Virginia Eye Institute

Posterior Vitreous Detachment

James L. Combs, M.D. Eleanore M. Ebert, M.D. Byron S. Ladd, M.D. George E. Sanborn, M.D. Jeffrey H. Slott, M.D.

(804) 285-5300 or (804) 287-4200

www.VaEye.com

Posterior Vitreous Detachment

What is the vitreous?

One of the things that happen with the normal aging process is that the vitreous dehydrates. The vitreous is the clear gel that fills the eye. When the vitreous dehydrates, it then shrinks and pulls away, or detaches, from the retina at the back of the eye. This occurrence is called a Posterior Vitreous Detachment, and is a normal process of aging, and occurs in all of us. While it is usually an aging change, it can occur as early as age 30. By the age of 70 or 80, virtually all of us will have a Posterior Vitreous Detachment. In some of us, the reason for the Posterior Vitreous Detachment is ocular surgery or trauma to the eye.

What are the symptoms of Posterior Vitreous Detachment?

In a few of us, for unknown reasons, symptoms develop when this detaching occurs. In some cases, the symptoms are only "floaters", which are nonspecific opacities in our vision that come and go. In some of us, the symptoms include flashes of light. The most severe thing that can happen in Posterior Vitreous Detachment is either a hemorrhage in the vitreous or, in some rare cases, a retinal detachment.

If you have symptoms of a posterior vitreous detachment, you should be examined by an optometrist or ophthalmologist. In some cases, your eye specialist may recommend an examination by an ophthalmologist who specializes in retina and vitreous diseases.

What is the treatment for Posterior Vitreous Detachment?

The purpose of the examination by the retina specialist is to determine if the Posterior Vitreous Detachment has caused a tear or hole in the retina. If it has, this hole or tear needs to be treated, because either one of these can lead to a retinal detachment. In many cases, if the hole or tear is diagnosed promptly, the hole or tear can be treated and a retinal detachment can be prevented. As a general rule, your hole or tear can be treated on an outpatient basis. The repair is either done with the laser or, in some cases, using a freezing treatment called cryopexy. If a retinal detachment has occurred, it will be necessary to treat the retinal detachment in a variety of different ways. You will be referred to a retinal specialist for evaluation and treatment of the retinal detachment.

If in the initial evaluation, a hole or tear is not found, you will be re-examined again in 2-3 months, assuming your symptoms do not get any worse. If your symptoms change in any way, or get worse, you should be seen promptly for a re-evaluation, no matter when your next appointment is scheduled.