



Dr Geoffrey Ryan

Hydrus Microstent



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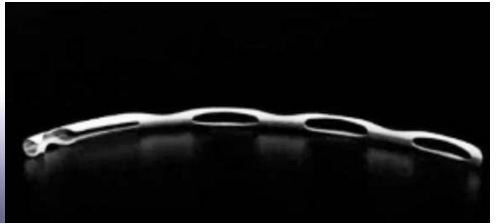
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The Hydrus Microstent is a tiny scaffold about the size of an eyelash that is inserted into the main drainage channel of the eye to help lower eye pressure. It is so small you will not see or feel it after the procedure.

The device is made from a super-elastic alloy of nickel and titanium. This material will not cause an allergic reaction and has been used in over a million medical implants. It will not set off airport scanners and is safe if you need to have an MRI scan.



Who is suitable for a Hydrus Microstent?

The Hydrus is best suited to patients with mild to moderate open angle glaucoma. The Hydrus is not suitable for advanced glaucoma or where the natural drainage system of the eye is damaged.

How does it work?

Glaucoma is most commonly associated with a build-up of fluid pressure inside the eye. Eye pressure increases because the eye's fluid drainage channels become blocked. The tiny Hydrus Microstent scaffold is designed to be inserted into the primary fluid canal of the eye and open the channel to allow blocked fluid to flow more freely, thus lowering eye pressure.

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What are the benefits?

The Hydrus helps to reduce the pressure in the eye and may reduce the need or dependence of eye drop medications in patients with mild to moderate glaucoma. The procedure to insert the Hydrus is faster, more straightforward, and less invasive than traditional operations for glaucoma.

What does the operation involve?

The operation is usually performed under a local anaesthetic with sedation. The Hydrus Microstent can be implanted at the end of cataract surgery, meaning no additional incisions are necessary. It also can be performed as a stand alone procedure. A special injector is used to insert the device into the main fluid drainage canal of the eye, called "Schlemm's canal".

What should I expect after surgery?

Following surgery your eye may be slightly blood shot and swollen for a few days. Your vision may also be blurry for 1 – 2 weeks after the procedure. You may read and watch television; these activities will not harm your eye. You will be given anti-inflammatory and antibiotic eye drops to prevent inflammation and infection. The Hydrus Microstent will begin to work straight away to lower your eye pressure and you can stop taking your glaucoma drops in the operated eye unless Dr Ryan advises otherwise.

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Caring for your eye after surgery

Which drops and how often do I use them after surgery?

Chloramphenicol 0.5% eye drop four times a day for two weeks.

Prednefrin Forte (0.12/0.1%) eye drop four times a day for one month.

How do I protect my eye?

Avoid rubbing or touching your eye. This is extremely important in the first two weeks after the operation. An eyeshield is provided for you to wear for two weeks when sleeping (there is a risk of unintentionally rubbing your eye when asleep).

When can I exercise?

In the first week don't do any strenuous activities like sprinting or martial arts, and don't lift any weights heavier than 5kg. A light walk around the neighbourhood or on a treadmill is an acceptable form of exercise in the first week. You may then resume normal activities after this period of time.

When can I drive?

Most patients can drive 3-4 days following surgery. Your ability to drive will depend on your recovery and the vision in your other eye. Dr Ryan can advise you when it is safe to resume driving.

When can I swim?

Do not swim for two weeks after surgery.

When can I return to work?

Returning to work depends on your occupation and can be discussed with Dr Ryan (most patients can resume office duties 1-2 days following surgery).

What is your advice about cleaning around my eye?

You are advised to be careful when washing: do not directly splash water into your face in the shower or immerse your head in the bath for one week after surgery, but a clean face cloth can safely be used. It is also advised to avoid make-up around the eye for two weeks.

Should I continue my glaucoma drops in the operated eye?

It is advised to cease all glaucoma drops to the operated eye until Dr Ryan advises otherwise. It is possible you will not require glaucoma drops in this eye but this will depend on the pressure.

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Risks

The Hydrus Microstent will not cure your glaucoma, reverse any damage already caused by glaucoma, or bring back any lost vision. The procedure is regarded as extremely safe and the following risks are rare.

Bleeding

It is normal for there to be a small amount of bleeding inside the eye during the operation but this resolves within a few days. A large bleed may require a second operation to clear out the blood. Please notify Dr Ryan if you take blood thinning medication.

Stent dislodges

There is a risk the stent could come out of position, however this is rare.

Failure of the stent

In some cases the Hydrus Microstent may not lower eye pressure or its effect may wear off with time. If the Hydrus Microstent fails to lower your eye pressure it will not create any additional harm to your eye. However, you may need to restart your glaucoma medications or have further procedures to control your eye pressure.

Hypotony (low pressure)

If the pressure drops too low then this may lead to a choroidal haemorrhage (large bleed under the retina) or a choroidal detachment (swelling of the layer under the retina). This can significantly compromise the vision.

Cloudy cornea

If the stent comes in contact with the back surface of the cornea, it can cause swelling and clouding. Advanced cases may require a corneal graft.

Endophthalmitis/ Infection

Infection inside the eye is a rare complication which needs injections of antibiotics into the eye.

Sympathetic ophthalmia

Very rare condition where inflammation occurs in the non-operated eye.

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