

Eye Unit

Posturing following eye surgery - Alternate cheeks to pillow

Following your eye surgery it is important that you posture in the position as advised.

Posturing involves keeping your head in a certain position to make sure that the bubble of gas or oil in your eye remains in the right position, this helps in keeping the retina flat. By keeping your head in a certain position the bubble will float up and towards the problem area in your eye. It is an essential part of your treatment and it is important that you follow the instructions given to you.

You will be required to posture for 50 minutes in every hour. A break of 10 minutes in every hour is allowed. The following information may help you prepare for this part of your treatment which is carried out at home.

It will be explained to you which posturing position is required and some examples are shown overleaf.

Practical advice

- Make sure you have suitable chairs/tables/stools/pillows available to make sure you are as comfortable as possible.
- Think about what items you may need close by such as tissues, telephone, radio, drinks (straws may be helpful), extra pillows.
- Make sure you have stocks of food and other essential items. Pre-cooked meals may be useful during this time.



Patient Information

- As a result of the inactivity you may suffer from constipation and/or dehydration so try to take plenty of drinks and fruit/vegetables. Contact your GP if you have concerns or problems.
- Use the 10 minute break for short walks and leg exercises to promote good circulation and relieve pressure on the skin, as well as for putting in eye-drops, comfort breaks, meals, etc.
- Depending on your posturing position, during the 50 minutes you can move about **as long as you can keep the correct posturing position.**
- Ideally, arrange to have someone with you for the period of time you need to posture, or for someone to provide regular support. Patients that posture may feel isolated or a 'bit down'.
- Sleeping: do your best to stay in the correct posturing position, as far as this is possible. Extra pillows to help you maintain the position may help.
- You may find that the neck muscles ache and become stiff as a result of the posturing. A warm bath or gentle massage may be useful in relieving muscle discomfort. A mild painkiller, such as paracetamol, may also help to relieve muscle stiffness. If you are already taking painkillers for a different condition then continue with these, but **do not take** additional painkillers without medical advice.

What happens to the gas/oil in my eye?

- If gas has been inserted then this will slowly be absorbed and replaced by the natural fluid produced by the eye. Your vision will be poor until the gas bubble is absorbed.
- You will probably be able to see the gas bubble as a line in your vision which slowly moves across your vision as it gradually gets smaller.
- The time taken for the gas bubble to completely disappear is variable but can take up to several weeks.
- **You must not travel in an aeroplane until the gas bubble is completely absorbed, as the gas bubble can expand owing to changes in atmospheric pressure.**
- **If you require a general anaesthetic while there is still gas in the eye then you must inform the anaesthetist.**
- If silicone oil is used then this will usually require surgical removal at a later date. You may travel in an aeroplane with a silicone bubble in the eye as this does not expand.

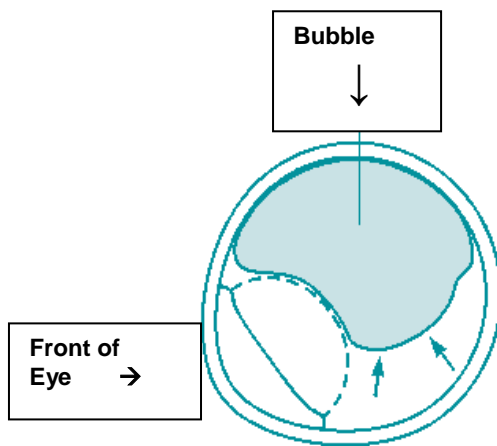
Patient Information

Posturing position: Alternate Cheeks to Pillow

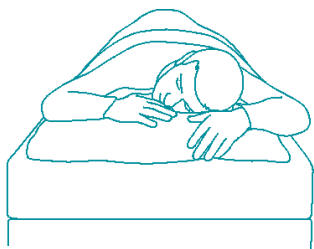
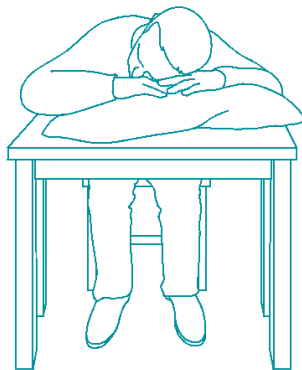
For the first hour lie with the left cheek to the pillow. For the next hour lie with the right cheek to the pillow, and continue alternating the position every hour.

