

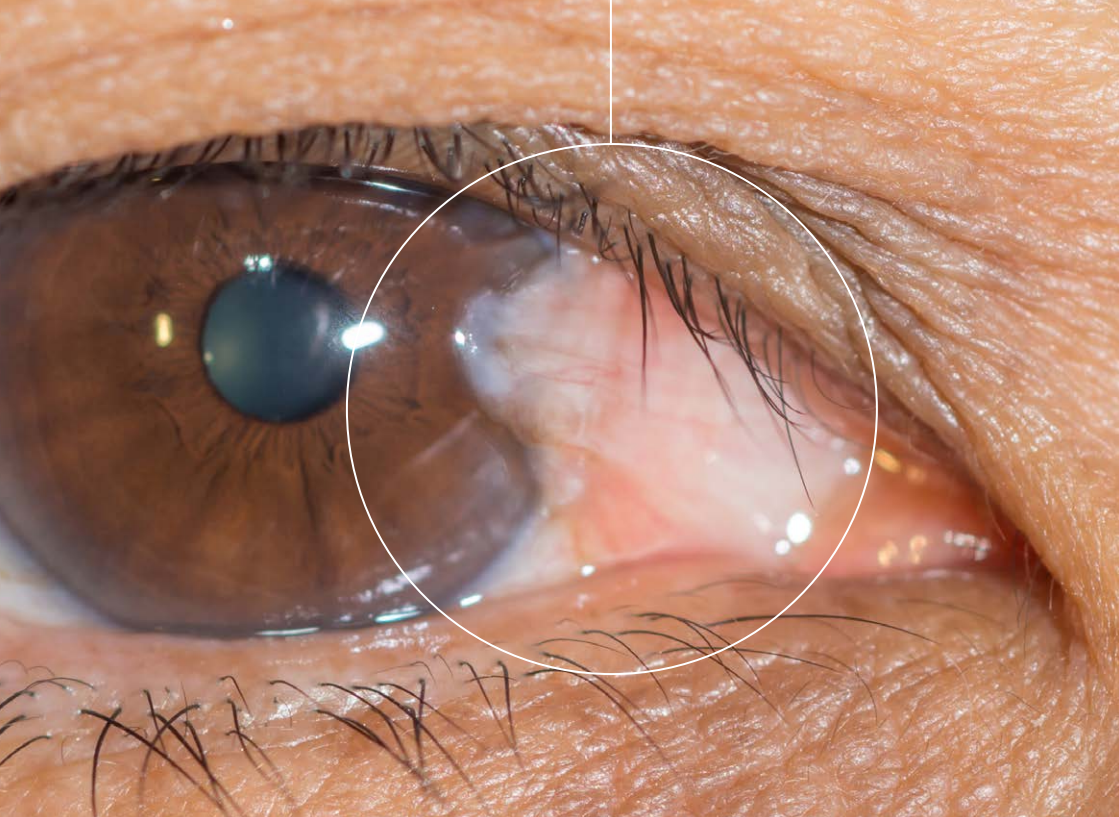


# Pterygium

Your guide to surgery

myeyespecialist.

*your personal eye specialist*



## What is a pterygium?

A pterygium (pronounced ter-ig-ee-um) is a wedge shaped growth of tissue that extends from the corner of the eye towards the pupil. It is linked to sun exposure and is therefore very common, particularly in surfers and people who have spent a lot of time outdoors.



# Should I have pterygium surgery?

If the pterygium is small and not causing any symptoms it is not necessary to treat it. If the pterygium causes mild and infrequent irritation, this can be treated with lubricating and anti-inflammatory drops. The drops will reduce the irritation but will not remove the existing pterygium or stop it from growing bigger.

**There are many reasons why people choose to have pterygium surgery:**

- **Redness and irritation, particularly after swimming**
- **Unsightly appearance**
- **Change in the shape of the ocular surface with increasing astigmatism**
- **Inability to wear contact lenses**
- **Blurry vision**

This booklet is designed to answer common questions and help you reach the decision whether you want to have pterygium surgery, prior to seeing the surgeon. After an extensive assessment of your eye, including corneal topography, your ophthalmologist will advise you on whether you are a good candidate for surgery.

## Why should you consider having pterygium surgery at MyEyeSpecialist

Some people put off having pterygium surgery because they heard stories of painful recovery. While the recovery with some older surgical techniques was often very unpleasant, modern surgical techniques used at My Eye Specialist make the surgery safe and comfortable. We offer all our patients surgical tissue glue instead of scratchy sutures and our post-operative care regime ensures that the recovery time is fast with minimal or no discomfort and an extremely small chance of pterygium recurrence.





