Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Trabeculectomy Surgery (TRAB)

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Trabeculectomy Surgery (Trab)

Patient Information

Glaucoma Services - Ophthalmology Department

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Introduction

Glaucoma is a progressive disease which, if left untreated, can eventually lead to a loss of vision. Any sight already lost cannot be regained, but with treatment, it is possible to slow the progress of further sight loss.

In glaucoma, the pressure in the eye is too high. This pressure can damage the optic nerve, which leads to sight loss. The majority of patients can be treated with eye drops or a laser procedure, as an outpatient, with annual check-ups. However, in some cases, surgery may be required.

A trabeculectomy procedure is surgery for glaucoma patients for whom other treatments, such as eye drops, have not adequately controlled the condition. It is normally carried out as a day case procedure under local anaesthetic.

The surgeon will create a drainage channel to the surface of the white of the eye under the upper eyelid; then make a small flap called a bleb; fluid from the eye can then drain away, controlling the pressure in the eye. To stop the flap (bleb) from healing or scarring over and blocking the drainage channels, anti-scarring medications may be applied to the eye during surgery.

You will have a pre-operative assessment in clinic prior to your admission; during this appointment, a health assessment and any relevant tests will take place. **Surgery will be on Ward 3 at Leigh infirmary**.

Aims

The aim of glaucoma surgery is to lower the eye pressure and hopefully slow the progression of the disease. It may be that after surgery; you will no longer need your eye drops for glaucoma or

may use them less frequently.

Risks

Infection - It is crucial that medical advice is sought immediately at the first sign of any infection (painful, red, sticky eye), as antibiotics will be required. Infections are rare, but if left untreated, they can cause severe damage or sight loss.

The pressure in the eye may become too high or too low; this may require further treatment or another operation.

Cataract - it is possible that surgery to the eye may cause the lens of your eye to become cloudy (cataract); this can be corrected with further minor surgery.

Benefits of the operation

- Slows the progression of glaucoma and therefore slows vision loss.
- Fewer or no drops.

Day of Surgery

- If you are having a local anaesthetic, please take your normal medications, including eye drops.
- Have a light breakfast or lunch before leaving home.

- If you are having a general anaesthetic, please follow the fasting and medication instructions you were given at Pre-operative Assessment clinic, or on your admission letter.

- Please book in at Admissions on the ground floor, before making your way to Ward 3.

As there are no waiting areas on Ward 3, we ask that, in order to maintain patient confidentiality, your relatives / friends make their way home; or they can wait for you in the Waiting area at the Main entrance. In the Main entrance, there are toilet facilities and a café area available.

Ward staff will contact whoever is taking you home, when you are ready for discharge.

On admission, nursing staff will put eye drops into the eye that is having the surgery; this will constrict (make smaller) the pupil; you will then be seen by the surgeon, who will examine your eye and take the eye pressure. You will also be seen by the anaesthetist, who will assess your general health, and explain the anaesthetic procedure to you.

When it is your turn for surgery, you will be escorted to the theatre suite; a member of theatre staff will check your details, and you will then be taken to the anaesthetic room for your anaesthetic; then you will go into theatre.

The surgery takes approximately 45 minutes.

When you return to the ward, you will be given refreshments; also, your blood pressure, pulse and temperature will be checked; the nursing staff will then start making arrangements for your discharge home; arranging this may take 30-40 minutes.

You will be given some eye drops to take home. The Ward nurses will advise you when these should be used.

You will have an eye pad over your eye, which will be removed by the nurses when you attend your clinic appointment the day after your surgery. They will clean your eye lids and start your drops for you.

This appointment the day after will be arranged for you. **Please take the eye drops you were given on the ward with you to this appointment**.

After Surgery

Go home and rest, taking pain killers if required.

Stop any previously prescribed drops to the eye that's been operated on.

If you are using any drops to the other eye, you should continue with these.

Following this surgery, it is normal to have follow-up appointments in the Outpatients department:

- One day after the operation
- 1 week after the operation, and
- 2 weeks after the operation

- Or as your surgeon feels necessary.

Please attend these appointments, as it is important to check your progress after surgery.

Should you experience any problems after your surgery such as severe pain, infection (painful, red eye with sticky discharge) or a sudden reduction in vision, please contact:

Boston House telephone 01942 822244

Your own GP

Wigan and Leigh GP Hub telephone 01942 482848

NHS 111



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