

Ophthalmology

Eye Removal Information

Introduction

The decision to remove an eye is a major one and is taken when it is not possible to save the eye.

The decision to remove the eye is taken due to a number of reasons these include:

- To reduce pain and discomfort in a blind eye.
- To remove a malignant tumour even if the eye has perfect eyesight.
- Blind or unsalvageable eyes (not capable of being fixed) after severe trauma or chronic disease (e.g. corneal perforation, infections etc.).
- To remove painless unsightly blind eyes for aesthetic reasons.
- To prevent *Sympathetic Ophthalmia* (sight threatening inflammation) of the unaffected eye in cases of penetrating eye trauma.

Enucleation: is the removal of the eye ball as a whole.

Evisceration: is the removal of the contents of the eye ball leaving the outer layers intact (the white layer is the sclera and the outer covering is called the conjunctiva).

In most cases a ball orbital implant is used to replace the volume in the socket and the sclera and conjunctiva are used to cover the implant.

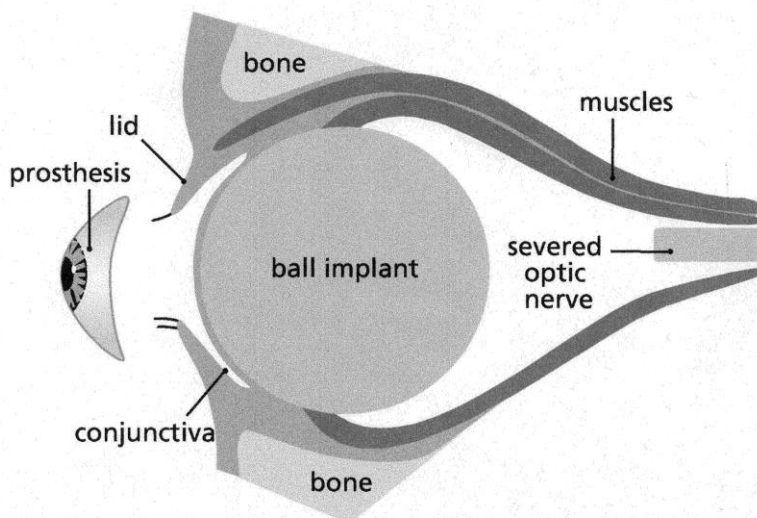


Patient Information

A transparent conformer (clear shell) is placed into the socket at the time of surgery. This helps to maintain the shape and space of the socket while it heals and you wait for your artificial eye.

It takes around 6 weeks for the socket to heal. You will receive an appointment from the ocular prosthetist (artificial eye fitter) between six to eight weeks after having surgery. A stock (temporary) artificial eye is usually put in place in the first instance. A further appointment is then made to take an impression of the socket to make a customised artificial eye for you.

Diagram of Eye Socket and implant



*Diagram of implant in socket
and showing prosthesis before insertion*

Orbital Implants (ball implant)

There is a choice of materials and sizes of orbital implants. Orbital implants could be made of non integrateable materials like Acrylic (Perspex) or integrateable materials like Hydroxyapatite (coral) or Medpor (synthetic coral).

Patient Information

The Day of surgery

The operation is usually performed under a general anaesthetic and takes about one and a half to two hours. To help to maintain the shape and space of the socket a clear shell (conformer) with a hole in the front is inserted at the time of surgery. The hole in the conformer allows you to administer ointment or drops to the socket.

After the operation a firm eye pad is placed to help reduce swelling and this is usually left in place until you are seen in clinic in four to seven days later. The eyelids may be bruised and swollen initially and with some discharge lasting a few days. Most patients are able to go home the day after surgery. As you will have one eye covered it may be an advantage to have someone with you.

After Care

Any discharge on the eye lid can be wiped off gently with cotton wool soaked in cooled boiled water. If there is excessive discharge or it is discoloured please contact the Eye Department or attend the walk in Eye Casualty Unit:

Monday to Thursday 8.30am – 4.30pm

Friday 8.30am – 4.00pm

Saturday 8.30am – 12.00pm

Once the swelling has reduced and the socket has settled down you will have an appointment with the artificial eye fitter.

Many people are concerned about how they will look after the surgery. The socket looks pink (much like the inside of your mouth) which is occupied by the artificial eye. Once the artificial eye is fitted it should provide a reasonable match to your other eye. The only time you need to remove the prosthesis is for cleaning or if you suspect you have an infection (pain, redness of the socket and yellow-green sticky discharge).

You will need time to adjust to vision with one eye (especially if the eye removed was not blind). You might find it difficult to judge distances and depth at first.

Patient Information

Returning to work depends on how confident you feel afterwards and the type of job you do.

Further Information

We hope you found this information useful; should you have any further queries please contact:

Mr H Ahluwalia's Secretary	024 7696 6506
Mrs P Mehta's Secretary	024 7696 6508
Sr Hazel Mercado	024 7696 6533

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