

# Removal of an eye (Enucleation)



## Why am I having my eye removed?

People have eyes removed for a number of different reasons, some of which are given below. Usually we only consider removal of the eye if:

- You have a tumour which is in a difficult place to treat using conventional treatments e.g. using laser or radiation.
- You have a tumour which is relatively large and because of this there is an increased risk of causing a painful blind eye following conventional treatment.
- You have other problems with your general health.
- You decide that removing your eye is a better choice than other kinds of treatment.

## How long will I have to be in hospital?

For this kind of operation you will usually be in hospital overnight.

## Are there any risks involved in this type of operation?

- There is a possible risk of infection.
- There is a possible risk of the wound breaking down.
- There is a possible risk of ptosis (droopy eyelids), which can be corrected with further cosmetic surgery.

## What happens before the operation?

Before coming into hospital you will need to have a general anaesthetic assessment; usually this will be carried out at your first out-patient appointment once you have seen the consultant and clinical nurse specialist.

You will meet one of the nurses in the assessment team who will:

- Assess your general health
- Arrange for you to have an ECG and blood tests
- Discuss your current medication and advise if you need to stop any tablets prior to surgery
- Advise you on starving prior to your operation
- You will also require an abdominal ultrasound scan which we will try to organise for the same day, if not you will be required to attend the day before your operation.

## What happens on the day of my operation?

On the day of your operation you will:

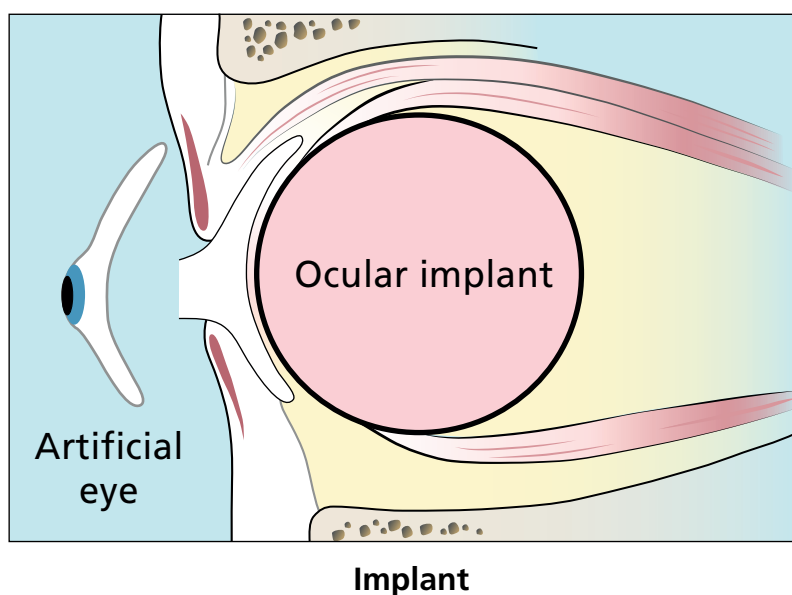
- Be admitted to ward I1 or the Day Case Unit at the Royal Hallamshire Hospital, and from theatre you will be taken to ward I1 for your overnight stay (occasionally more than 1 night's stay is required).
- Have nothing to eat for 6 hours before your operation.
- Have nothing to drink for 4 hours before your operation.
- Have dilating drops put into the eye that we are going to remove, approximately 1 hour prior to your operation.

## How long does the operation take?

The operation usually takes about 1 hour.

## What does the operation involve?

During the operation, the affected eye is removed and a synthetic implant is inserted. This will allow some movement of the prosthetic eye.



## Will I be in pain afterwards?

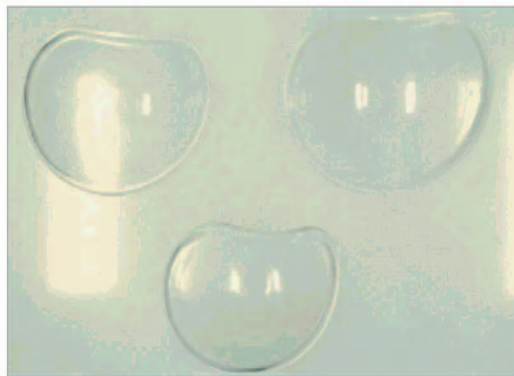
Some people do have some discomfort and/or pain after this operation, but we will give you painkillers to help. This will usually be as tablets or as an injection.

## How will I feel after the operation?

- You will have a pressure dressing applied to the enucleated eye. This may seem uncomfortable but it will help to reduce swelling and bruising. The dressing will be removed 3 days after surgery.
- You may find that the movements of the implant, like trying to look at your visitors makes the pain worse, to help this we recommend that you have only close relatives or friends to visit you on the day of your operation.
- You will feel drowsy because of the general anaesthetic but you should feel better the next day.
- Once the pressure dressing has been removed by yourself or your GP practice nurse, you will have to bathe your eye and put in Chloramphenicol anti-biotic ointment, and Betnesol eye drops. This is to reduce the risk of infection and inflammation, and will need to be used four times a day for at least 4 weeks. We also usually advise ice packs four times a day for 2 weeks.

