

Pneumatic Retinopexy Surgery

This material will help you understand your pneumatic retinopexy surgery and what you can expect.

What is pneumatic retinopexy surgery?

Pneumatic retinopexy involves the injection of a gas bubble into the center of the eye. It is commonly used in treating retinal detachments, where the retina has pulled away from its position at the back of the eye. The gas bubble fills the space in the middle of the eye and pushes the retina back in its place. The gas bubble will disappear over time. Pneumatic retinopexy is usually done in combination with a laser or freeze treatment to make sure any tears in the retina are sealed.

What do I need to know before my surgery?

There are no special preparations for this procedure. You should eat normally and take all your regular medicines before you come in for surgery.

The procedure is typically performed in your doctor's office, so you will be able to go home the same day. Be sure to arrange for a responsible adult to come with you, stay during surgery, and take you home. Your eyes will be blurry after the surgery, so you should not drive.

What should I expect on the day of my pneumatic retinopexy surgery?

On the day of your procedure, you will come to the Kellogg Eye Center clinic. A technician will take a few measurements of your eyes and apply eye drops. This will numb your eye and prepare you for the treatment. An injection of local anesthesia will also be used to further numb the eye. You will remain awake and comfortable during the procedure.

After the anesthesia takes effect, your eye doctor will inject the gas bubble into your eye. The bubble fills the space of the tear and flattens the retina against the back wall of the eye. Your eye doctor will likely position your head in a certain way so that the bubble reaches the tear.

The eye doctor will use either a laser or freeze treatment (called “cryopexy”) to seal any tears in the retina. The freeze treatment is done just before the gas bubble is injected. The laser treatment is used either after the gas bubble is injected or the following day.

What should I expect after my surgery?

Your doctor may patch your eye for several hours. You will likely need to return for a follow-up visit the next day, and again a week later. Your eye will be red and puffy, and you may have some mild pain. Your doctor may prescribe pain medications and/or steroid eye drops to make you more comfortable. You must restrict your activity for the first week to help your eye heal properly.

Your eye doctor will give you specific instructions on how to position your head so that bubble stays in the right place and the retina heals correctly. You will need to position your head for 1-2 weeks. It may take up to a month for the bubble to completely go away. It is important that you do not fly in an airplane, scuba dive, or use nitrous oxide (“laughing gas”) until the gas bubble is gone. This will lead to an unsafe change in eye pressure.

Your eye doctor will let you know when it is safe to go back to your normal activities.

Your vision will improve slowly over time. Your best vision may not return until months following surgery.

Are there any complications related to pneumatic retinopexy surgery?

With any surgery, there is a chance of a complication. Your doctor will discuss many of these with you when s/he talks with you about consenting to surgery. There is also the chance that your retina detaches again. If this happens, you will need to have further surgery.

You should call your eye doctor right away if you have any of these symptoms (or any others that worry you):

- Increased pain not helped by Tylenol® (Acetaminophen)
- Change in vision
- Any redness or swelling around the eye gets worse

If you call the clinic after clinic hours, you will be told how to get in touch with the eye doctor on call. There is an eye doctor on call every day of the year.

For more information, scan this code with your smartphone or visit the website listed.



<http://www.webmd.com/eye-health/pneumatic-retinopexy-for-retinal-detachment>

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Last Revised 02/2015