

## Ophthalmology

# Pterygium and its management

### What is a pterygium?

A pterygium (tur-rid-gee-um), or 'Surfer's Eye', is a wing-shaped growth of tissue across your cornea. The cornea is the clear window at the front of the eye.

Pterygium is a type of ocular surface disease. It's not a cancer, but it can get slowly larger with time.

A pterygium nearly always forms on the part of the cornea which is visible when the eye is open. It is quite common - prevalent in 1 in 10 people. But it's more common in tropical regions.

Causes may include:

- Prolonged ultraviolet (UV) light exposure
- Viral-induced cell changes
- Genetic susceptibility
- Chronic Dry Eye





[“Pterygium invading the pupil”](#) by [Jmvaras](#) is licensed under [CC BY 4.0](#)

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

There may be no symptoms in earlier cases. In more advanced disease, you may experience redness, inflammation, and foreign body sensation.

Usually, your vision is not affected until the pterygium becomes big and blocks your pupil. Or when it causes a change in the shape of your cornea. This may lead to a change in glasses prescription.

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

If the pterygium is small, no treatment is required.

Lubricating drops and / or ointment may help if your eye is uncomfortable. You can obtain these from your GP or buy them at your local pharmacy. They can be used long-term if needed.

## Patient Information

### **Surgery**

Surgical correction may be needed if the pterygium:

- advances until it is at the edge of the pupil
- is enlarging and very uncomfortable
- gets inflamed
- limits your eye movement

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

This is usually performed under local anaesthesia as a day case. The surgery is performed 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. Your eyelids are held open with an eye speculum.

- A. The pterygium is scraped off the cornea and the sclera (white of the eye).
- B. This leaves a bare area of sclera.
- C. 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.

The cornea is left to heal by itself. The pterygium sample is sent for histological analysis to rule out any underlying neoplasia.

The graft is usually stuck down with a glue commonly used in eye surgery. But it may need absorbable sutures. These fall off or are absorbed within a few weeks. Your eye will be covered with a pad.

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

Your eye may feel quite sore for a few days. You can take painkillers 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.
- Use eye drops or ointment as prescribed by your doctor. You may need to use these medications 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.
- Be careful and avoid getting anything in the eye such as dirty water, any foreign bodies or trauma to the operated eye.

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

#### **Pain**

This should settle within a few days with painkillers. Please contact the hospital if it is getting worse despite regular medication.

#### **Redness**

The eye may look redder for a few days after surgery. But this will gradually improve with time.

Very occasionally, the redness may not go away for many months.

#### **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.

#### **The site still looks lumpy**

The eye may still not have a perfectly smooth surface after surgery. Lubricating drops may still be required.

## Patient Information

### **Scarring**

Scarring of the eye surface and eye muscles can occasionally cause restricted movement of the eye and double vision. Further treatment would probably help.

### **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.

Larger, thicker and more vascular pterygium are more likely to recur.

### **Complications**

These may include but are not limited to the following:

- Bleeding
- Infection
- Scarring
- Graft dehiscence/Loose sutures
- Change in refraction (Prescription glasses)

### **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. Please ask the hospital for a certificate if you need one.

### **Contact information**

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(Secretary to Mr. Mrinal Rana, Consultant Ophthalmologist)

## Patient Information

The Trust has access to interpreting and translation services. If you need this information in another language or format, please contact 024 7696 6511 and we will do our best to meet your needs.

The Trust operates a smoke-free policy.

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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](http://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.