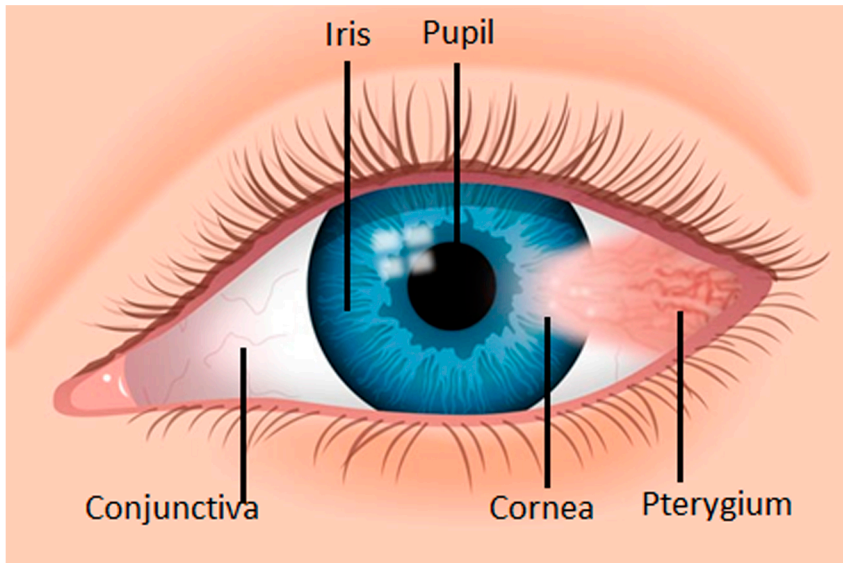


PTERYGIUM

PTERYGIUM EXCISION WITH CONJUNCTIVAL AUTOGRAFT

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Nik has a specific interest in conventional and laser assisted cataract surgery, laser vision correction, alternatives to laser surgery, cornea transplantation, pterygium surgery and the management of keratoconus.

What is a pterygium?

A pterygium (tuh-RIJ-ee-uhm) is a growth of the conjunctiva that may grow towards the cornea. It is usually a painless lesion that covers the white of the eye. The pterygium extends across the cornea, iris (coloured part of your eye) and may even reach the pupil in more severe cases.

Signs and symptoms

A pterygium is often first noticed by a lesion appearance on the eye, and more commonly occurs on the nasal side (white part of the eye closer to your nose). Sometimes they may occur on the other side of the eye and affect one or both eyes. It may present as a pinkish, reddish, whitish, yellow or greyish lesion and may sometimes appear raised. Often, patients will report feelings of irritation and inflammation. Other symptoms include dryness, redness and excessive tearing.

A pterygium may start to impair vision if it grows on the cornea (blocking vision), alters the shape of the front of the eye as it “tugs on it” causing distorted or blurred vision, or even prevent patients from achieving better vision with contact lenses as it is too uncomfortable.

Nik graduated in Medicine from the University of Newcastle in 1998, then completed an ophthalmology residency at the Sydney Eye Hospital and undertook subspecialty fellowship training in Cataract, Cornea and Refractive Surgery at the University of Toronto in 2009.

Nik is a Clinical Senior Lecturer in Cataract, Refractive and Cornea Surgery at the Australian School of Advanced Medicine, Macquarie University. He is a member of the Australian, American and European Societies of Cataract and Refractive Surgery and Cornea Societies. He has published numerous peer-reviewed papers and book chapters involving his specialty interests. Nik was amongst the first surgeons in Australia to perform femtosecond laser assisted cataract surgery.



Causes

The causes of pterygium development are under constant investigation. The predominant cause identified is exposure to ultra-violet radiation. Other suspected causes include exposure to dry, windy and dusty environments (often exacerbating dry eye disease). Some studies also suggest that pterygium development may have a hereditary component. Chronic inflammation may also contribute to pterygium development, but this requires further research.

Am I at risk of developing a pterygium? What could I do to prevent it?

Individuals that are 30-50 years old are usually more likely to develop a pterygium, however it can occur at any age (rarely seen in children). Those that have lighter skin and lighter coloured eyes may have an increased risk of developing a pterygium. Individuals exposed to coastal environments with excessive sun exposure and wind or outdoor occupations may also have a higher risk. Adequate sun protection can help to reduce your chance of pterygium development – sunglasses that wrap around and wide brim hats to block UV rays. In dry and windy climates, ensure the eyes stay lubricated using artificial tears.

How is a pterygium diagnosed?

A pterygium is diagnosed after a thorough ocular examination of your eyes. It is important to correctly diagnose a pterygium to ensure that the growth is not sinister in nature.

How is a pterygium managed?

If a pterygium is inflamed, irritating, raised or encroaching the cornea and significantly impeding vision, it should then be removed. In most mild cases, irritation and dryness can be relieved using lubricants.

How is it removed? Will there be any pain?

The pterygium is removed under aseptic conditions in a hospital. You will be discharged that same day, no need to stay overnight. You will be comfortable and relaxed during the procedure as you will be attended to by the anaesthetist prior to surgery. The pterygium will be removed as well as the tissue covering the white part of your eye (conjunctiva). As a result, the area that has been removed will be covered with an autograft using the conjunctiva from another part of your eye. This is to promote healing and aid recovery from the pterygium removal. Dr Kumar prefers to use innovative technology – fibrin glue as opposed to older methods requiring sutures.

Recovery from pterygium removal

A bandage contact lens is placed over the eye to promote comfort and healing. You will need to take a series of post-operative eye drops (anti-bacterial and anti-inflammatory) for approximately four to eight weeks while the eye is still healing. The vision may be blurry until the surface of the eye settles down. The eye may also feel gritty, and dry and it is advised to use copious amounts of lubricating eye drops to promote comfort. The eye may also be red around the area of pterygium removal and this will resolve in time. You will also need to attend follow up appointments with Dr Kumar to monitor your healing and progress. Although surgery is the only definitive way to remove a pterygium, the pterygium may recur. There are some cases in which the pterygium may potentially require another surgery.

