

Ophthalmology Directorate

Cyclodiode Laser for Glaucoma

This leaflet tells you about cyclodiode laser treatment for glaucoma. Please read it carefully, since it contains important and useful information. If, after reading this, you have any questions, please ask a nurse or eye doctor.

Why am I having this laser treatment?

Glaucoma is usually a disease of high pressure in the eye that can damage your eyesight. We cannot bring back the eyesight lost in glaucoma.

There are two main reasons for doing cyclodiode laser:

- (1) To relieve pain in a non-seeing eye that has very high eye pressure, or
- (2) To reduce the pressure in a seeing eye that has glaucoma.

The aim of the laser therapy is to lower the pressure in the eye, by reducing the production of fluid within the eye. After the laser treatment, it is often possible to reduce the number of eye drops that you are using or stop them altogether.

Will it work?

This procedure has a fairly good success rate, about 80%. This means that for 8 out of 10 people who have the laser treatment, the eye pressure is adequately reduced. But it might take more than one laser treatment to achieve this.

What are the risks?

All procedures can have complications. After laser treatment it is rare to have a bad problem. You can expect your eye to be sore for the first few days or weeks following the treatment, but this should return to normal. The vision may also be worse for the first few days after the laser treatment, but it should settle down again.

Some people notice that the eyesight is not quite as good in the long-term, following the laser treatment (about one line worse on the eyechart).

If you have a bad complication, the eye might end up a lot worse than before the treatment. This is very rare. Even more rarely you could develop inflammation of your non-treated eye. This does not tend to occur nowadays.

However, if you DON'T have the laser treatment there is a risk of slowly losing the vision or suffering ongoing pain because of glaucoma. We would only recommend the laser treatment if we felt that the risk is justified in your particular case.

Ophthalmology Directorate Cyclodiode Laser for Glaucoma

What happens on the day of the treatment?

You will be told on what day and what time to arrive. Please use your normal eye drops and other medications on the day of your treatment. Wear some comfortable clothes.

When you arrive the nurses will check you in. If you haven't signed a consent form the surgeon will get you to do this. If you have any questions, you can ask the surgeon before you sign the consent form. When it is your turn to have the laser treatment, a nurse will take you to the treatment room. They will put anaesthetic (numbing) drops into your eye that may sting.

What happens during the laser treatment?

You will be asked to sit on a reclining chair. An injection of anaesthetic will be given around the eye (sub-tenons) or through the lower eyelid (peribulbar). The injection can sometimes be uncomfortable, but it acts to numb the eye for the laser treatment.

You may have a clip placed in your eye to keep your eyelids open and prevent you blinking. About 40 shots of the laser will be applied to the white of the eye. You will hear a bleeping sound each time the laser is applied. You may feel a little discomfort during the laser but if you feel pain, please let the surgeon know and they can give more anaesthetic. Ointment will be placed in your eye at the end of the laser treatment and a patch or shield placed over your eye. You can usually go home within an hour.

We will prescribe some eye drops to help the eye to settle down. Usually, we will ask you to continue your glaucoma drops, as well. You will usually be seen in eye clinic

4-6 weeks later. If you have any concerns in the meantime, please contact us on the phone numbers at the back of this leaflet.

What can I expect after the laser?

Your eye may be red and sore when the anaesthetic wears off. If this happens, you should take normal painkillers. The sight may be blurred for a few days or even a few weeks, but it should settle down to a similar level to that before the laser was done.

More detail about possible complications

Rarely, the laser treatment can make the pressure in your eye become very low. This can make your vision worse than before the laser treatment. The vision may also be worse if swelling occurs in the retina (macular oedema) but in most cases this improves with time and with treatment.

There is a small risk of bleeding inside the eye that might make your vision poor

Ophthalmology Directorate Cyclodiode Laser for Glaucoma

for a few weeks. If the pressure goes extremely low, the eyeball could shrink, lose all vision, and look unsightly. This last complication is rare nowadays.

The laser can cause problems with the front of the eye (cornea), which might make your vision worse, or may cause pain in your eye. Your pupil may become larger or irregular after the laser treatment. You may also get a cataract - clouding of the lens inside the eye, a condition that develops in almost everyone as they get older.

If the laser treatment does not lower the eye pressure adequately, we may need to do further laser treatment. We may need to re-start your anti-glaucoma drops. We may also need to consider an operation.

Of course, if you do not have the laser treatment, there is a risk that the sight, or the pain, in your eye will get worse because of the glaucoma. Your doctors will have thought about these risks when deciding whether or not to advise you to have the laser treatment.

Please feel free to ask any questions that you want answered about the laser treatment.

What do I do if I'm having problems after the laser treatment?

If you think you are having a problem, please telephone us straight away. The emergency numbers are printed below.

EMERGENCY TELEPHONE NUMBERS

If you think you are having a problem with the eye, please contact us straight away. During normal office hours you should telephone the hospital where you had the laser treatment:

Norwich – 01603 288038
(Nelson Day Unit)

At other times, call switchboard at the Norfolk and Norwich University Hospital (**01603 286286**) and ask to speak to the eye doctor on-call

