3. What happens if I forget and look up for a short period of time?

It will **NOT** damage your eye or cause a problem. However, we recommend that you try to position face-down as much as possible.

4. What if I have a back or neck problem?

It is important to discuss this with the doctor prior to surgery. Of course, short breaks can be taken after surgery to stretch the back and massage your neck.

5. Can I sit. work or exercise?

Short breaks with exercise are encouraged to prevent stiffness and soreness. For short periods of time, the head can be straightened while you are walking or sitting. If you are comfortable with it, you can walk or sit with your head in the face-down position.

6. What will I see out of my operated eye?

Initially, the gas bubble will prevent you from seeing anything except movement and light. As the gas bubble disappears, you will see a line coming down from the top. This line will be parallel with the horizon as you look ahead. As the bubble gets smaller, you will see a small dome shape in the bottom part of your vision. It may break up into smaller bubbles before disappearing.

7. Can I travel with the gas bubble in my eye?

Flying in an airplane or going up into the mountains is **NOT** allowed until the gas bubble is small. This is because the gas bubble expands at altitude and can give you an acute type of glaucoma which will damage your vision. Discuss any travel plans with your doctor.



Macular Hole Surgery Face-Down Positioning

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A. Introduction:

You have been diagnosed with a macular hole. Your doctor will discuss the possibility of surgical repair of this condition, including the risks, benefits and possible success of the procedure. During surgery, a gas bubble will be placed in the eye to bandage the hole. Because keeping this gas in contact with the macular hole is vital to the successful closure of the hole, positioning is an important part of your recovery.

The most important thing you can do to improve the chance of success of your surgery is to maintain the proper position for at least seven (possibly up to 10) days following the surgery.

B. Hints for Face-Down Positioning:

1. Preparation

It is much easier to get your home set up before the surgery. Brochures for rental of positioning equipment are available through our office. Patients generally find it is easier to maintain position with the equipment. Also, there is less pressure on the back and neck. The equipment is available through our office. Some patient's insurance companies do cover the cost of the equipment. It is a good idea to practice with the equipment prior to having the surgery.

2. Trip Home

Generally, lying on either side during the trip home is acceptable. Bring a pillow from home with you for more comfort. If possible, you can start the face-down positioning on the way home. Being on your back is not recommended.

3. Meals, Bathroom and Short Breaks

For short periods of time, it is okay to maintain a face straight ahead position while you are eating, going to the bathroom or taking short breaks. However, remember if you are not face-down for prolonged periods of time, this could affect the surgical outcome.

4. Reading

During face-down position, it is okay to read for short period of time. The book can be placed on the floor or on a couple of pillows. The eyes do move significantly during reading so doing this for prolonged periods of time is not recommended.

5. Sleeping

The positioning equipment is useful during the day as well as for sleeping. Face-down positioning is just as important at night as it is during the day so try to maintain it throughout the 24 hours by using the equipment.

C. Common questions and answers:

1. Why do I need to keep my head down?

The head-down positioning is important to keep the gas bubble against the hole in the centre of the retina. This bandages the hole and allows it to close.

2. Do I need to hold my head down all the time?

Yes we think that positioning for 24 hours per day for a total of 7 days gives you the best chance at a successful outcome.