



# **Advice for patients following Ocular Plaque Radiation Therapy**

## **Patient Information Leaflet**

This leaflet provides you with relevant information regarding your aftercare following ocular plaque radiation therapy. The Clinical Nurse Specialist will telephone you within a few days after your discharge from hospital.

## **General Information:**

An uncomfortable bloodshot, watery eye that may be sensitive to light is to be expected after ocular surgery, but this should improve on a weekly basis.

The eye may also feel gritty for a few weeks; this is due to the stitches around the eye.

The stitches will dissolve within a few weeks after surgery.

It is also important to point out that you may have some double vision in the affected eye for a week or two after surgery, but this should improve gradually.

However please inform the Clinical Nurse Specialist or the Eye and Ear Casualty Department (contact details are found below) if you experience any of the following:

- Severe pain in the eye or around the eye brow that is not relieved by painkillers followed by nausea and vomiting.
- Sudden loss of vision.
- Excessive discharge or bleeding.
- Swelling that is accompanied by heat and redness around the lids or face of the operated eye.
- If the stitches are causing severe irritation and pain.
- Persistent double vision.

## **Avoid:**

- Rubbing, touching or pressing on the eye.
- Heavy lifting, stooping or bending for at least four weeks.
- Getting soap or shampoo into the eye while washing.
- Make-up (eye liner, mascara, eye shadow) for eight weeks after surgery.
- **Do not** insert contact lenses into the operated eye (please discuss with your ophthalmologist).
- Excessive exercise or sports for eight weeks after surgery.
- Swimming pools, saunas and sea water for at least eight weeks.

## **Eye Care after Treatment:**

### **Cleaning your Eye:**

A minimal amount of discharge accompanied with blood stained tears **may** be present following surgery. If this is so the eye can be gently bathed with cotton wool soaked in water which has been boiled and cooled.

**Please ensure to you wash your hands thoroughly before cleaning your eye.**

## Eye Drops & Ointment

You will need to put eye drops and ointment into the **affected eye only** on discharge. The doctor will prescribe these for you on discharge. You must instil these as instructed for eight weeks.

If you are on any glaucoma treatment continue this as normal.

The drops and ointment you **may** be prescribed are:

- **Atropine 1 %** - This is a pupil dilating drop and is given to prevent painful spasms of the eye muscles. These drops can cause you to have blurred vision while taking them. The pupil will remain dilated for up to two weeks after you stop taking them, in which your vision will continue to be blurred. This drop is prescribed for eight weeks.
- **Maxitrol Ointment** - This is an eye ointment that combines an antibiotic and a steroid in one tube. The ointment will be prescribed for eight weeks.

## **Instilling Eye Drops / Ointment:**

- Wash your hands before putting in the drops.
- You may find it easier lying down or standing in front of a mirror.
- Tilt your head back.
- Pull down the lower eyelid & look up, this forms a “pocket” in the lid (see figure 1)
- Some people find it easier if the bottle is balanced on the bridge of the nose, whilst the tip is aiming for the lower lid (see figure 2)
- Squeeze the drop gently into the middle part of the lower eyelid.
- Close the eye for 30 seconds.
- Leave 3-5 minutes before instilling your next drop / ointment of the day.
- Store drops in a cool dark place and keep out of reach of children.
- Instil the eye drop first and then the ointment.
- When applying eye ointment, simply pull down the lower lid and squeeze a small amount of ointment along the inside of the lid. Close the eye. Please be advised that eye ointment is a greasy substance and will cause blurring of vision for a few minutes.

**Please take care when instilling eye drops. Try not to let the top of the eye drop bottle or eye ointment tube touch the eye or eyelid, as this may cause injury or infection**



Figure 1.



Figure 2.

### **Eye Protection:**

You will be given a clear plastic shield on discharge from hospital. The shield is secured with a mepore or paper tape. The nursing staff will show you how to do this before discharge. We would advise you to wear this shield for two weeks after treatment when going to bed or if it is very windy outside. Sun glasses may also be worn when going outside if preferable. You are advised **not** to wear an eye pad or patch after treatment, as these can slow healing and introduce infection.

### **Pain Relief:**

The doctors and nursing staff will advise you on pain relief before you leave hospital. Continue all your usual medication as normal. It is not advisable to take non-steroidal anti-inflammatories such as difene or neurofen as these drugs may cause the eye to bleed.

## **Personal Hygiene:**

It is quite safe for you to bathe and shower as normal, just avoid getting soap or shampoo into the eye by wearing your eye shield when washing.

## **Going back to work:**

Going back to work depends on what your occupation entails, such as:

- Visual requirements
- Environmental Hazards
- Heavy lifting
- Stress

We suggest that you take at least two weeks to convalesce after treatment, please discuss this further with your Ophthalmologist.

## **Driving after Treatment:**

Remember that you may have double vision in the operated eye. The eye will be dilated for at least eight to ten weeks; therefore your vision in that eye may be blurred. It is advisable not to drive until you are seen by your ophthalmologist as an out-patient.

Do not drive if you have double or blurred vision.

## **Flying after Treatment:**

You can fly after treatment. Please inform the ophthalmologist of when you intend to fly.

## **Follow up Appointment:**

You will be reviewed eight weeks after your treatment. If you have not received a follow up appointment within two weeks following treatment please contact the appointment desk on:  
(01) 6644600 **EXT 5016** or telephone Valerie O'Neill on the numbers above.

**Please Note:** If you are a private patient of Mr Horgan you will need to contact his private secretary to make an appointment in his rooms.

The private room's number is: **(01) 2638826**

**If you have any questions, queries or concerns, please do not hesitate to contact the Clinical Nurse Specialist on:**

**Office: (01) 6644667**

**Mobile: 0863751148**

**From 8- 5 Monday to Friday.**

**If you have a problem after hours please contact the Royal Victoria Eye & Ear 24 hour Emergency Department on: (01) 7088535.**



Revision History

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