



## Procedure Information – Laser Therapy for Eye Diseases

Visit No.: Dept.:  
Name: Sex/Age:  
Doc. No.: Adm. Date:  
Attn. Dr.:  
Patient No.: PN

Page No:

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affix patient's label*

### Introduction

Laser is commonly used to control/ to treat retinal diseases or glaucoma in ophthalmology. High intensity laser light reaches the iris and retina to induce thermal, chemical and other photochemical effects for treatment.

1. In case of after cataract, laser therapy can only prevent further deterioration but not improve vision.
2. Laser therapy can be done in outpatient clinic and does not require hospital admission.

### Indication

1. Retinal degeneration with or without breaks or holes can be treated with laser. Applying laser around the breaks or holes can decrease the possibility of retinal detachment.
2. In diabetic patients with proliferative diabetic retinopathy, there are new vessels forming on their retina. These vessels (Neovascularization) are fragile and bleed easily. They also affect vision by creating traction on the retina leading to retinal detachment. Laser can destroy these new vessels and prevent their further growth.
3. Narrow angle glaucoma can be treated by peripheral iridotomy. Persistently high intra-ocular pressures can damage the optic nerve.
4. Laser can create a small hole on the iris which can facilitate the drainage of aqueous flow and decrease the intraocular pressure.
5. Opacity in posterior capsule after cataract extraction can be treated by posterior capsulotomy. Laser can create perforation in the capsule and thus improve vision.
6. Different ocular pathology may require different types of laser therapy.

### Procedure

1. Local anaesthesia in the form of eye drops will be applied. Eye drops for pupil dilation may also be applied if you have retinal disease.
2. You will be seated in front of the slit-lamp bio-microscope laser unit.
3. A special contact lens will be attached during the laser treatment.
4. Mild discomfort or pain may be experienced when the laser beam passes through the eyeball.
5. You have to keep your head and eyes still during laser treatment.
6. Treatment usually lasts for 10 to 30 mins. Longer time may be required for the treatment of diabetic retinopathy. Inform your doctor immediately if you experience serious discomfort or pain during laser treatment.

### Risk and Complication

The procedure is safe and most people recover from the therapy, but risks and complications may arise. Apart from possible complications related to anaesthesia, the following conditions may occur:

1. Severe bleeding inside the eye.
2. Infection inside the eye.
3. Intraocular lens non-implantation, damage or dislocation.



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|---|---|
| <ol style="list-style-type: none"> <li>4. Posterior capsule tear and exudation of vitreous body.</li> <li>5. High pressure in the eye.</li> <li>6. Retinal detachment.</li> <li>7. Unexpected refractive change.</li> <li>8. Swelling and clouding of cornea.</li> <li>9. Drooping of eyelid.</li> <li>10. Clouding of the posterior capsule of the lens.</li> <li>11. Pupil distortion.</li> </ol> | <ol style="list-style-type: none"> <li>12. Decentration or fogging of intraocular lens that may need centering, removal or re-implantation.</li> <li>13. Macular oedema.</li> <li>14. Blindness.</li> <li>15. Damage to the implanted intraocular lens producing glare and seeing multiple images.</li> <li>16. Rarely causes implanted intraocular lens subluxation / dislocation.</li> <li>17. Vitreous floater.</li> </ol> |
|---|---|

**After the Procedure**

1. You should contact your doctor or seek medical advices as soon as possible if condition persists, e.g. transient blurring of vision or floaters last for a few days, and pain increase or vision gets worse.
2. Transient increase in intraocular pressure may occur after laser treatment for glaucoma. Close monitoring of intraocular pressure is crucial. You may be asked to stay under observation for a few hours after laser treatment.
3. Take the pain killers if you experience mild discomfort or pain after laser treatment.
4. Follow-up on scheduled as instructed by your doctor.

**Remarks**

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor.

**Reference**

Hospital Authority – Smart Patient Website

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I acknowledge that the above information concerning my operation/procedure has been explained to me by Dr. \_\_\_\_\_. I have also been given the opportunity to ask questions and receive adequate explanations concerning my condition and the doctor's treatment plan.

\_\_\_\_\_  
Patient / Relative Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Relationship (if any)

\_\_\_\_\_  
Date