## What happens once I get home?

- At first, your eyelids will be bruised and swollen and you may weep blood stained tears. This is normal so please do not worry.
- Once the bruising and swelling has gone down, you will find that your eye socket looks pink/red like the inside of your mouth.
- You will be reviewed in clinic 2 - 4 weeks following your operation.
- You will have been fitted with a temporary shell / conformer at the time of surgery. Your clinical nurse specialist will discuss the care of the temporary shell with you.



**Temporary shell**

## Is there anything I should look out for when I get home?

- Your eye socket may become painful, red or sore
- You may experience a sticky discharge

Please contact your Support Sister if you are worried, contact details are on page 6.

## When will I get my artificial (prosthetic eye)?



You will be fitted for a temporary artificial eye in place of the temporary shell, about 6 weeks after your operation (or when your ophthalmologist thinks that your eye-socket has healed enough).

We will refer you to your nearest artificial eye centre where a prosthetist (specialist in prostheses) will fit your temporary eye. Your first appointment should take about 1 hour.

We fit a temporary artificial eye because in the first few months your socket may change shape.

Since the amount of change varies in different people it can take up to 4 - 6 months before you receive your permanent eye.

## Will I need to come back to hospital after my operation?

Yes, your first check up should be about 2 - 4 weeks after your operation. After that, your appointments will be on a 3 - 6 monthly basis. We will ask your GP to organise an abdominal ultrasound scan every 6 months. You will also continue to see the prosthetist who will review and polish your artificial eye (approximately once or twice a year).

## How do I look after my artificial eye?

You will need to remove and clean the eye periodically. We will show you how to do this correctly but have included some instructions to remind you of what to do:

### How to remove your artificial eye

1. Wash your hands.
2. Look up and pull down your lower lid. With a finger from your other hand or using a plastic rod, flip out the shell by pressing down on to the cheek.
3. Look down and the shell should easily flip out.
4. Or you can use a rubber suction device.
5. Once the shell is removed, bathe the eyelids using cotton wool and boiled water that has been allowed to cool.

### How to put in your artificial eye

1. Look down, position the shell with the notch upwards and nearest to your nose underneath your upper lid.
2. Slide the shell upwards and at the same time pull down your lower lid, allowing the shell to slip into place.
3. If you do not feel confident in doing this yourself at first, then you could ask a relative or friend to do it for you until you feel ready to do it for yourself.

## Frequently asked questions

- **Will removing one eye strain the other?**

No.

- **Will I still be able to drive with only one eye?**

You will have to inform the Driver Vehicle Licensing Agency (DVLA) that you have had your eye removed but providing you are able to pass their standard sight test and have adapted to the disability you will be able to drive a car. You will also have to inform your insurers.

- **How will this affect my work?**

Depending on what you do for a living you should be able to return to work as soon as you feel comfortable to do so after your first clinic visit.

- **Can I carry on with my hobbies?**

Yes, but you should avoid sports, swimming and strenuous exercise until the eye-socket has had time to heal (for at least one month).

You may find that hobbies like sports, needlework and painting are more difficult to do at first. This is because you are now seeing through only one eye (monocular vision) and this makes it more difficult to work out depth. However, you should adjust to seeing in monocular vision and any difficulties you experience lessen after a period of time.

- **Will this affect my insurance in the future, i.e. for holidays?**

Some insurance companies may refuse to provide cover for holidays, but this is uncommon. If you do have a problem with this please contact us for a list of companies that will be more helpful.

- **How will this affect my daily living activities?**

It is important that you try to lead as normal a life as possible.

- **Will I be classed as partially sighted?**

No, not normally if you have good vision in your remaining eye. You can ask your ophthalmologist if you qualify.

## What support is available after my treatment?

You may feel quite tired for a couple of months following treatment; this is perfectly normal. However, if you find you continue to struggle to return to your normal activities due to the impact of your treatment, additional support may be helpful.

Please contact your clinical nurse specialist if you require any information on support services and/or complementary therapy services in your area.

## Who should I contact if I have any concerns?

Don't worry, we will be there to give you help, advice and support with the care of your artificial eye. If you have any problems or concerns you can call us:

Rhona Jacques, Clinical Nurse Specialist

- **0114 271 2379**
- **0114 271 1900** (ask for bleep **2026**)

Tracey Farniss, Clinical Nurse Specialist

- **0114 271 1962**
- **0114 271 1900** (ask for bleep **2738**)

Appointments

- **0114 226 1477**

National Artificial Eye Helpline

- **0845 605 0561**

Ophthalmologist on Call

- **0114 271 1900** (ask for the Ophthalmologist on Call)
- **0114 271 2504** (Ward I1)

You can obtain further information on the Ocular Oncology Service provided here in Sheffield via our website [www.sheffieldocularoncology.org.uk](http://www.sheffieldocularoncology.org.uk)

## Where can I get financial advice?

If you are experiencing financial problems and not sure what benefits you are entitled to, or need help with travelling expenses, you can get advice from:

### Macmillan Cancer Support

- 0808 808 0000

### Your local Social Security Office

- [www.gov.uk/benefits-adviser](http://www.gov.uk/benefits-adviser)

### Your local Citizens Advice Bureau

- [www.citizensadvice.org.uk](http://www.citizensadvice.org.uk)



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