

Who will do the injection?

It will be performed by either an ophthalmologist or a trained registered allied health professional, such as a nurse, orthoptist or optometrist.

After treatment

- Your eye is likely to be red. This is normal and should settle in a few hours.
- Your eye will feel gritty and watery on the day of injection – we will give you some lubricants to take home.
- You may see some floaters / blobs / spots in your vision immediately after your injection or later. These will disappear after a few days.

Signs of infection

The following symptoms may be the early start of an infection:

- Your eyesight deteriorates or becomes more misty.
- The injected eye becomes increasingly red all over, painful or a deep ache starts in the socket.
- Floaters increase in number and density.

If any of these symptoms occur, go straight to your nearest eye casualty or emergency department.

Contact details

For any appointment or non-urgent queries call: 0118 322 7169 – select option 2 and then option 2 again.

If you have any urgent symptoms, please attend eye casualty:

- **Eye Casualty (Reading):** Mon-Fri 8.30am to 5pm; Sat & Sun & bank holidays 9am-12.30pm; Closed bank holidays.
- **Eye Casualty (Windsor):** Mon-Fri 8.30am to 5pm; Sat 8.30am-12.30pm; Closed Sun & bank holidays.

Patient responsibility

If you do not receive an appointment, please ring the department on the number provided. **If you wish to cancel / reschedule, please let us know as soon as possible.**

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

Marianne Burgess, Sarjo Jammeh Gibba, RBFT
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The Patient Pathway for the Macular Service



This leaflet explains each step of your journey as a patient of the Macular Service – from initial referral to treatment. This is known as the ‘patient pathway’

The appointment

You can expect the following:

1. Checked in
2. Vision test
3. OCT scan / photos
4. Treatment if required

During the appointment

Wet AMD is treated with an Anti-VEGF inhibitor (vascular endothelial growth factor) medicine, which is injected into the back of the affected eye.

Multiple injections will be required.

The goal of treatment is to stabilise your sight and prevent further loss of vision, rather than restore sight. However, some patients do notice an improvement in their vision.

Which drugs are used?

Treatment will vary depending on your individual condition. The drug chosen will depend on the clinical findings. These are a list of the drugs used in the RBH Macular Service.

- Aflibercept (Eylea or Biosimilar)
- Ranibizumab (Ongavia or Biosimilar)
- Bevacizumab (Avastin)
- Faricimab (Vabysmo)

Treatment pathway

We use two main treatment pathways:

- **Treat and extend:** You will have an injection at each visit. Your follow-up will be altered according to your vision and OCT eye scan results.
- **PRN:** You won't necessarily receive an injection at each visit. Your treatment will depend on your vision and OCT scan results.

Advice beforehand

- No face powder / foundation and eye makeup.
- Take any regular medication, including eye drops.
- Report any heart attack, mini stroke or stroke in the last three months.
- Report recent eye infection.
- Remove contact lenses.

Before we go ahead

- A health professional will talk to you about the procedure and ask you to sign a consent form.
- We will do patient safety ID checks.
- The site of injection will be marked on your forehead and you will be given a patient ID wristband.

Treatment

Outside the injection room:

- The health professional will do some initial checks with you.
- We will give you two lots of eye drops, one anaesthetic (numbing) and the other antiseptic (to reduce infection risk). You may temporarily see a brown hue in your vision.

In the injection room:

- Some initial checks will take place.
- Ask if you want your hand held, to reduce any stress or anxiety.
- We will ask you to lie flat on a bed (if you are unable to lie flat, you can get treatment in a wheelchair).
- The skin around the eye will be cleaned with Povidone Iodine.
- A plastic device (Invitrea) is inserted that just sits on the top of the eye to keep the eyelids out of the way.
- You may feel a small pressure as the injection goes in; this may vary between patients and injections.
- The Invitrea is removed and the iodine washed out with saline solution. The skin around the eye is also cleaned to remove any iodine.
- We will ask you to count fingers. This is important to ensure that your vision hasn't gone dark due to the injection.