

Retinal Vein Occlusion

Case study A

68-year-old woman from Cambridgeshire.

From symptoms to seeking medical help

Mrs A noticed problems with her eye at the end of April 2010 when she left up one morning and realised that she had blurred vision in her left eye. She described it as if she was looking through glasses that had splashed drops of water on them. When the blurred vision did not disappear after a couple of days she went to her optometrist. She was told that she needed to see a consultant and was referred to Hitchingbrooke Hospital. However, the hospital told her that she needed a GP referral so she went to her GP who referred her straight away. She was given an appointment in six weeks but eventually saw the consultant after three weeks due to a cancellation.

Hospital treatment

At her appointment on 11 May the consultant explained that she had blood and fluid had leaked from the veins at the back of her eye and that this was the cause of her visual problems. Mrs A had developed central retinal vein occlusion with macular oedema. The consultant explained that he could try steroid injections but mentioned a new treatment that might benefit her and asked her to consider this option. Mrs A decided to try the new treatment, Ozurdex, and was treated on 11 August 2010. Before the treatment she was concerned about having an injection in the eye. However, in the event she did not even realise that she had had the injection. She was given eye drops to dilate the eye, then anaesthetising drops to numb it, a paper facemask was put over her eye and then she was told to look right. She felt some pressure on the eyeball and assumed those were the clips used to hold her eye open but at that point the consultant had already done the injection. She then went into another consulting room where the consultant looked into her eye with an ophthalmoscope and confirmed that the implant was in place. Her appointment started at 6pm and she left the clinic at 6:45. When she got back home her eye was swollen and sore but she had been told to ice it and use

paracetamol and had not more pain after 24 hours. She also had to take antibiotic eye drops four times a day for one week to minimise the risk of infection.

Advantages of the treatment

Mrs A has been wearing glasses for myopia since the age of 8 and is therefore very aware of the importance of looking after her eyes. For her it was therefore an obvious decision to request treatment for her condition even though she had to pay for it privately. She was very pleased with the treatment and surprised at the speed with which it was administered. It did not hurt and her vision improved as a result.

Before the treatment the sight in her left eye had deteriorated to 6/24 and she had started to find it more difficult to pursue her main hobbies: reading and craftwork. Now her sight is much better and since her right eye has 6/6 best-corrected visual acuity she is able to pursue her hobbies and also drive.

Disadvantages of the treatment

Mrs A felt that there were no disadvantages especially since the treatment would last for at least six months and may not need to be repeated. However, she felt strongly that patients should not have to pay for it.