

Surgery can mend retinal 'splits' in ageing eyes

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Q I am 68 years old. I have been diagnosed after a scan with a split membrane in my left eye.

The split is at the back of my eyeball. It's now halfway down the eyeball. I could lose my sight if the split goes all the way down.

My doctor told me that there is no treatment as this is an age-related problem.

Can you please elaborate on this and whether there are any steps I can take to prevent further splits?

A The condition based on what you described seems to be a lamellar hole in the macula (which is the central part of the retina).

It is a condition in which an area of the retina has undergone some degenerative changes.

Ageing, myopia and, rarely, trauma, are risk factors of this condition.

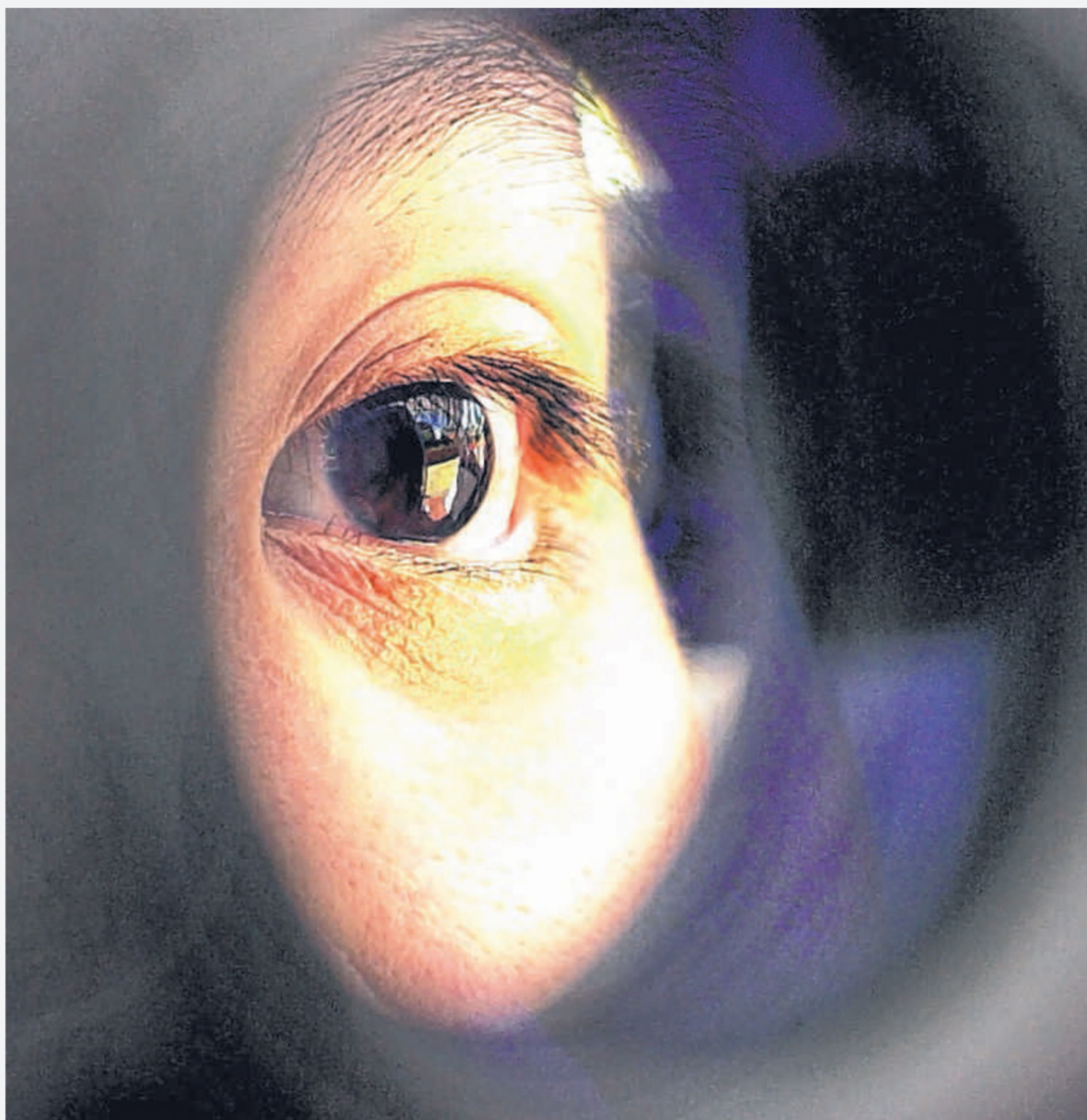
When the "split" is partial thickness, it can lead to distortion of your vision as the split retina occurs in the central part of the retina which is responsible for central vision.

If left untreated and when the split extends through to the full thickness of the retina, it will result in a central circular area of blur or darkened vision as the central retinal cells are lost.

This condition can be treated by surgery if your vision is significantly affected, compared to before.

Surgery involves removing the vitreous gel at the back of your eye that may be pulling on and causing tension on the central retina.

It also involves peeling off a



There is little one can do to arrest the deterioration of "splits" in the macula. However, successful surgery can mend the retinal defect and improve vision distortion. ST FILE PHOTO

membrane on the surface of the retina to relieve the tension on the retina.

A self-absorbable gas may be injected into the eye to assist with closure of the defect in the retina.

You may be required to posture face down for two weeks post-operatively if gas is injected.

The procedure is one of day surgery.

The chance of success with surgery is about 80 per cent to 90 per cent. Success refers to the ability to mend the retinal defect and the ability to improve the distortion in your vision. If surgery is successful, the defect should not return.

Unfortunately, there is nothing much one can do to prevent further progression of the condition.

For further clarification, see an ophthalmologist.

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Dr Harold Choi



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