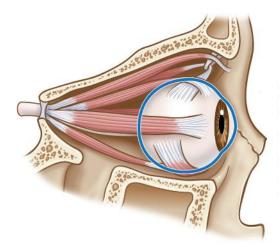
#### QUEENSLAND OCULAR ONCOLOGY SERVICE

#### DR WILLIAM GLASSON DR LINDSAY MCGRATH DR SUNIL WARRIER

# **ENUCLEATION**

## What is an enucleation (removal of the eye)?

Enucleation refers to surgery to remove the entire eyeball from the eye socket or orbit, leaving behind the lining of the eyelids and muscles of the eye.



#### **Enucleation:**

The entire eye, including the globe, is removed but the orbital contents are left in place.

# Why is enucleation sometimes necessary?

Removal of an eyeball may be required following a severe injury, to control pain in a blind eye, to treat some intra-ocular tumours (tumours inside the eye), to alleviate a severe infection inside the eye, or for cosmetic improvement of a disfigured eye.

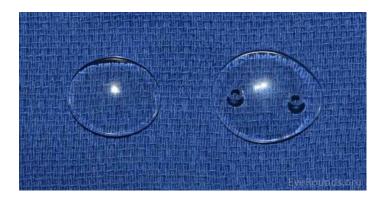
Be assured that this surgery is the final measure when all other options or treatments are ineffective. Your Ophthalmologist will discuss at length with you, why he/she feels that enucleation is the only option.

# **ENUCLEATION**

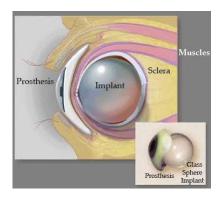
## How is the surgery performed?

Surgery is performed in the operating room under general anaesthesia (which means that you would be asleep during the operation), although it can be performed safely with local anaesthetic and sedation if required.

- During the operation the optic nerve and eye muscles are cut and the eyeball is carefully removed.
- The eye is replaced with an orbital implant in the shape of a ball. Some of your eye muscles are then stitched to the orbital implant so the eye muscles will be able to move the implant.
- This means that when your artificial eye is fitted it will move in a similar way to your normal eye.
- A conformer (thin plastic shell) is often placed in the eye socket at the end of the operation to help maintain the shape of the eyelids and reduce swelling.



Conformer (left) helps reduce swelling



Implant (right) replaces volume of eye

#### What are the risks involved?

- Short term risks of this operation include bleeding, infection and inflammation of the wound site. Lid swelling, dropping eyelid and breakdown of the wound.
- Longer-term risks include discharge from the socket, socket irritation and exposure of the ball implant. However, complications are rare.

## What treatment is required after the operation?

- Most patients remain in hospital for two or three days after enucleation surgery.
- Drops and/or ointment will be used in the socket after the operation while healing takes place. This continues at home for at least 4 weeks.
- A patch can be worn over the eye socket until the artificial eye is made.
- Continued follow-up is important as the socket and eyelids may change over time and need further
  minor surgery. If this is needed it is only usually after many years. Careful monitoring of the socket
  and prosthesis by the surgeon and the artificial eye maker will help keep the socket healthy, and
  will allow for early detection of any changes that may require further treatment.

# **ENUCLEATION**

# Is it usual to have some sticky or watery discharge from the socket after my surgery?

- A very small amount of discharge may occur and accumulate at the inner corner overnight, but larger amounts accumulating during the day or running onto the cheek demand attention from your doctor.
- To clean away discharge, use saline solution and wipe from the outer corner of the eye (near the ear) towards the nose.
- Use each cotton ball only once and then discard it.
- Saline solution can be purchased from a pharmacy.

## When will I be fitted with my artificial/prosthetic eye?

- You will be fitted with a permanent artificial eye (prosthesis) one to two months after the
  operation. The delay allows all of the swelling to subside. Your surgeon will refer you to an external
  provider to have the prosthetic eye created and fitted. This next stage can be explained and any
  questions answered when you book an appointment
- The artificial eye is a bit like a large and thick solid contact lens that can be taken out to clean.
- The artificial eye will be colour matched to your remaining eye.
- The artificial eye may not move as well as a normal eye, but usually moderate movement is attained.



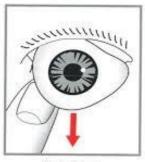
## How do I care for my artificial eye?

- Care of the artificial eye is very simple. Most patients leave it in the eye socket for weeks or even months at a time.
- It can be removed from time to time for cleaning in a contact lens cleaning solution.
- Some patients find using a regular lubricating eye drop is helpful.
- The artificial eye needs to be polished by the artificial eye maker every 12 to 18 months, and may need to be replaced after about 10 years.

# **ENUCLEATION**

## Removing prosthesis or conformer:





Conformer (right) stays in place under the eyelids to help with healing, until the artificial eye is made. If it falls out, it can be rinsed and replaced, with the narrower portion pointing to the nose side.



look up

look down

### Things to Avoid:

- · Rubbing or pressing on the socket
- Heavy lifting, stooping or bending for at least four weeks
- Getting soap or shampoo into the socket when washing
- Make-up (eye-liner, mascara, eye shadow) for four weeks after surgery
- Excessive exercise or sports for four weeks after surgery
- Swimming pools and sea water for at least four weeks after surgery

## **Driving after Surgery**

With the loss of vision in one eye we advocate an adaption period of a minimum duration of six weeks prior to recommencing operation of a private vehicle. However your other eye must meet the medical approval and legal requirements for driving as per Queensland Transport.

**Queensland Ocular Oncology Service** 

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(please contact Terrace Eye Centre on (07) 3831 0101 if you have any questions or queries)



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