

Photodynamic Therapy Treatment

Patient Information

WWL Eye Unit



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Introduction

Certain eye conditions can lead to a loss in vision due to a build-up of fluid in the retina. This area is at the back of the eye and enables us to see. The fluid that has accumulated is due to leakage from abnormalities of the blood vessels. The aim of the treatment is to reduce this leakage and stabilise your vision.

This treatment be used for certain ophthalmic conditions:

- Certain types of Wet Age Macular degeneration
- Central Serous Chorioretinopathy (CSR)
- Polypoidal Choroidal Vasculopathy (PCV)

What is the aim of the treatment?

The aim of the treatment is to reduce the potential loss of central vision caused by the condition you have been diagnosed with.

How does Photodynamic Therapy Treatment work?

It is a treatment which applies a cold laser light to activate a photosensitising agent (Verteporin) which will be given to you through a vein in your arm over 10 to 12 minutes. The dose given is determined by your body surface area, which is assessed by measurements of your height and weight. Once the agent has been infused, you will have the laser treatment three to five minutes later, and the combination leads to closure of blood vessels and reduction of leakage. If both eyes need treating, this can be completed, but with the majority of patients, only one eye is affected.

What will happen the day of treatment?

A nurse will assess your vision and instil some dilating drops into the eye that needs the treatment. The drops will enlarge your pupil and make your vision blurred. Normally, your vision will return to normal after a four to six hours; however, this can be longer.

A health assessment will have already been completed on your previous visit which the nurse will be aware of; however, she will check again that you have no allergies.

Height and weight measurements will be assessed to calculate the Verteporfin dosage that will be required.

A cannula will be inserted into a vein in your arm or hand, ready for the treatment.

You may need another eye scan if your previous one is over two weeks old.

The clinician who will be doing the treatment will explain the risks and benefits of the treatment and if you are happy with the plan, they will ask you to sign a consent form.

Once consent has been taken, the Verteporfin infusion will be started by the nurse; this will last either 10 or 12 minutes, depending on your eye condition being treated.

The nurse will instil some anaesthetic drops into the eye being treated, as once in the laser room, the clinician will put a contact lens on your eye to focus the laser beam onto the retina. A low energy laser is then directed to the abnormal leaking blood vessels to activate the drug. The laser treatment will last 83 seconds. The whole procedure is timed very carefully to ensure maximum affect.

What are the side effects of PDT?

- On rare occasions, if the drug leaks into the surrounding tissue, this will cause an inflammatory reaction which can be painful. A cold compress would need to be applied if this happened
- Temporary lower back pain (which is rare 2% of patients); normally it resolves before the infusion has finished.
- Blurred vision for a few hours due to the dilating drops; this will last for a few hours.
- Photosensitivity in the first 48 hours after treatment. Your skin will be sensitive to sunlight; therefore, if going outside, you need to cover up your skin i.e. wear trousers, long sleeved top, sunglasses, hat and gloves.
 Note: - Sun lotion will not protect your skin.
- You are safe indoors, as long as you are not sitting near a window where the sunlight will shine on you. The only artificial light you need to avoid is halogen light bulbs.

- With any drug infused in a vein, there is always a risk of a severe allergic reaction (anaphylaxis); however, this is very rare. If this did happen, emergency treatment would be initiated.
- Do not have any blood samples taken for 48 hours; this is to ensure that there is no Verteporfin in your circulation.
- It is not safe to drive after your treatment, as your vision will be blurred.

Important information

- Verteporfin is cleared out from your body through the liver. If you have liver disease, we may have to discuss your treatment with the hospital pharmacist.
- There is evidence to show that a patient's vision does improve with the treatment; however, there is no definite guarantee of a successful outcome.
- Disclaimer Verteporfin is not a licensed medicine for the treatment of AMD. Your clinical needs have been assessed and cannot be met by medicines that are currently licensed.

If you have any concerns, or if you need to ask any questions before your treatment, please contact the Unit.

Contact details

WWL Eye Unit. Block B, Frog Lane, Wigan, WN6 7LB

Tel Number: - 01942 822244, ask to speak to a nurse from the AMD team.

Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends, and carers.

Contact Us

Tel: 01942 822376 (Monday to Friday 9am until 4pm)

The Patient Relations/PALS Manager
Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust
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Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

- 1. What are my options?
- 2. What are the positives and negatives of each option for me?
- 3. How do I get support to help me make a decision that is right for me?



How We Use Your Information

For details on how we collect, use, and store the information we hold about you, please see patient information leaflet, Ref. **Corp 006** How we use your information, this can be found on the Patient Information Leaflets page on the Trust website, see details on the front cover.

This leaflet is also available in audio, large print, Braille, and other languages upon request. For more information, please ask in the department/ward.

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Call 111 first when it's less urgent than 999.



Phone: 0808 802 1212

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