

Local anaesthetic for an eye operation

Anaesthetics Department Patient Information Leaflet

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Introduction

A local anaesthetic is a drug that stops you feeling pain. For eye surgery, it can be given as eye drops and/or injections. After you have the local anaesthetic, you will still be awake and aware of what is happening to you. The aim is that you feel no pain during the operation.

What are the benefits of a local anaesthetic?

It usually works very well at preventing you feeling pain during an operation on the eye. It also gives you pain relief after the operation for several hours.

It has fewer risks and side effects than a general anaesthetic, especially if you are elderly. This is because it does not affect other parts of your body, such as your breathing or your heart.

People recover more quickly after surgery using a local anaesthetic and can go home on the same day. You can continue to take most of your normal medicines. You can eat and drink more freely with a local anaesthetic than with a general anaesthetic – staff at the hospital will advise you about this.

I would prefer a general anaesthetic: do I have a choice?

Yes. Nothing will happen to you until you understand and agree with what has been recommended for you.

If you prefer a general anaesthetic, you should discuss this with your surgeon. You will be referred to a pre-assessment clinic and may have investigations to decide your suitability for general anaesthetic. This is because there may be a medical reason why you should not have a general anaesthetic.

You may need to wait longer for your operation, as this may take more time than the process for local anaesthetic procedures.

How is the local anaesthetic given?

There are two types of local anaesthetic:

1. Some operations can be carried out with eye drops that numb the eye. No injections are required. Your surgeon will be able to tell you if this is possible for your type of operation.
2. Many operations require local anaesthetic injections. This includes operations where the eye must be kept very still. Drops are given first, to numb the surface of the eye. Then an injection is given near to the eye (but not into the eyeball itself).

Is the local anaesthetic injection painful?

This varies from person to person. Eye drops that numb the surface of the eye are used first to make it as comfortable as possible. A very fine needle is used and there may be a feeling of stinging or pressure, which usually lasts less than a minute.

Is there anything that means a person cannot have a local anaesthetic for an eye operation?

Yes. You will need to be able:

- to lie reasonably flat and still for 45 to 60 minutes
- to follow simple instructions

Local anaesthetic may not be possible if you:

- cannot lie reasonably flat
- find it difficult or impossible to keep still (for example, if you have Parkinson's disease)
- have a cough you cannot control
- have severe hearing difficulties
- will have difficulty understanding what is being said
- have severe claustrophobia
- have a known allergy to local anaesthetic drugs

If any of these points apply to you, it will be discussed with you and a general anaesthetic will be considered.

Who will give me the local anaesthetic?

Both anaesthetists and eye surgeons are trained to give local anaesthetics.

What are the risks of local anaesthesia?

Local anaesthesia for eye surgery is the safest anaesthetic for many people. Sometimes you may develop bruising or a black eye, as the injection damages a small blood vessel around the eye. This is not usually serious but can look unsightly for a week or so. It is more common if you take aspirin or other drugs that thin the blood.

Rarely, bleeding after the injection can cause problems around the eye. Your surgeon may decide that the operation will have to be delayed to another day.

Serious risks

Significant damage to the eye, blood vessels or eye muscles, which could result in the loss of the sight of that eye, and serious effects on your heart, blood pressure and breathing, can happen. These are rare or very rare. Your anaesthetist and eye surgeon will be able to give more information about these complications.

What happens before the day of the operation?

At your ophthalmology clinic appointment, nurses usually carry out an assessment and ask you about your general health. We will ask you about your home situation to make sure you will have enough support after the operation.

We will also ask you about your usual medicines. The staff in the pre-assessment clinic will record the medicines you take. Please bring a list, or the medicines themselves in their boxes. This should include any over-the-counter or herbal medicines that you take.

Most medicines can be taken as usual before the operation. However, some medicines or tablets must be stopped a few days before. We will give you instructions about what to take and what must be stopped. These instructions are important and must be followed carefully.

For example, if you take drugs to thin the blood/prevent blood clots (for example, aspirin, clopidogrel, rivaroxaban or apixaban), you will need specific instructions. If you take warfarin, you will usually be seen in your anticoagulant clinic about one week before surgery for instructions; and have a blood test on the day of surgery.

