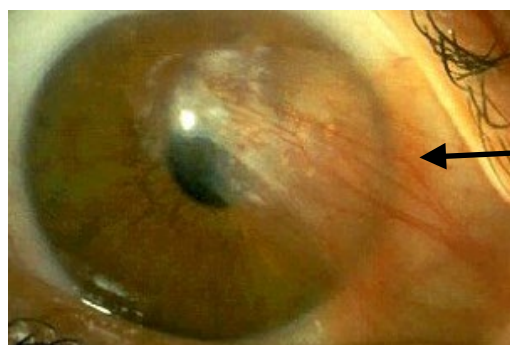


Pterygium

This leaflet explains what pterygium is and how it can be treated. If you have any questions please ask your doctor or nurse.

What is pterygium?

Pterygium (meaning 'wing-shaped') is the name given to a degenerative/'wear and tear' change of the surface of the eye, which results in growth of conjunctival tissue (from the white of the eye) across the cornea (the clear window through which you see). The pterygium is red, fleshy, and thickened in comparison with the normal conjunctiva. Pterygium is **not** a tumour or cancer. It is sometimes also called 'Surfer's eye'.



Area of pterygium visible on the cornea

What are the symptoms?

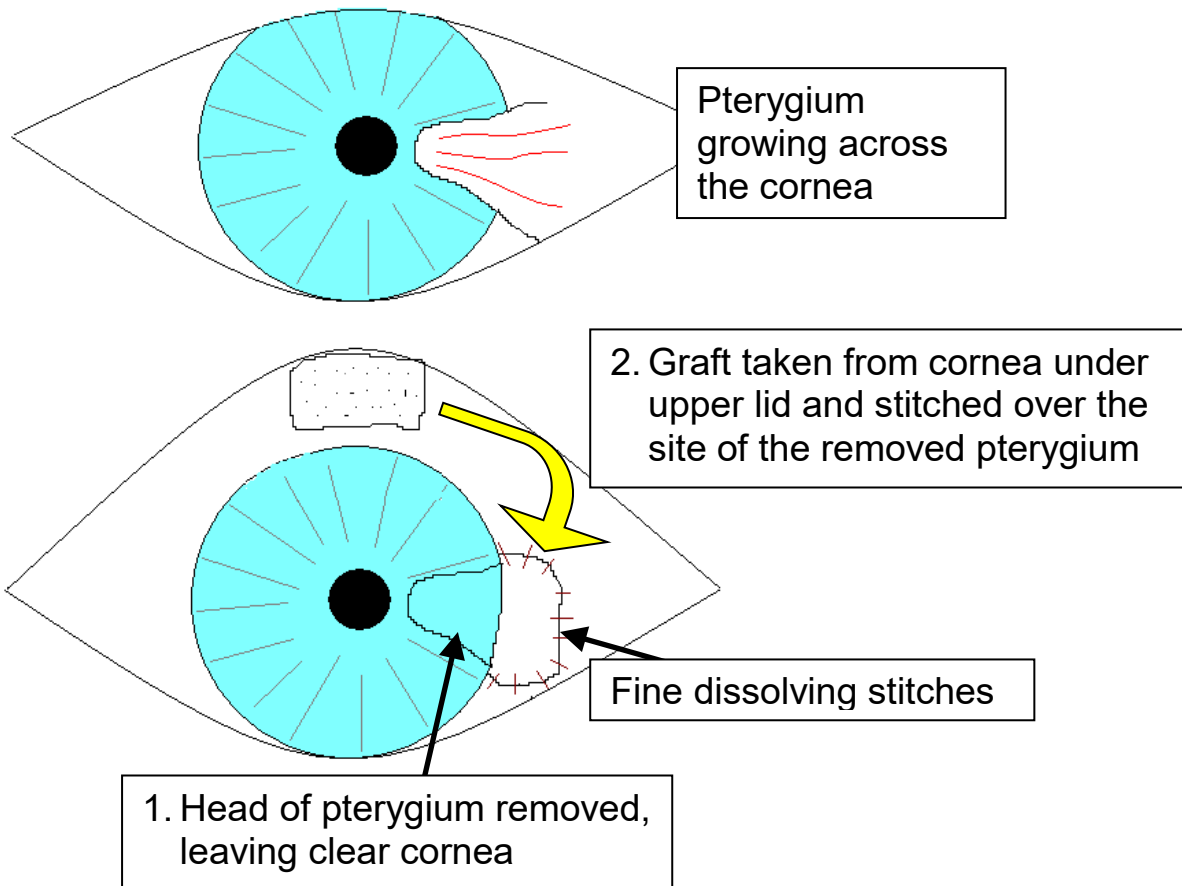
A pterygium may be unsightly, and cause obvious redness of the eye. They can be uncomfortable, often causing a sensation of dryness or of a foreign-body in the eye. Most seriously, they may cause reduction in vision, either by inducing astigmatism (change in the shape of the eye) and irregularity of the cornea or by physically obstructing vision.

