



Retina Eye Specialists
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If you are trying to reach your doctor after hours:

- Call the office number.
- Leave a message, including your name and telephone number.
- The doctor will be paged to listen to your message.

Please visit our website: www.retinaeye.com



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Pars Plana Vitrectomy



What is a pars plana vitrectomy and why is it being recommended?

A pars plana vitrectomy is an outpatient surgical technique used to extract the vitreous from the eye, and in place of the vitreous, a solution or gas is placed inside the eye. Depending on the condition, a vitrectomy can be performed by itself or in conjunction with other techniques.

A vitrectomy is typically performed on patients who have either an epiretinal membrane or vitreous hemorrhage. If an epiretinal membrane is present, a vitrectomy is performed so that the membrane on the retina can be more easily accessed. After the vitrectomy has been completed, the membrane is peeled off the retina and removed from the eye. In patients with a vitreous hemorrhage, profuse bleeding from damaged vessels can cause the vision to become obstructed. A vitrectomy is used to remove the blood-filled vitreous from the eye, and afterwards, laser spots are often placed on the retina to prevent further bleeding.

In some cases, a vitrectomy may be performed for persistent floaters or other vitreous opacities (i.e. asteroid hyalosis) that significantly affect vision. However, a vitrectomy is not usually performed for these conditions and is only done for extreme cases.

What are the risks?

Vitrectomy surgery is an outpatient procedure and is considered intraocular vitreo-retinal surgery. The major risks of vitrectomy surgery include:

1. Formation of cataract in operated eye
2. Infection inside the operated eye
3. Glaucoma or temporary increase in eye pressure
4. Retinal detachment in the operated eye

How is it done?

You will check into the hospital at the specified time (1.5-2 hours before surgery time, and depends on what the hospital says). After being prepped for surgery, you will be taken into the surgery bay and in most cases, will be placed under twilight anesthesia. General anesthesia can be used if you request it or if the doctor thinks it necessary. Depending on the extent of the surgery, it can last anywhere from 30 minutes to an 1 hour. No overnight stay in the hospital is necessary and you may go home afterwards.

What can I expect as my eye heals?

Even though vitrectomy surgery is a routine procedure, it is still invasive. It is common to experience one or more of the following:

1. Lid swelling and/or droopy lid
2. Eye redness
3. Tearing (a slight amount of blood in the tears is normal, especially after the first week)
4. Mild pain
5. Foreign body sensation or a feeling like something is rubbing on the outside of the eye. This is usually due to the sutures on the outside of the eye and should dissolve after 2 weeks.

When should I call my Doctor if I think I am having a problem?

Infection or retinal detachments are extremely rare after vitrectomy surgery, however you should call our office **IMMEDIATELY** if you experience one or more of the following symptoms:

1. Severe pain within the eye
2. Nausea or vomiting
3. Sudden, large decrease in vision
4. Pus-like discharge
5. New onset of flashes, floaters and/or a black curtain coming across your vision

Do I need to take any special care or medications after my retinal surgery?

Yes. It is important that you **do not** engage in any strenuous activity, jogging or other exercise, or roller coasters after vitrectomy surgery. Your doctor will inform you when normal activities can be resumed. Avoid getting water in the eye for 2 weeks. If you experience minor pain, regular ibuprofen can be taken at home with food. Take all your medications as directed until the bottle runs out. It is important that you wait 5 minutes between drops.

My post surgery instructions

- Take the antibiotic eye drop (beige top) in the operated eye; 1 drop, 4 times/day until the bottle is gone.
- Take prednisolone eye drop (pink top) in the operated eye: 1 drop, 4 times/day until the bottle is gone.
- Take antibiotic ointment (tube); small amount in lower lid, 2 time/day until the tube is empty.
- If prescribed, take atropine eye drop (red top) in the operated eye; 1 drop, 2 times/day until the doctor tells you to discontinue.
- Showering is ok; however avoid getting water in the eye for two weeks.
- Avoid strenuous activity or lifting heavy objects (over 20 lbs) for 2 weeks or until your doctor says that normal activities can be resumed.