Can I have something to help me relax?

Your anaesthetist and other staff in the theatre are very used to giving reassurance which helps people relax. Sedative drugs can sometimes cause problems during the operation, if you become very sleepy and your breathing slows down. Please discuss your concerns with your anaesthetist or surgeon.

If you have requested a general anaesthetic or sedation, you will be given an appointment for a separate pre-assessment clinic where further investigations may be undertaken.

What happens on the day of the operation?

You should receive clear instructions about if and when you should stop eating and drinking. If you are having a local anaesthetic, you can eat and drink normally but those having a general anaesthetic or sedation will be given instructions on when to have their last food and water.

You should follow the instructions you have been given about taking your usual medicines on the day of your operation. You can have a sip of water to take any tablets, as needed.

If you have a cough or heavy cold on the day of surgery, you should telephone your consultant's secretary or the Day Surgery Ward (area 1) at Russells Hall Hospital for advice as your operation may need to be postponed.

Please bring all your medicines, tablets and inhalers with you so the doctors and nurses can check them.

Meeting the surgeon

Your eye surgeon (ophthalmologist) will come and see you. He/she will check which eye is being operated on and discuss the operation with you. You will be asked to sign a consent form and your forehead may be marked on the side near to the eye to be operated on.

Meeting your anaesthetist

If an anaesthetist is working with the eye surgeon, you will meet him/her and they will explain the local anaesthetic procedure and answer any questions that you have about the anaesthetic.

Ward staff will check your details, record your pulse, blood pressure, temperature and may check your blood glucose levels. When they are happy with these results, they can start giving you eye drops to dilate your pupil to make it bigger. Your sight will become slightly blurred.

What happens before I go to the operating theatre?

Most people can wear their own clothes during the operation. You should wear comfortable clothing that is loose around the neck. If you are having a general anaesthetic or sedation, you may be asked to change into a hospital gown.

It is sensible to use the toilet before you go to theatre so that you can lie still comfortably.

A member of the theatre team will accompany you to theatre. You can walk or we can take you by wheelchair or on a trolley.

Theatre staff will ask you some questions to check who you are, and what operation you are having. They will check again with you which eye is being operated on and check your consent form.

What happens in the anaesthetic room?

We will check you are comfortable on the operating trolley. Your anaesthetist may place equipment on you to monitor:

- your blood pressure: a blood pressure cuff will be placed on your arm
- the oxygen level in your blood: a clip will be placed on your finger (known as a pulse oximeter)
- your heart: sticky patches will be placed on your chest (electrocardiogram or ECG)

Theatre staff will again ask you some questions to check who you are, and what operation you are having. They will check again with you which eye is being operated on and check your consent form.

A needle may be used to put a cannula (thin plastic tube) into a vein in the back of your hand or arm. This is secured with sticky tape. This is for the anaesthetist to give you any drugs that you may need.

You are then ready for the anaesthetist or eye surgeon to give you the eye drops and/or injections that numb your eye.

You will have a clip placed in the eye to hold it open and be asked to look in a particular direction so the injection can be given. It is important to keep your head still and keep looking in that direction when the injection is being done.

Having the anaesthetic

Will the local anaesthetic injection hurt?

This varies from person to person. There may be stinging, pressure or pain, which usually lasts less than a minute. Drops will be placed in the eye before an injection is given to reduce any discomfort.

What happens after the local anaesthetic is given?

Your eye will be kept closed to prevent anything touching and damaging the surface of the eye. Staff may apply pressure or place a small weight on the closed eye to help the anaesthetic spread evenly.

How do I know that the anaesthetic is working?

Your anaesthetist or eye surgeon will check your eye to make sure it is numb. You may be asked to look in different directions to assess the effects of the anaesthetic. When they are happy that the anaesthetic has worked, you will be taken into the operating theatre.

What happens in the operating theatre?

Any monitors will be reattached.

The nurse will check you are lying comfortably. The operating trolley can be adjusted and/or pillows can be used to take the strain off your back and hips.

Theatre staff will again ask you some questions to check who you are, and what operation you are having. They will check again with you which eye is being operated on and check your consent form. If appropriate for your operation, they will confirm they have the correct lens for your operation.

