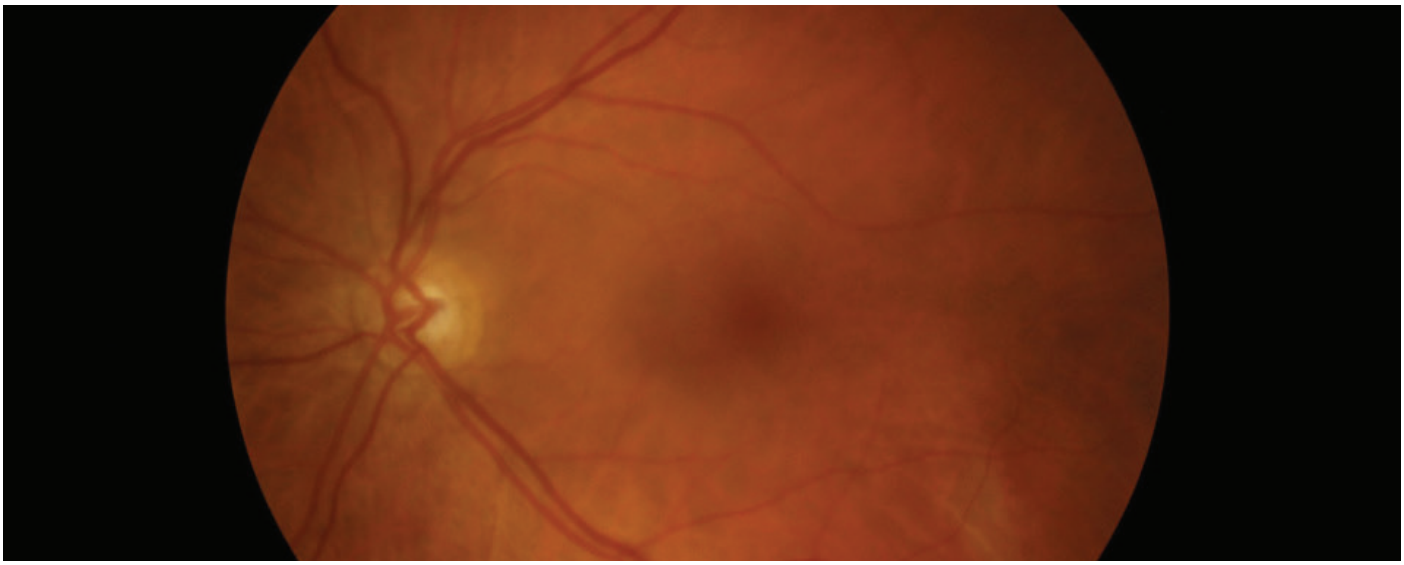
Vista Eye Care

Posterior Vitreous Detachment



What is a posterior vitreous detachment?

A posterior vitreous detachment is a typically benign eye condition that occurs when the vitreous gel at the back of the eye pulls away from its attachment points along the retina.

Who is most at risk for developing a posterior vitreous detachment?

Myopic eyes (those eyes that are nearsighted, or longer front-to-back), patients with a history of head or eye trauma, and patients previously diagnosed with lattice degeneration are thought to be more likely to have a posterior vitreous detachment occur. The risk of having a posterior vitreous detachment also increases with age.

How is age related to development of a posterior vitreous detachment?

As the eye ages, the water component of the vitreous gel begins to separate from the protein components. This results in pockets of water in the vitreous which then leads to contraction of the vitreous. At some point, this contraction results in the vitreous gel pulling away from the back of the eye. The frequency of having had a posterior vitreous detachment after middle age is roughly equivalent to the age of the patient. For example, a 60-year-old has about a 60% chance of having had a posterior vitreous detachment, while a 90-year-old has about a 90% chance.

What are the most common symptoms that occur during a vitreous detachment?

The most common symptoms during the active detachment process are flashes of light and the perception of vitreous “floaters” in the vision. Patients will often complain about the sudden appearance of a “floaty” in their peripheral vision.

What are the most common symptoms that occur after a vitreous detachment has occurred?

The patient is frequently left with vitreous floaters in their vision. These floaters can be randomly shaped, near-perfect rings, or strands that patients often liken to “cobwebs.”

How should symptoms of a posterior vitreous detachment be managed?

Because a retinal detachment or retinal tear share the same symptoms (flashes and floaters) as a posterior vitreous detachment, it is important for patients experiencing these conditions to have their retinas thoroughly checked at a dilated eye exam. We recommend a same-day appointment, or being seen as soon as possible, to reduce the chances of permanent vision loss.

What are the potential complications of having a posterior vitreous detachment?

When the vitreous pulls away from the back of the eye, it may pull apart blood vessels. This may result in a vitreous hemorrhage which will typically reabsorb on its own over time. The vitreous may also pull on the retina as it is detaching causing vitreo-retinal traction. This vitreo-retinal traction may give way to a retinal tear which could lead to a full detachment of the retina.

What is done at the initial visit for a posterior vitreous detachment?

At the initial visit, we will perform a dilated eye exam and possibly take photos of the retina, and optical coherence tomography (OCT) scans of the retina to check for evidence of vitreo-retinal traction. If the retina appears healthy and without vitreous interaction, then we will monitor the vitreous detachment for changes. Our doctors typically will have the patient return approximately four weeks later to re-check the retinal health. If the patient notices any changes in symptoms after their initial visit, they are asked to return for further evaluation immediately.

If a posterior vitreous detachment leaves the patient with exceptionally annoying or large floaters it the vision, is there anything that they can do about them?

Unfortunately, topical medications claiming to remove vitreous floaters have no value. If a floater is disturbing enough to a patient (as some central vision floaters may be), there is a procedure available called vitreolysis which uses laser energy to break up the vitreous floaters that impair the patient’s vision. Often times, vitreous floaters become less noticeable as the patient gets used to them, and as gravity pulls the floaters away from the central vision and into the peripheral vision.

Please call our office today at **(303) 450-2020** to schedule an examination to determine the cause of your symptoms. Remember that experiencing flashes of light and floaters in your vision is considered an ocular emergency so while our website allows you to schedule an exam online, we recommend that you call to be seen the same day, or visit the emergency room to rule out retinal complications.