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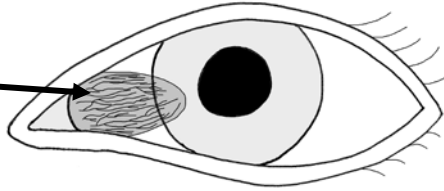


About pterygium surgery

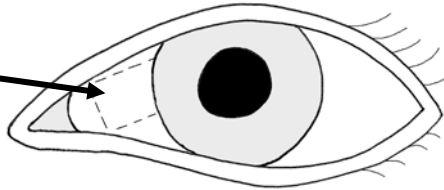
Information for patients and carers

Department of Ophthalmology

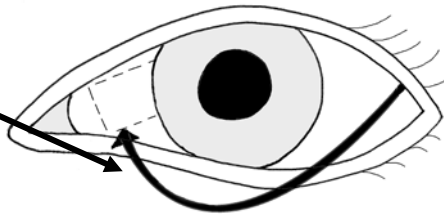
pterygium



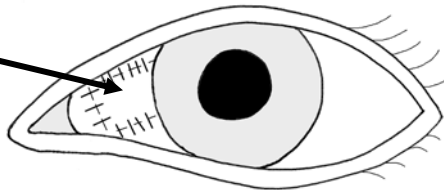
**pterygium
now cut
out**



**tissue taken
from under
eyelid for
grafting**



**graft stitched
to your
conjunctiva
(white of eye)**



What is a pterygium?

A pterygium (pronounced *turr-ridge-ee-um*) is pinkish tissue that starts in from the conjunctiva (the white of the eye) and spreads on to the cornea (the transparent tissue at the front of your eye). It's commonly associated with increased sun exposure and living in dry, arid climates.

It's a benign lesion (so it's **not** cancer) that usually stays stable and doesn't cause any concerns. Your doctor may advise you to wear sunglasses with a UV filter to prevent it growing. Your optician will follow you up to make sure the pterygium remains stable.

In a few people however, it may cause irritation and redness and need lubricating eye drops.

What are the benefits of surgery?

In some people, the pterygium may grow into the cornea and cause visual disturbance. This disturbance is caused by astigmatism (distortion of the surface of the cornea) or a drop in vision as the pterygium grows into your line of sight. Surgery is the only way to correct this visual disturbance.

Sometimes, the pterygium can look very unsightly and may need removed for cosmetic reasons.

What does the operation involve?

We usually carry out this operation under a local anaesthetic (so your eye is numbed and you are awake). Surgery involves cutting out the pterygium. If the surgeon notices a lot of scarring during the operation, they may decide to place a graft (a piece of tissue taken from another part of the white of the eye) over the area. The graft is usually taken from the area of your eyeball that's under your eyelid.

The operation usually takes around 60 minutes. We apply an eye patch at the end of the operation and this is removed the next morning.

You leave hospital on the day of your surgery once the team is satisfied with your immediate recovery.

Before you go home, we give you antibiotic eye drops to use for a week and steroid eye drops to use for at least 4 to 6 weeks to help prevent infection, scarring and the pterygium regrowing.

Does this operation have any risks?

As with all surgery, there is a risk of complications.

We'll discuss the risks of surgery with you before you give your consent (agree) to have the operation. We usually discuss the risks with you again on the day of your operation or during your pre-assessment visit.

If you agree to have this surgery, we'll ask you to sign a consent form. Only sign this form if you understand the operation and its risks.

The serious and frequently occurring complications include:

- **Infection:**

We take great care to make sure the surgical equipment and room are sterile, but very rarely an infection can occur. You can also pick up an infection in the days after your operation.

- **Recurrence (regrowth of the pterygium):**

How often this happens depends on many factors such as the size of your pterygium, your age and your race. The recurrence rate is between 10 and 30% (10 to 30 people in every 100).

- **Scarring of the cornea:**

During the operation, we remove the pterygium from the cornea with great care. The surface of the cornea will be uneven after the operation and can scar as it heals (which may make the cornea opaque). This usually improves with time and with lubricating drops.

Rarely however, the cornea doesn't recover adequately and this can cause permanently blurred vision.

- **Perforation of the cornea:**

There is a small risk of causing a hole in the cornea when the pterygium is removed. This is very unlikely as we take great care during your operation. If it does happen, we can treat it with tissue glue and/or a bandage contact lens. The cornea will heal with time.

If it's a large hole, we'll need to consider stopping the operation and re-covering the area so it's as it was before the operation.

- **Strabismus (squint):**
The pterygium often grows deep into the surface of the white of the eye. During the operation, the muscles that move the eye can get damaged and result in a squint. The squint can result in double vision which may need an operation to correct.
- **Glaucoma:**
The steroid eye drops you use after the operation can cause the pressure in the eye to increase and damage the nerve at the back of the eye. We regularly monitor the pressure in your eye to spot this complication early.

What should I expect after surgery?

For the first 2 to 3 days after your operation, the eye is often sore, red and gritty. Your eye may be red for up to 3 months after the operation, but this tends to settle down.

You may have some stitches on your eye; these will dissolve on their own, so don't need to be removed.

How long does it take for my vision to recover?

It can take up to three months for your vision to recover fully after this surgery.

How often will I need to be seen?

Your surgeon will see you one month after your procedure and then again three months later. After this, we'll discharge you from hospital care.

How do I care for my eye after my operation?

We'll give you a combination of steroid and antibiotic eye drops to take for at least 4 to 6 weeks.

We advise taking paracetamol for any pain. Please make sure you're taking no more than the maximum recommended dose.

Do not rub or touch your operated eye.

Often there is discharge on your eyelid, especially when you wake up. To clean your eye, use cooled, boiled water and wipe the eyelid gently with a cotton wool pad.

Avoid contact sport and swimming for a few weeks after your operation.

You may need some time off work. How long depends on the type of work you do and your recovery.

You may be sensitive to light soon after your operation. You can wear sunglasses if these help.

Do not drive a car until you are used to the change in your vision and you feel safe to do so.

What problems should I look out for?

If you have one or more of the following problems, please see your community optometrist immediately:

- Discharge from your eye and your eye becoming increasingly red.
- Your vision deteriorating.
- Becoming extremely sensitive to light.


How to contact us

Eye outpatient department

Yellow Zone, Level 3

Aberdeen Royal Infirmary

AB25 2ZN

 01224 555873

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Other formats and languages can be
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Development on 01224 554149 for a copy.
Ask for leaflet 1883.**

Feedback from the public helped us to develop this leaflet.
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