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## What to expect with pterygium surgery

### **Prior to surgery**

#### **Arranging time off work**

Most people will take one week off work and a medical certificate can be provided for you. It is important to keep your eye clean and to use the eye drops regularly after your surgery. Talk to your surgeon if you feel your job precludes this and you need more time off work.

#### **Blood thinning medication**

If you take prescription blood thinners, ask your GP or cardiologist if it's safe for you to stop them a few days prior to surgery. You can still have your surgery even if you need to stay on the prescribed blood thinning medication.

If you take non-prescribed (over the counter) blood thinners or health supplements containing fish oil, turmeric or garlic, stop these two weeks prior to surgery.

#### **Diabetes medication**

You will be advised by Robina Procedure Centre prior to your surgery about whether to take your medication.



*Ophthalmologists Dr Pam Weir and Dr Andrea Zarkovic*

## **On the day of surgery**

Please bring this booklet with you when you come for surgery.

Your surgery will be performed at the Robina Procedure Centre, our fully accredited and Queensland Health licensed day hospital situated within our clinic at Robina Town Centre.

You will be given your admission time the day before surgery. You will be our guest for approximately 2-3 hours. Please make sure you arrange for someone to drive you home as you will not be allowed to drive home yourself. You should also have someone to stay with you for the first night after the procedure.

The anaesthetist will put you to sleep to numb the eye, so you will not feel or see this. During the surgery, your eye will be completely numb and you will be under sedation, feeling very relaxed, comfortable and sleepy.

## **The procedure**

Pterygium surgery involves removing the visible part of the pterygium, as well as the roots of the pterygium under the surface. Once the pterygium is removed a small conjunctival (skin of the eyeball) graft is harvested from under the upper lid and glued into place where the pterygium was. This reduces the risk of the pterygium regrowing from 1 in 2 to less than 1 in 200. Using the tissue glue instead of stitches leads to a more comfortable and quicker recovery.

At the end of surgery, antibiotic and anti-inflammatory drops will be instilled and a clear bandage contact lens will be placed on the eye, to keep the eye comfortable. This contact lens does not have any power so you can still wear your usual glasses. You should leave this contact lens in and not attempt to take it out at all until your first follow up appointment. At that time, we will remove the contact lens.

## Arriving home

You will need to remove the eye pad (if used) and the shield 2 hours after the surgery. You may experience some double vision which is normal as the anaesthetic is wearing off from the eye muscles. Discard the eye pad and use the shield at night for 2 weeks. The shield will protect the eye from accidental rubbing during sleep.

Start using your drops and tablets according to the instructions at the back of this booklet. The drops may sting initially and this is quite normal. You may have slightly blood-stained tears and the eye will look very red. This is a perfectly normal part of having just had surgery. The redness and blood under the surface of your eye will gradually go away over several weeks, much like a bruise would on the skin.

You may clean your lids and eyelashes with a clean tissue or soft eye pad and cooled boiled water. Be very gentle with the eye and do not rub it as this may dislodge the tissue graft.

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## Your Recovery

## Eyedrops

You will need to use the eyedrops frequently and for a period of time (see the eye drop chart at the back of this booklet). Be sure that you can make this commitment when you are considering the timing of your surgery. Diligent use of eyedrops will promote healing, keep the swelling to a minimum, speed up the recovery and minimise the risk of pterygium recurrence.

## Driving

You must not drive for 24 hours after having sedation. After that, you can drive if you have no double vision and your vision has returned to normal. You can use your eyes to read, use the computer etc according to what feels comfortable.

## Follow up

Your first follow up appointment will be within one week of having surgery. You will have further follow up appointments over the next few months, while you are still using the drops. It is important to attend your follow up appointments. If you have any questions or concerns between appointments, you are always welcome to contact us over the phone or arrange to come in for a check up.

## Risks

Every surgical procedure carries some risk. Pterygium surgery is very safe, but you still need to be aware of the risks involved. While this is a very extensive list of potential risks, it would not be possible to list every conceivable risk of surgery and anaesthetic.

## Redness and swelling

Redness, which may range from very mild redness to blood-red colour is a normal part of surgery and resolves over several weeks. It is normal for the graft area to be slightly swollen, particularly in the second to third week after surgery. Using the drops as directed will minimise the swelling.

## Pain

It is normal to experience some discomfort and stinging in the first day after surgery. Taking the tablets and eye drops as prescribed will keep the discomfort to a minimum. It is extremely rare to experience severe or prolonged pain. Our surgical technique has been perfected to ensure your recovery is as comfortable as possible.

## Elevated pressure in the eye

Steroid drops (Maxidex) can increase the intraocular pressure (IOP) in susceptible individuals. While mild elevation of IOP is common and of little consequence, having high IOP for a prolonged period of time can cause vision damage. That is why it's important to attend your follow up visits so we can check your pressure and reduce it if it's high.

