

FAQ

Will I get my vision back if I have detached retina?

Retinal Detachment is a serious problem that needs early, highly specialized treatment. Despite surgery, 1 out of 10 people on an average may develop recurrence of the disease necessitating re-operation.

Retina being a nerve tissue, some loss of function always occurs after Retinal Detachment. After successful attachment of the retina, vision will improve but not to normal levels. Visual recovery varies and depends on factors such as how soon after the detachment, the operation is performed, if the central retina is detached or not, among others.



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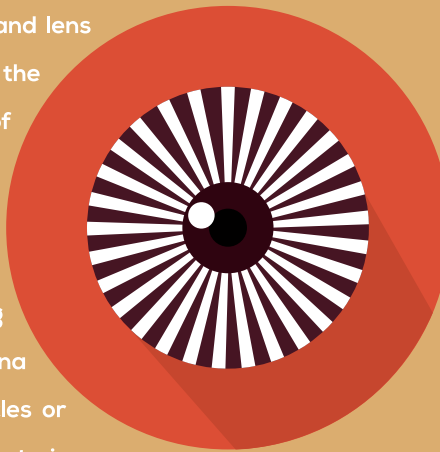
RETINAL DETACHMENT



Retinal Detachment is the separation of the retina from the underlying layers that line the inner wall of the eye. Through the retinal tear, liquid from the vitreous may pass through the tear and detach the retina. As the fluid accumulates, more and more of the retina detaches. Detached retina loses its function and hence the person with Retinal Detachment loses vision suddenly or gradually.

What is Retina?

The retina is a thin sheet of light sensitive nerve tissue lining the inner aspect of the eye. The light entering the eye passes through the cornea and lens and is focused on the retina. It is this layer of the eye that turns light into the visual signal transmitted to the brain, allowing one to see. If the retina is damaged, spectacles or lens implants cannot improve one's vision.



What is Vitreous?

The vitreous is a clear jelly-like material that fills most of the space inside the eye. As we age, the vitreous often liquefies and the gel structure may collapse.

Symptoms

Most people notice floaters and flashes before the retina detaches. As the detachment increases, a gradually enlarging dark shadow engulfs vision. It may appear as a curtain or a shade drawn slowly across the field of vision. In complete Retinal Detachment, one may just see light and no other details.

Why do Retinal Detachments occur?

Retinal Detachment can occur for a number of reasons:

- ▶ Shrinkage of the vitreous – the gel-like material that is present inside the maximum area of eye that may generate tugging on the retina and a retinal tear, leading to Retinal Detachment
- ▶ Following Injury
- ▶ Advanced diabetic changes in the eye
- ▶ High Myopia (High sightedness) with weak areas-Lattices
- ▶ Those with family history at higher risk

TREATMENT



Retinal tears with minimal or no detachment can be treated as an outpatient basis using Laser Therapy or Cryopexy(freezing) procedures.

Once the retina is detached, surgery to reposition the separated retina is required. Scleral Buckling or Vitrectomy operation will be necessary to reattach the retina.

Oil or gas may be placed within the eye to close the hole. If oil is placed inside the eye for reattaching the retina, a minor surgery will be required 4-6 months later for removing the oil.

A simple technique of injecting a gas bubble and doing Laser or Cryopexy may reattach the retina in a small group of patients. This technique is called Pneumoretinopexy.