

Jones Tube Surgery

Jones tube surgery is also known as conjunctivodacryocystorhinostomy, or CDCR. This surgery treats watery eyes (also called tearing, or epiphora) due to missing or blocked lacrimal canaliculi.

Missing or Blocked Lacrimal Canaliculus

Tears usually drain away from the eye through small tubes in the eyelid called the lacrimal canaliculi, then into the tear duct, then into the nose. If the lacrimal canaliculi are blocked or absent, eye tearing or watering may result. Blockage or absence of the lacrimal canaliculi may be something you are born with (congenital), or may occur as a result of an injury, cancer, or treatments for cancer such as radiation or chemotherapy.

During Surgery

- You will be under general anesthesia (asleep).
- A skin incision may be made.
- A glass tube (Jones tube) is placed that goes from the inner corner of the eye into the nose. This allows the tears to drain through the tube, off the eye into the nose, without needing to go through the canaliculi.
- Most patients do not need to stay overnight at the hospital after surgery.

Jones tube:



After Surgery

Pain

Pain varies by patient. Take over the counter extra strength acetaminophen (Tylenol®) as directed on the bottle unless your surgeon or another doctor has told you not to. Your surgeon may prescribe additional pain medicines. Resting and avoiding heavy activity will help. The first 2 days are often the toughest. The pain will slowly get better over the next week.

When to Call

Contact the office or doctor on call if pain:

- Becomes worse.
- Cannot be controlled with pain medicine.
- Causes nausea and vomiting.

Wound Care

- You will not have a bandage after surgery.
- Eyedrops will be prescribed to use after surgery.
- Ointment may be prescribed to use on your incision after surgery. Ointments may cause blurry vision, which will improve when ointment is no longer used.
- For the first 48 hours after surgery, use a cold, wet compress over your surgical site. This will help with pain and swelling. To make a cold, wet compress, fill a bowl with water and ice. Place a clean washcloth or gauze into the cold water. Wring it out gently and lay it over the surgical site. When it warms up, repeat. Do this as much as possible while awake the first 48 hours after surgery.

Activities

Avoid heavy activity for two weeks after surgery or until you see your doctor. This includes:

- Bending
- Exercising
- Sports
- Lifting more than 15 pounds

Any activity that increases your heart rate after surgery may cause bleeding or increased swelling in your surgical area. This may slow healing or risk the outcome.

Sleep with your head elevated (in a recliner, or on several pillows) for the first week after surgery. This will help reduce swelling.

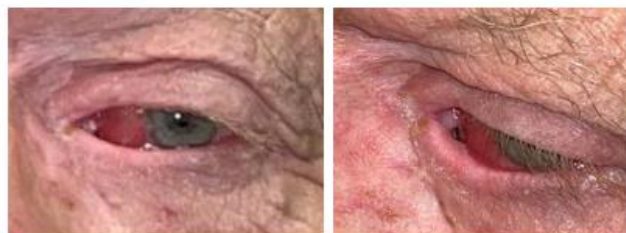
You will need to take 1-2 weeks off from work following surgery. How much time you need off depends on what kind of job you have.

Diet

For the first week after surgery, avoid very hot food and spicy foods.

Jones Tube Long Term Care

Once you have healed, your tube will be barely visible in the inner corner of your eye. See photos below for an example of a patient who had a Jones tube placed 3 months prior (the eye is red for unrelated reasons):



Please take the following steps to take care of your Jones tube and keep it working:

- Squeeze your eyes closed or press your finger over the tube when you blow your nose or sneeze. This will help keep the tube in the right place.
- Put two drops of over-the-counter artificial tears in your eyes and “snuff” it through the tube twice a day: squeeze your nose closed and inhale to draw the tears through the tube. This will help keep the tube open and draining tears.
- Check your tube position every morning in the mirror.
- Call your surgeon’s office if the tube moves, is not visible, or if there is persistent tearing.
- See your surgeon every 6-12 months or as directed to check and clean the tube.

Sometimes, Jones tubes clog, move or break. When this happens, special cleaning or additional surgery may be required.

Who to Call

If you have any questions, please call one of the phone numbers below, or message your surgeon via MyChart (non-urgent questions only).

Ophthalmology Clinic
(608) 263-7171

Rockford Clinic
(815) 399-1141

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person’s health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 2/2025 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#8395.