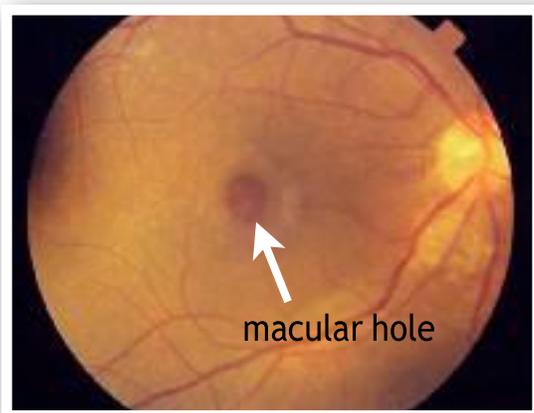
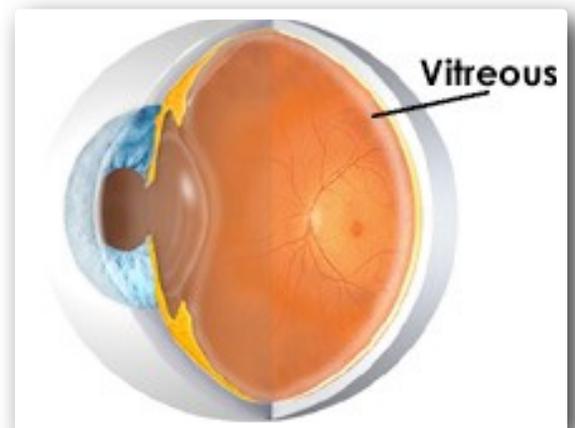
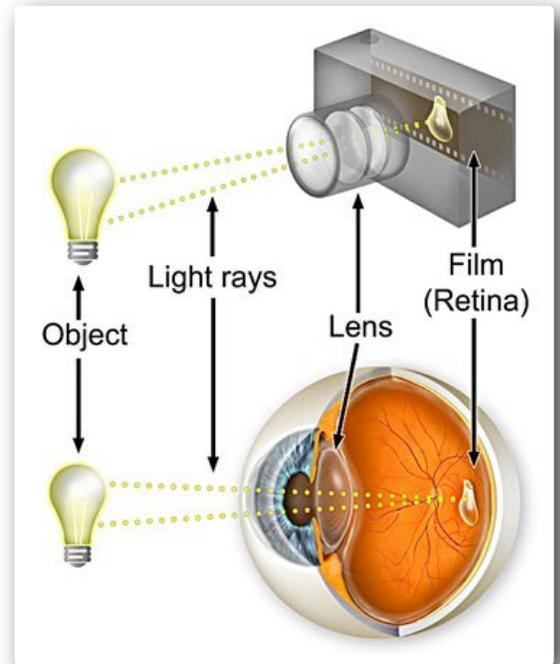


MACULAR HOLE

The eye works in a similar fashion to a camera. The front clear window (cornea) and the lens of the eye transmit the image that an object casts onto the retina, which acts like the film in a camera. The retina takes a picture and transmits that picture to the brain by way of the optic nerve. The macula is the part of the retina that gives us our central vision and our color vision. The inside of the eye is filled with a jelly like fluid called vitreous, it has the consistency of jelly but as we get older it becomes more liquid like. The vitreous gel can have an adherence to different parts of the retina. One of the areas the gel can adhere to is the macula. As the gel becomes more liquid like it moves in an opposite direction when the eye moves. If the gel has an adherence to the macula, when it moves it can tug on the macula. If the gel continues to tug on the macula it can produce a blister if it pulls on the blister it can form a macular hole.

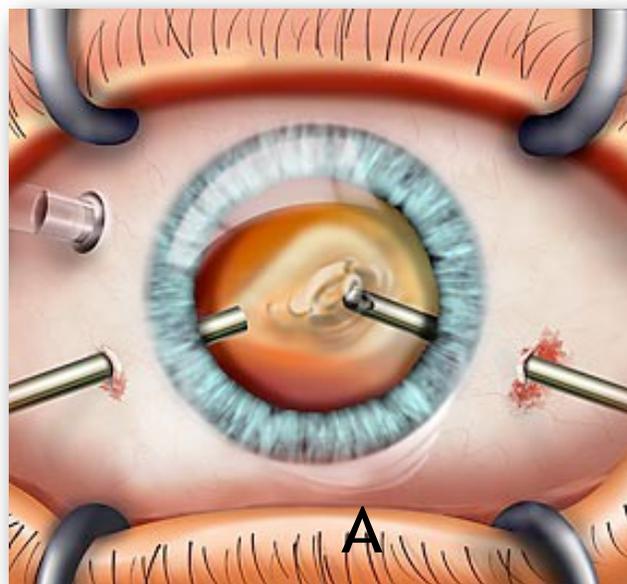


A macular hole can cause a loss in vision, a spot in your vision, and the edges of the hole can cause distortion in ones vision. As the hole enlarges symptoms can worsen.

Once you have been diagnosed with a macular hole, the doctor may advise surgery. The goals of surgery are:

1. Prevent the hole from getting larger
2. Flatten the edges of the hole

To prevent the hole from getting any larger a surgery called a vitrectomy (picture A) is performed. This involves removing the gel like fluid that fills the inside of the eye. By removing the gel we can remove the traction on the macula that caused the hole in the first place. Once the gel is removed it is replaced with a gas bubble called C3F8. The gas bubble will fill the entire back of the eye and will be reabsorbed by the eye and replaced with a clear fluid over a 5-6 week period. The purpose of the gas bubble is that it will float inside the eye just like it would anywhere else. On the first day after surgery, the doctor will have you position in a face down position to get the bubble to press against the edges of the hole. **The goal is to have you position for 45 minutes out of every hour, during the waking hours, for a one week period.** By doing so hopefully we can flatten the edges of the hole and lessen your symptoms. Approximately 80% of people who have the surgery feel they have improved to a point that they are happier.



The surgery is done as an outpatient at All Saints Surgery Center, which is located on the campus of Oak Hill Hospital. The surgery takes approximately 30-45 minutes. The doctor will see you in his office the day after surgery. You will be given a special chair (picture B) at that time to help with your positioning. When you arrive home, you will start your positioning as instructed. As with any surgery, there is always a risk including infection, retinal detachment, and cataract formation. The doctor will discuss these risks with you and will be happy to answer any questions you may have.