

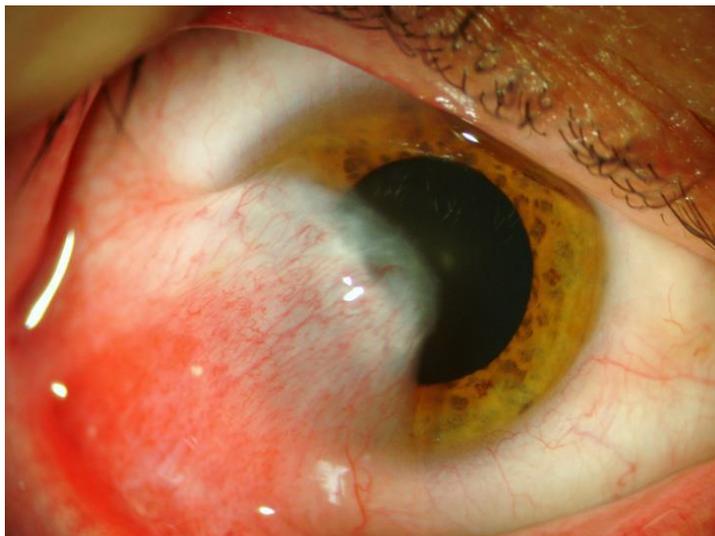
## Ophthalmology

# Pterygium and Its Management

### What is a pterygium?

A pterygium (pronounced ter-ij-ee-um) is a wing shaped growth of tissue across the cornea, which is the clear window at the front of the eye. It is sometimes known as a “pearl” because it looks white.

It nearly always forms on the part of the cornea, which is visible when the eye is open. The exact cause of the disease is uncertain. It may be related to prolonged UV light exposure. It is commonly seen in people who have lived in a hot dusty country or have worked outdoors for many years or have been exposed to temperature fluctuations. It may be due to drying of the eye. It is not a cancer, but it can get slowly larger with time.



### **How does a pterygium affect the eye?**

There may be no symptoms in earlier cases. In more advanced disease, one may experience redness, inflammation, foreign body sensation. Usually vision is not affected until the pterygium becomes big and comes in line of vision or causes change in the shape of the cornea.

### **What treatment is there for pterygium?**

If the pterygium is small, no treatment is required. If the eye is uncomfortable, lubricating drops and / or ointment may help. These can be obtained from your GP or bought at your local pharmacy and can be used long term if needed.

If the pterygium advances until it is at the edge of the pupil or if it is enlarging and very uncomfortable, gets inflamed or causes limitation of eye movement then surgical correction may be indicated.

### **How do we perform the surgery for pterygium?**

This is usually performed under local anaesthesia as a day case in the operating theatre at the Eye Unit. You can eat and drink normally before the operation. The eye is numbed with drops and an injection, and the eyelids are held open for you with an eye speculum. The pterygium is scraped off the cornea and the sclera (white of the eye). A piece of conjunctival autograft is harvested from another site in the same eye or the fellow eye and grafted to cover the exposed site, but the cornea is left to heal by itself. The graft is usually stuck down with glue (commonly used in eye surgery for various procedures) but may sometimes need absorbable sutures that fall off or are absorbed within a few weeks. The eye will be covered with a pad.

### **What happens after the operation?**

- The eye may feel quite sore for a few days. You can take painkilling tablets regularly. The hospital will give you a small supply – ask your GP for more if needed.
- The eye is usually patched with a dressing overnight.

## Patient Information

- Use eye drops or ointment as prescribed by your doctor. The use of these medications may last for 2-3 months or more.
- Do not rub your eyes.
- Avoid contact sports and refrain from washing your hair in the first week after the operation, avoid inadvertent contact with dirty water, or foreign body, or trauma to the operated eye.

### **What problems are there after surgery?**

1. Pain - this should settle within a few days with painkillers, but please contact the hospital if it is getting worse despite regular medication.
2. Redness. The eye may look redder for a few days after surgery but will gradually improve with time. Very occasionally the redness may not go away for many months.
3. Side effects from drops. Occasionally an allergy develops due to the drops or a pressure problem in the eye. The clinic doctor will check for these problems.
4. Site still looks lumpy: The eye may still not have a perfectly smooth surface after surgery and lubricating drops may still be required.
5. Scarring of the eye surface and eye muscles can occasionally cause restricted movement of the eye and double vision. Further treatment would probably help.
6. Recurrence: The pterygium could come back again. This is much less common with modern surgery, but is occasionally very troublesome. Re-operation may be possible.

### **Follow-up Appointments**

You may need several follow up visits to the clinic. The first one will be arranged before you leave the hospital. You may need at least a week off work so please ask the hospital for a certificate if you need one.

## Patient Information

### Contact us

If you have any concerns following your treatment, please contact the numbers below:

Glenda Bajar (Corneal Nurse Specialist)	02476966511
Jackie Gill (Medical secretary to Mr Nicholas Maycock)	02476966511
Maureen Cash (Medical secretary to Mr Rana)	01788663404

Or

In case of emergency, please attend the Eye Casualty Department (Clinic 9) at University Hospital Coventry.

Tel 024 7696 6627 Open Monday to Thursday 8.30am to 4.30pm;

Friday 8.30am to 4.00pm; Saturday 8.30am to 12.00pm

Outside these opening times please attend the Accident and Emergency Department at University Hospital Coventry which offers a 24hr service.

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

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#### Document History

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