## Infection

This is very rare with pterygium surgery. The antibiotic drops used for a week after surgery will minimise this risk further.

## Change in vision

Removing the pull of the pterygium on the surface of your eye may change the prescription of your glasses. It is best to wait until at least 3 months after surgery before changing the prescription. Most of the time, it is not necessary to change the glasses. Rarely, some people who didn't need glasses prior to pterygium surgery may need to start wearing glasses or contact lenses. Double vision is normal on the day of surgery. It would be extremely rare for double vision to persist or become permanent and require further surgery. Loss of vision either from the surgery or the anaesthetic would be extraordinarily rare.

## Scarring

If a pterygium is large or active, it can cause significant scarring under the surface of the eye. While every attempt is made to remove scar tissue safely, occasionally it is not safe to remove deep scar tissue. Rarely, surgery itself can cause some scarring.

## Dry Eye

It is common for the eye to feel a bit dry or gritty after surgery. This is treated with lubricating drops and improves with time.

## Recurrence

With the right surgical technique and diligent use of eye drops, it would be unlikely for a pterygium to recur.

## Tissue glue

The risk of pterygium regrowth is minimised with the use of a conjunctival graft which we glue in place. The tissue glue we use is made from blood products. While these blood products undergo extensive testing, it is theoretically possible for a blood-borne infection to be transmitted. If you object to the use of blood products in your surgery, you must tell your surgeons and the staff member who is booking your surgery.

## Allergies

You must inform us of any drug allergies you are aware of and in particular allergies to iodine, Lignocaine (Xylocaine), Maxidex, Chlorsig or any anaesthetic drugs. It would be extremely rare to develop a serious reaction to the anaesthetic drugs.



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## Medication after surgery

### Maxigesic

After your surgery, we will give you pain relief tablets called Maxigesic. It contains Paracetamol and ibuprofen. Do not take this tablet if you are allergic to either ingredient, or if you have kidney or liver failure.

Take two tablets 6 hours after you get home. The next day, take two tablets in the morning and two tablets at dinner time. Do not take any other tablets containing Paracetamol or Ibuprofen while you are on Maxigesic.

### Eye drops

You will need to use Chlorsig and Maxidex eye drops. If you have a known allergy to either one of them we will provide you with a different drop. Make sure there is at least 3 minutes between putting in Maxidex and putting in Chlorsig.



#### Chlorsig

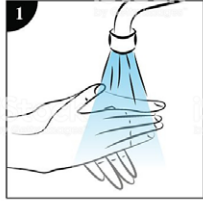
This is an antibiotic drop to prevent infection. You will need to use it **4 times a day for one week**.



#### Maxidex

This is a steroid drop use to decrease swelling and inflammation. It also minimises the chance of pterygium regrowth. In some people, Maxidex can cause the pressure in the eye to increase. It is important to attend your appointments to check the intraocular pressure while you are taking Maxidex. **You will need to use Maxidex every hour while awake for 3 days then every 2 hours for next 2 weeks, 6 times a day for a month, and then 4 times a day for the next month.**

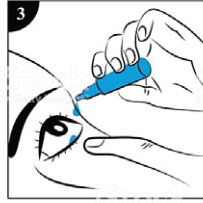
## How to put in eye drops



Wash your hands



Pull your lower lid down creating a pocket



Put a drop in the pocket without touching your eye with the bottle



Close your eye and press your finger against the inside corner



Eye drops after surgery video



How to put in eye drops video

To watch our instructional video on how to put in eye drops, scan the QR codes on the left, or go to [Youtube.com](https://www.youtube.com) and search for My Eye Specialist.

## Eye drop chart

You can use this eye drops chart to help you remember when to put the drops in. Alternatively, you can download a drop reminder app. We recommend EyeDropAlarm which is a free app that you can download from [eyedropalarm.com](http://eyedropalarm.com) or scan the Android/iPhone QR code.



EyeDropAlarm



iPhone App



Android App



Maxidex



Chlorsig

## Pterygium Medication Chart

Tick the checkbox each time you instill an eye drop

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your personal eye specialist

Dr Pamela Weir  
Dr Andrea Zarkovic

### Use Maxidex hourly and Chlorsig 4 times a day

Day 1 (Day of surgery)	7am	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	6pm	7pm	8pm	9pm
Maxidex hourly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorsig 4 times a day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Day 2	7am	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	6pm	7pm	8pm	9pm
Maxidex hourly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorsig 4 times a day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Day 3	7am	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	6pm	7pm	8pm	9pm
Maxidex hourly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorsig 4 times a day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Day 4	7am	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	6pm	7pm	8pm	9pm
Maxidex hourly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorsig 4 times a day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>





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