

Anaesthetics – risks and side effects

Injuries to the eye

About this leaflet

This leaflet is about the risk of injuries to the eye during or after a general anaesthetic. It explains the causes and what can be done about it.

General anaesthetics are medicines that give a deep sleep-like state. They are essential for some operations and procedures. During a general anaesthetic you are unconscious and feel nothing.

You can read about different types of anaesthetics on the RCoA website:

rcoa.ac.uk/patientinfo/resources.

About injuries to the eye

- The most common injury is when the cornea (the transparent front part of the eye) gets scratched during the operation.
- You might wake up with blurred vision, irritation or pain for few days after your operation.
- Most injuries heal without long-term effects on your vision.
- Some injuries can be more serious and long lasting, but this is very rare.

How likely is it to happen?

Out of every 10,000 people

4 had some irritation, pain or blurred vision

9,996 did not

These numbers come from research studies. You can see where we got our numbers on our website: rcoa.ac.uk/patientinfo/risks/evidence.

Why does it happen?

During a general anaesthetic, your eyes may not fully close and may produce fewer tears. This means that your eyes can become dry during a general anaesthetic.

Without their natural lubrication your eyes are more likely to get scratched.

Your eyelid can stick to the eye and rub against it when you wake up from the anaesthetic.

Something can rub against your eye if it is not completely closed, for example, one of the surgical sheets.

What can help prevent it?

There are things that the team looking after you can do to protect your eyes during surgery. They might:

- use tape to keep your eyes closed
- put lubricating eye drops or ointment in your eyes during the operation
- cover your eyes with a mask, cushion or eye-pad to protect your eyes
- monitor your eyes regularly during the operation.

Your anaesthetist will always try to make sure that your eyes are closed and lubricated throughout the surgery.

What can I do?

- On the day of the operation you should remove contact lenses.
- You should also remove removable eyelashes and any make-up before coming to hospital.
- You should let the anaesthetists know if you have permanent or semi-permanent eyelashes or eyelash extensions because these can get damaged.
- You should tell your anaesthetist if you have naturally dry eyes.

What can make it more likely?

- If you need to lie on your front during the operation
- If your operation lasts a long time
- If you are having surgery on your head or neck
- If you have naturally dry eyes.

What other eye problems might happen?

Bruising to the eyelid

This can happen if tape is used to keep the eye closed. It's more likely to happen if you bruise easily or have fragile skin.

Eye irritation

This can feel like you have something in your eye. It can happen if your anaesthetist uses tape or ointment to protect your eyes. It can last for up to eight hours.

Injuries to the eye

Droopy eyelid

This can happen if there is pressure on the nerves in your eyebrow during the operation. It is usually temporary and goes away in days or weeks.

Blindness

This is very rare. Blindness can happen if the optic nerve or retina doesn't get enough oxygen during the operation. This can happen if you have: very low blood pressure, tiny blood clots or too much pressure on the eyeball.

Out of every 100,000 people with these conditions

1 went blind

99,999 did not

You are at higher risk of blindness if you have surgery on your spine or open heart surgery, and you:

- have high blood pressure
- have had a heart attack or stroke in the past
- have diabetes
- have high red blood cell counts.

Out of every 100,000 people with these conditions who had this type of surgery

30 to 90 went blind

99,910 to 99,970 did not

Injuries to the eye

This leaflet has been produced by Leila Finikarides for the RCoA, in collaboration with patients, anaesthetists and patient representatives of the RCoA.

Disclaimer

We try very hard to keep the information in this leaflet accurate and up-to-date, but we cannot guarantee this. We don't expect this general information to cover all the questions you might have or to deal with everything that might be important to you. You should discuss your choices and any worries you have with your medical team, using this leaflet as a guide. This leaflet on its own should not be treated as advice. It cannot be used for any commercial or business purpose. For full details, please see our website: rcoa.ac.uk/patientinfo/resources#disclaimer.

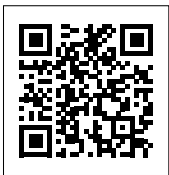
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Tell us what you think

We welcome suggestions to improve this leaflet.

Please complete this short survey at: surveymonkey.co.uk/r/testrisk. Or scan the QR code below.



If you have any general comments, please email: patientinformation@rcoa.ac.uk.

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This leaflet will be reviewed within three years of the date of publication.

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