see a few spots or floaters due to the drug swirling around. These should go away after a few days
- Your vision may be blurred for a few days
- Your eye may be fairly uncomfortable in the first 24 hours. This is usually due to irritation caused by the strong disinfectant used during the procedure and will get better.

If you experience any of the following side effects you must attend the eye casualty department:

- If the pain worsens in the first 24 hours, this may be due to irritation from the disinfectant that occasionally causes a scratch to the front of the eye. This may be very painful but easily treated with ointment and a pad.
- A worsening of the redness or swelling of the eye and increasing pain after the first day
- If the spots or floaters get worse or you notice a shadow /or cobweb in front of vision
- A yellowy discharge from the eye

Patient Information

- Avoid swimming for a week
- Avoid wearing eye make up for a few days

Whom do I contact if I need help after treatment?

In case of emergencies

UHCW Eye Casualty Tel 024 7696 6627

Open from:

Monday to Thursday 8.30am – 4.30pm

Friday 8.30am – 4.00pm

Saturday 8.30am – 12.00noon

Out of hours there is a reduced emergency eye service available via the Accident and Emergency Department.

Useful contact numbers are:

Eye Casualty 024 7696 6627

Retinal Specialist Nurse, Sister Mann (Jas) 024 7696 4000 (switchboard) and ask them to bleep 2828 and stay on the phone until you are connected

Mr Manjunatha/Mr Pagliarini secretary 024 7696 6496

Mr Kumar secretary 024 7696 6497

Rugby St Cross

Vicky Lacey 01788 663338

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 7674 and we will do our best to meet your needs.

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