

Corneal suture removal

This leaflet provides information about the procedure to remove sutures (stitches) from your cornea following eye surgery and includes aftercare information. If you have any questions or concerns please speak to your eye specialist.

Corneal sutures

Corneal sutures (stitches) are used as part of many corneal operations, particularly penetrating and deep lamellar keratoplasties (corneal grafts). Corneal tissue heals slowly, and it is common for sutures to be left in place for many months prior to removal.

Once the cornea is judged to have healed, it is best to remove the sutures. This is to prevent later suture problems (such as breakage and infection), and to allow the cornea to achieve its final post-operative shape.

What are the possible risks following surgery?

- Infection of the cornea.
- Corneal graft rejection and/or failure.
- Corneal graft loosening and/or slippage. If this is evident immediately, we can replace the corneal sutures during the same operation. If it becomes apparent later then you will need a further operation to replace sutures.

Before surgery

There are no additional tests or checks needed before surgery.

What happens on the day of surgery?

- Removal of corneal sutures is usually carried out under local anaesthetic, using eye-drops to numb the eye.
- Before the operation, the eye and eyelids will be cleaned, and a sterile drape placed over the face. This does fit closely, but will be lifted up off the mouth and nose, with fresh air blown gently underneath the drapes.
- The procedure itself is not painful, but the operating light may appear very bright, and you will be aware of fluid washing over the eye, and most likely spilling down your cheek. Small tugging sensations can be expected as the sutures come out.
- The procedure will take around 15-30 minutes to perform, although this does vary between patients.

What to expect after the surgery

- The operation is not usually painful afterwards, but you will have a scratchy sensation as if something is in the eye. If there is pain, then non-steroidal medicines such as ibuprofen may be helpful.
- You will be given eye-drops to take after the operation. These include antibiotic (to prevent infection), steroid (to prevent corneal graft rejection), and lubricants (to help smooth over the incision). The drops will come with instructions to follow.
- You will have a post-operative check-up 1 week after surgery, checking for infection and graft problems.
- Driving – the legal requirement for driving is that you can read (with glasses or contact lenses, if necessary) a number plate at 20 metres, with both eyes open. You may be able to meet this requirement a few days after surgery but if you are unsure, or if you rely on your operated eye for driving acuity (perception), please ask for advice at your follow-up appointment.
- The effect of the procedure will be assessed about 6 weeks later, with measurements of corneal shape, refraction (glasses), and vision.

Contacting us

If you have a minor eye problem, please seek advice from your GP, optician or pharmacist. If urgent, please attend Eye Casualty or call 111.

Eye Casualty (Reading):	Mon-Fri 9am to 5pm; Sat & Sun & bank holidays 9am-12.30pm; Closed Christmas Day and New Year's Day.
Eye Casualty: Prince Charles Eye Unit (Windsor):	Mon-Fri 9am to 5pm; Sat 9am-12.30pm; Closed Sun & bank holidays.
Dorrell Ward (Reading):	0118 322 7172 (24 hours a day)
Eye Day Unit (Reading):	0118 322 7123 (Mon-Fri 7am to 6pm)

Outside of Eye Casualty hours, you should telephone your GP's out of hours' service, ring NHS 111 or if you have serious concerns, visit your nearest Emergency Department (A&E).

Further information

- NHS Website www.nhs.uk
- Specific Eye Conditions www.eyeconditions.org.uk

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

M Leyland, RBFT Ophthalmology, February 2023

Next review due: February 2025