

***Mr Kaykhosrov Manuchehri MB BCh (Hon) BAO FRCOphth
Consultant Ophthalmic and Vitreo-retinal Surgeon***

The Chiltern Hospital
London Road
Great Missenden
Bucks
HP16 0EN

The Saxon Clinic
Chadwick Drive
Saxon Street
Milton Keynes
MK6 5LR

Spire Thames Valley Hospital
Wexham Street
Wexham
Bucks
SL3 6NH

Spire Harpenden Hospital
Ambrose Lane
Harpenden
Hertfordshire
AL5 4BP

Private Secretary: *Luisa Ramirez*
Tel/Fax: 01296 434352, 07835 977069
luisa@worldvisionltd.co.uk

RISKS OF VITRECTOMY SURGERY

- As with any operation in the eye there is a risk of infection or haemorrhage (probability of 0.1% or less) If this happens it can cause complete loss of vision in the operated eye.
- 5% chance of retinal tear or detachment during the operation, in which case you will have gas put into the eye and asked **to posture*** for at least two weeks and rarely longer. If you are unlucky enough to have gas inserted during the operation, 80% of cases have a short acting gas (SF₆) inserted which lasts approximately 2 weeks in the eye and the other 20% of cases have (C₃F₈) gas inserted which lasts about 6-8 weeks in the eye. **You will not be able to fly until the gas is completely gone from the eye**
- 100% of the patients will develop a cataract
- Risk of "Sympathetic Ophthalmia". This is a small risk where operating in one eye causes the immune privilege proteins of the eye to be released into the blood system thus causing an auto-immune response producing inflammation of both eyes that can lead to visual blurring. There is normally treatments for this condition.
- Small risk of drooping eye lids after the surgery. This normally improves with time but can sometimes be permanent.

- There are lots of other small risks, which are too numerous or insignificant to mention. If you wish to look at these please type in “complications of vitrectomy” on any internet browser.