How can pterygium be treated?

- Treatment is not always necessary as in many cases a pterygium will grow 1-2mm onto the cornea and then stop. If the pterygium is small and not causing symptoms then no treatment is needed.
- Symptoms of dryness, foreign-body sensation and discomfort are often eased by artificial tears. If not or if the pterygium is unsightly or affects vision, it may be necessary to proceed to surgery.

Pterygium surgery

The operation can be performed under local anaesthetic, with the eye frozen or numbed by eyedrops, or under general anaesthetic, with the patient asleep. The pterygium is carefully cut away from the eye. If a bare patch is left there is a high likelihood of recurrence. This is made less likely by using a 'conjunctival autograft' to fill the defect on the white of the eye left by removing the pterygium. Conjunctival tissue is taken from under the upper lid and sewn into place over the defect using dissolving sutures.



Recovery after surgery

For the first one or two days after the operation the eye is painful. This then becomes a scratchy, itchy, foreign body sensation for 1 to 2 weeks. It is recommended that you remain off work for 1-2 weeks.

Check with your consultant before resuming driving as your safety will depend on your vision in both eyes so every patient is different.

The eye will be red and swollen over the surgical area for several weeks, settling over about 3 months.

Antibiotic eyedrops are prescribed for 2 weeks to prevent infection, and steroid eyedrops are used for up to 3 months to help reduce inflammation.



Before surgery



After surgery

What complications might occur?

- **Infection:** This may occur but can usually be treated with antibiotics eye drops.
- **Recurrence:** A pterygium may recur in up to 10% (1 in 10) cases, usually within the first year after surgery. If the pterygium does come back it may be more aggressive (fast growing) and progressive (bigger) than before surgery. Surgery can be repeated, but with lower success rates. Repeat surgery may require the application of chemicals to the eye at the time of surgery to prevent regrowth of the pterygium. This may improve the likelihood of success, but with the risk of delayed healing and other complications.
- **Graft failure:** In a few patients (approximately 5% (1 in 20)) there may be problems with the conjunctival graft, including failure of the tissue to establish itself in the new site and separation or loosening of stitches. Further surgery may be necessary.
- **Ocular damage:** With large pterygia, and especially with 'redo' surgery, there is a risk of damage to the surface or the muscles of the eye. In the worst case, further repair surgery might be needed, and it may not be possible to restore a normal eye. Permanent loss of vision, or double vision can result.

Where can I find more information?

- <https://www.fightforsight.org.uk/about-the-eye/a-z-eye-conditions/pterygium/>
- <https://patient.info/eye-care/eye-problems>
- Visit the Trust website at www.royalberkshire.nhs.uk
- NHS Website www.nhs.uk
- Royal College of Ophthalmologists Tel: 0207 935 0702

Contacting us

If you have got a minor eye problem, please seek advice from your GP, optician or pharmacist. If you think your problem might be urgent, please attend Eye Casualty.

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| Eye Casualty (Reading): | Mon-Fri 8.30am 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 8.30am to 5pm; Sat 8.30am-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) |
| Eye Day Unit (PCEU Windsor) | 01753 636496 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).

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

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

RBFT Ophthalmology, September 2023

Next review due: September 2025