

What are the risks of surgery?

Complications are not very common, and in most cases can be treated.

Very rarely complications can lead to permanent loss of vision.

The important potential risks are of infection, bleeding and retinal detachment.

How successful is macular hole surgery?

The most important factor in predicting your vision after surgery is the length of time the hole has been present.

If the hole has been there for a year or longer, the vision is unlikely to improve much, but if it's only been there a few weeks, many people have significant improvement.

It is unlikely the vision will return to normal though.

At the very least, closing the hole with an operation will prevent your sight from getting any worse.



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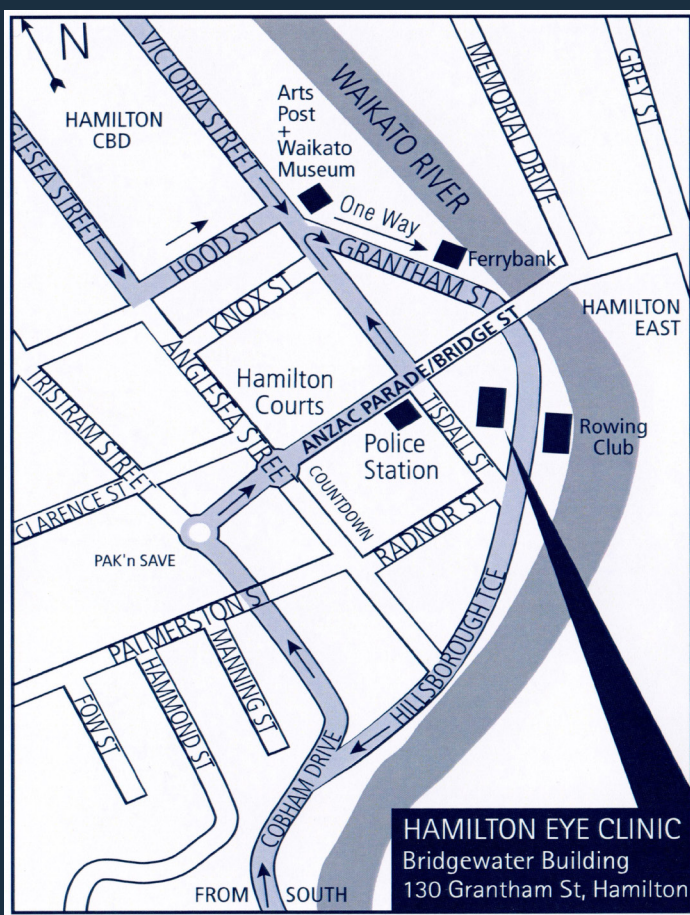
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What is a Macular Hole?



Waikato's Largest Specialist Eye Centre and Eye Surgery Facility

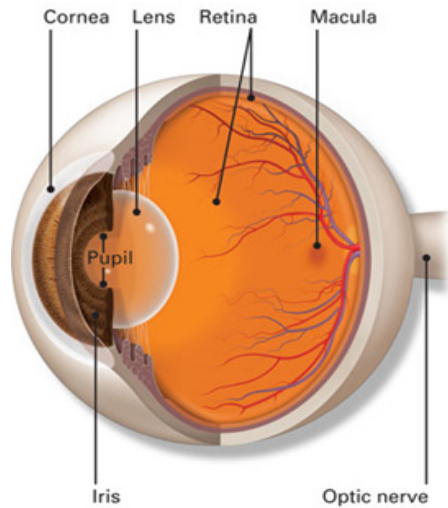
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EYE CLINIC

Macular Hole - What is it?

A macular hole is a small gap that opens at the centre of the retina, in an area called the macula. The retina is the light-sensitive film at the back of the eye. The macula is the part of the retina responsible for fine detailed vision needed for tasks such as reading and threading a needle.

Macular holes most often affect people aged 60 to 80 and are more common in women than men. Risk factors include myopia (short-sightedness) and a condition called vitreomacular traction.

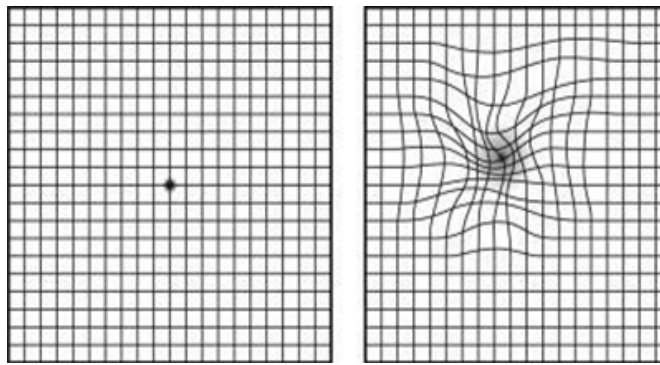
As you get older, the vitreous jelly in the middle of your eye can pull on the macula at the back of the eye and if this pulling force is too strong it can cause a macular hole to form.



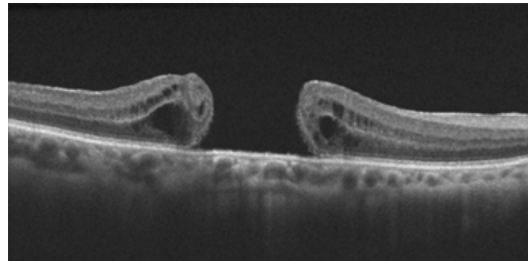
In the early stages, a macular hole causes blurred and distorted vision.

Straight lines may look wavy or bowed, and you will have trouble reading small print. After a while, you may become aware of a small patch of missing central vision.

You can pick these changes up if you look at a regular pattern of straight lines as on an Amsler grid. (see over)



Your doctor may show you an optical coherence tomography (OCT) scan of the macula which depicts the hole as shown below.



Treatment: Vitrectomy surgery

A macular hole can be repaired with an operation called a vitrectomy. The operation is successful in closing the hole in more than 95% of people.

A vitrectomy is a form of keyhole surgery performed under a microscope. Small incisions are made in the white of the eye and very fine instruments are inserted.

First, the vitreous jelly is removed (vitrectomy) and then a very delicate layer (the inner limiting membrane) is carefully peeled off the surface of the retina around the hole to release the forces that keep the hole open.

The eye is then filled with a temporary gas bubble, which presses the hole flat against the back of the eye to help it seal. The bubble of gas will block the vision while it's present, but it slowly disappears over a period of about 2-3 weeks.

Macular hole surgery usually lasts about an hour and can be done while you're awake under local anaesthetic.

Do I need to position myself face down after the operation?

You will likely be asked to do some face-down posturing after the surgery. The aim of positioning face down is to keep the gas bubble in contact with the hole as much as possible, to encourage it to close.

This could be done sitting at a table, or lying flat on your stomach on a bed or sofa. You should also avoid lying on your back for at least 1 week after the surgery.

Am I able to travel after macular hole surgery?

You must not fly or travel to high altitude on land while the gas bubble is still in your eye.

If you ignore this, the bubble can expand, and cause a very high pressure inside your eye.

This may result in severe pain and possibly permanent loss of vision.

