

Preoperative Information about Glaucoma Tube Surgery

This sheet reviews the discussion that I have with all patients prior to glaucoma surgery. Glaucoma results when the eye does not drain the fluid within it properly. Glaucoma tube surgery is recommended when a regular glaucoma surgery (a trabeculectomy) is considered sufficiently unlikely to work. The tube implant involves placement of artificial tub along the eye surface under the conjunctiva (the "skin" of the eye). One end is inserted into the eye and the other ends at a plate which acts as a reservoir to make a place for fluid to drain to. The tube is covered with a patch of donor tissue, to protect the conjunctiva. This patch may be visible afterward but the tube end is generally not. Glaucoma surgery requires many visits afterwards in order to ensure that the eye is healing properly. It is important to understand that glaucoma surgery by itself does not improve the vision; however it does prevent loss of further vision caused by the glaucoma.

Modern glaucoma surgery is very safe. However, any surgery does have the risk of complication. This could include infection, a retinal detachment, bleeding within or behind the eye, worsening glaucoma or other problems which can permanently damage the sight. These are extremely rare - a problem that results in a permanent decrease in vision occurs in approximately 1-2% of surgeries, and total loss of vision occurs in about one in every thousand operations. However, you must be aware of the possibility in order to make an informed decision about whether to proceed with the surgery. I do not recommend glaucoma surgery unless I feel that the risks of leaving the eye with a high pressure are greater than the risk of the surgery.

You will be given instruction about seeing your family doctor, or an anesthesiologist doctor and having preoperative test performed. Only people with medical requirements are admitted to the hospital, as most operations are now done as an outpatient. You must eat and drink nothing from midnight the night before, unless instructed to take pills by a doctor. If you use any eye drops or pills for glaucoma, please take them the morning of the surgery as usual. Also, take your heart and blood pressure medications with only a sip of water. You will come in and have the surgery and go home a few hours later. You must have someone to accompany you home.

The operation itself takes about an hour. The eye and skin around the eye will be frozen by an injection, either by me or by an anesthetist. You will be given some sedating medication for this injection and throughout the operation as necessary. During the actual operation your head will be wrapped in sterile sheets, with only your eye exposed. It is critical that you remain quiet and still throughout the surgery. If you experience pain please tell us, otherwise we ask you not to talk, as this makes the eye move under = the microscope. At the end of the operation the eye will be covered with a patch and shield. All patients are seen the next morning. The eye shield is removed at this time by me.

You will be given the prescriptions for the post-operative eye drops either on the day of the surgery or the next day. Please plan to start taking these after the first visit. The other eye should continue using the glaucoma medications (if any were used in that eye) but the operated eye should take ONLY the surgical eye drops. You will see me frequently during the weeks following surgery. It is usual that I ask you to come in twice the first week, and then weekly or as necessary. These visits will become less frequent as the eye becomes more stable. Most people find that they eye is scratchy and blurry for a few weeks following the surgery, but that this diminishes over the follow-up period. **Severe pain or vision loss is uncommon and should always be checked immediately. If you have any questions, ask me.**

- Dr. Deepan Selvadurai

Instructions for Eye Care after Glaucoma Tube Surgery

You have just had an operation for your glaucoma. Please follow these instructions for the post-surgery care.

PROTECTION

You will have a patch covering the operated eye overnight. This will be removed and the eye examined by a doctor in the morning. Protect your eye from injury - if your eye is struck, serious damage could result. Therefore, wear your regular glasses during the day and the protective shield at night. Please wear the shield at night for 6-8 weeks after surgery. People who do not wear glasses may want to buy sunglasses.

MEDICATION

DISCONTINUE all prior anti-glaucoma drops in the operated eye following surgery. You will be given prescriptions for new surgical medications for the eye that had the surgery. You will start these 2 days prior to surgery. Take the new drops as directed - you will be given a special sheet that describes the drop schedule. When using more than one type of drop, wait 5 minutes between drops, so they do not wash each other out.

You should continue to use your regular glaucoma medications (if any) in the other eye. Missing a few doses while you are in the hospital is not significant, but take the morning doses before coming in, and the evening doses after returning home. If you took Diamox (acetazolamide) glaucoma pills before the surgery, discontinue until told to restart.

PAIN OR OTHER PROBLEMS

A little discomfort in the operated eye following surgery is normal, but if you have severe pain you should contact the office (716)633-7386 following surgery you should have a sudden increase in the amount of pain, a green-yellow discharge appears, or experience a decrease in vision, you should contact the office immediately. If problems develop on the weekend, contact the emergency room and ask for the Eye Doctor on call.

BATHING

You may shower and shampoo your hair in the shower at any time. Keep a clean face cloth over the shower curtain rail, so you may wipe off soap from around your eyes, if needed. Keep your eyelids closed when shampooing and rinsing. Do not rub the eye, dry it gently. Consider wearing your shield in the shower to avoid accidentally rubbing the eye.

ACTIVITIES

You may resume normal daily activities and walking the day after surgery. It is fine to look downward, but for the first week you should bend at the knees and not bend over to lift heavy objects. Reading and watching TV are not harmful. Physically stressful activities such as racquet sports, swimming, lifting heavy weights, bench press, push-ups, sit ups and so on must wait 3 months. Golf and jogging may be resumed after 2 months depending on doctor approval. Avoid activities where you have to bend down or hold your breath to perform, such as opening a heavy door. Keep your head above the level of your heart for the first month. You may resume driving when your light sensitivity has diminished provided the vision in your unoperated eye is adequate to drive.