

FACT SHEET

Floaters and Flashes Posterior Vitreous Detachments (PVD) and Retinal Detachments

What are floaters?

Often, people who have healthy eyes see floaters. They appear as spots, lines or cobweb effects, usually when looking at a plain surface such as a white wall or clear blue sky. They often appear as the clear jelly (vitreous), filling the main part of your eye becomes older. Posterior vitreous detachments (PVDs) are innocuous.



What are flashes?

As the vitreous jelly in the eye shrinks (PVD) it can tug on the retina (the light sensitive layer) at the back of the eye. This can cause flashes of light at the edge of your vision. These differ from the flashes which occur with migraine.

When should I be concerned?

Unfortunately flashes and floaters can also be a sign of retinal tears as well as simple PVDs. If you suddenly notice a shower of new floaters, or floaters along with flashes, or a dark shadow or 'curtain' in your vision, then you should seek advice urgently. These symptoms might mean the retina is tearing.

What will happen if the retina tears?

The retina is at the back of the eye. It receives the images and then sends them to the brain. This is one of the things which enables you to see. If the retina tears, it may come away from the back wall of the eye. This is called a Retinal Detachment. It can result in partial or complete loss of vision so prompt attention is essential.

- LOOK OUT FOR :
1. flashes or floaters getting worse
 2. a black shadow in your vision
 3. a sudden cloud of spots
 4. a curtain or veil over your vision
 5. Any sudden loss of vision

Types of Retinal Detachment.

A Retinal Detachment (RD) refers to the separation of the light sensitive layers of the retina from the underlying retinal pigment epithelium.

There are 3 types of retinal detachment:

1. Rhegmatogenous

A tear or break in the retina is the most common form of retinal detachment. Called Rhegmatogenous, vitreous fluid enters the break and separates the sensory retina from the back of the eye.

Common causes include short sightedness, previous eye surgery and Trauma.

A tear may be treated by using a laser.

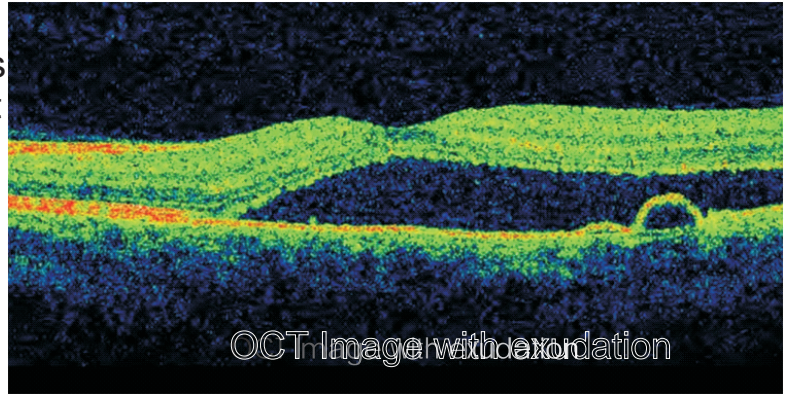
If your retina has become detached, you will need surgery. The surgery may restore most of your vision but if there has been a long delay before seeking help, this may come too late for full recovery. So the sooner it is detected the better.

Remember : **Do Not Delay.**

2. Exudative Retinal Detachment

Exudative retinal detachments are far less common. The retina remains unbroken but fluid from beneath the retina accumulates and pushes the retina forward. This can sometimes occur in conditions causing inflammation and swelling inside the eye and some rare types of cancer that develop inside the eye.

Because the cause of the problem is beneath the retina these are very difficult to see. To definitively diagnose these we MUST see beneath the retinal surface. We must therefore recommend the Ocular Coherence Tomographer (OCT) for anyone reporting new onset floaters, flashes or reduced vision. Unfortunately this is not funded by the NHS and therefore carrying a small charge.



3. Tractional Detachment

Damage or bleeding inside the eye can cause scar tissue to form, which can pull the retina out of position. Diabetes is an example of a condition that can cause tractional RD. Diabetes can also cause an exudative detachment and again OCT would be recommended.

What should I do if concerned?

If we are open you can come straight to the practice. If you phone our practice and describe the symptoms, the receptionist will advise you to come in immediately. Do not make a routine appointment which might take several days. The optometrist will need to put drops in your eyes to make your pupils larger for a better examination (afterwards you may find driving difficult). If the optometrist believes there is a problem he/she will send you directly to the Ophthalmology Department at the RVI with a referral letter.

Since we are not funded by the NHS for these extended services there may be a charge. If we are closed or if you do not wish to pay the necessary charges, then you should go to the Accident and Emergency Department of the RVI.