A bar will be placed above you that will blow fresh air around your mouth and nose. This is to help you feel comfortable during the operation.

A sterile surgical drape (usually blue) will be placed over your face to keep the area around your eye clean. The sheet will have a hole in it so the surgeon can work on your eye. It will be kept off most of your face by the bar above you. It may be possible to provide a clear drape if you would prefer. After the drape is placed around the eye, it is important to keep your head as still as possible.

The area round your eye will be cleaned with a cold fluid. During the operation, water is used to keep your eye moist. You may feel it running down your face. This is quite normal.

A member of staff may offer to hold your hand throughout the operation.

Can I speak during the operation?

It is best not to speak whilst the surgeon is operating on your eye, as this will make your face move and could affect the surgery. However, if you have a problem, you can either say a clear **“stop”** or you will be asked to move your hand gently and the eye surgeon will stop operating so that you can speak.

What will I hear?

You will hear the surgeon speaking to the theatre team during the course of the operation. Equipment in the theatre can make gentle continuous sounds. The heart monitor may ‘bleep’.

Will I see anything?

You will usually be able to see bright lights and you may see some movement during the operation. This varies from person to person. You will not be able to see any detail.

What else will happen?

The surgeon operates with fine instruments that reach inside your eye – your eye is not removed from its normal position. You will be aware that the surgeon is working and may feel touch and pressure.

You should not experience any pain. If you are uncomfortable in any way, you must let theatre staff know, either by saying **“stop”** or raising your hand, so that more local anaesthetic can be given if necessary.

What if I blink?

A small clip keeps your eyelids open, so you do not need to worry about blinking.

Can I wear my hearing aid during the operation?

It is usual practice to remove the hearing aid on the same side as the eye being operated on because, even with care, water can enter the ear and the hearing aid may malfunction and start to make noises. We do cover the ear with gauze to reduce the risk of water entering the ear.

What happens after the operation?

A nurse will escort you back to the ward in a wheelchair.

Your eye may stay numb for two to three hours, although it can be longer. You may also experience some drooping of the eyelid and/or double vision before the anaesthetic wears off.

Your eye may be covered with a pad until the following day, to protect it and stop you from rubbing it while you are asleep. When the eye pad is removed, you may experience double vision for several hours.

When can I go home?

When you are feeling well and have had something to eat and drink, you can go home. The ward nurse will tell you about any medication you need to take. Eye drops may be used after surgery, to reduce inflammation (swelling) and help prevent infection. You will be given a date to come back to the clinic for a check-up.

Will I be in pain?

You may feel some pain from the operation when the anaesthetic wears off. You may need to use a painkiller such as paracetamol (always read the label; do not exceed the recommended dose).

If you experience severe pain, please contact the eye clinic or your GP immediately.

Do I need to take any special care?

- Avoid rubbing your eye.
- Take care in windy weather in case you get something in your eye.
- Avoid very heavy lifting, strenuous exercise and swimming for a period of time, as advised by the team looking after you.
- If your vision gets worse, or if the eye becomes very painful, you should contact the hospital immediately for advice using the numbers below.

Contact numbers

If you have any concerns, questions, or if there is anything you do not understand about this leaflet, please contact:

Eye Clinic on 01384 456111 ext. 3633 (9am to 4.30pm, Monday to Friday)

Eye emergency, out of hours

In case of an eye emergency after the closing hours of the Eye Clinic (including weekends and bank holidays), please contact the eye doctor on call by ringing the switchboard at:

Birmingham Eye Centre on 0121 554 3801

The doctor on call is usually based at the Eye Centre, City Hospital, Dudley Road, Birmingham. They may need to call you back and if necessary, they will arrange for you to visit them.

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

<http://dudleygroup.nhs.uk/services-and-wards/anaesthetics/anaesthetics-patient-information-leaflets/>

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This publication includes text taken from The Royal College of Anaesthetists' (RCoA) leaflet 'Local anaesthetic for your eye operation'. However, the RCoA has not reviewed this leaflet as a whole.

Original document at <http://www.rcoa.ac.uk/node/1858>

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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