Left cheek to pillow

The Eye



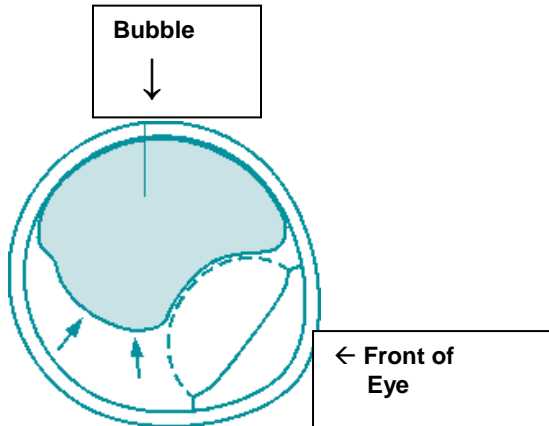
Examples of Posture



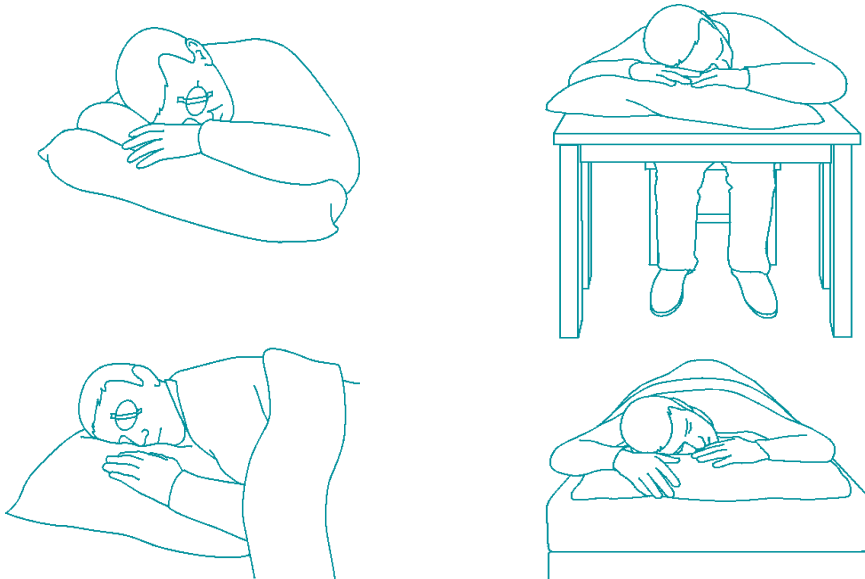
Patient Information

Right cheek to pillow

The Eye



Examples of Posture



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If you have any queries or concerns about your posturing please contact the ward you were discharged from via the hospital switchboard 024 7696 4000.

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 5922 and we will do our best to meet your needs.

The Trust operates a smoke free policy.

Patient Information

To give feedback on this leaflet please email feedback@uhcw.nhs.uk

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Emergency eye appointments: New booking system

If you have an urgent eye problem, you can now book an on-the-day telephone consultation via the Eye Emergency Referral Service (EERS).



Scan the QR code or visit www.uhcw.nhs.uk and search Eye Emergency Referral Service. You can book a telephone consultation via this link.

You will be spoken to by an expert clinician who will give you specialist advice on the next steps to take.

Please provide a phone number which you can be contacted on for the consultation. Please also be aware that you will be phoned as close to the allotted time as possible, although at busy times unfortunately there may be a delay.

In the event that you feel you cannot wait to speak to someone or do not have online access then you may call 0247 696 4800.

This phone line is open 9am - 1pm; 1.30pm - 5pm (Monday - Friday, excluding bank holidays) and 9am - 12pm (Saturday).

Please only attend the Eye Outpatient department if you have had a telephone consultation in advance and have been advised to attend.

In the event of an eye emergency out of hours, please attend the Minor Injuries Unit/Emergency Department.