

Orbital Exenteration Surgery

Orbital Exenteration Surgery is a procedure used to remove an eye and the rest of the contents of the eye socket. The eye, the muscles and fat around the eye, and sometimes the eyelids are removed. This is often done to treat cancer.

During Surgery

- You will be under general anesthesia (asleep).
- The contents of the eye socket are removed.
- Your eye socket may be covered with a skin graft or a skin-muscle flap. This graft or flap may be harvested from somewhere else on your body.
- You may need to stay overnight at the hospital after surgery.

After Surgery

Pain

Pain varies by patient. You will take pain medicines to help control pain. Please take over the counter extra strength acetaminophen (Tylenol) as directed on the bottle, unless your surgeon told you not to or you have been told by a physician not to take acetaminophen. Resting and avoiding heavy activity that could increase pressure in the socket will help. The first 2 days are often the toughest but will slowly get better over the next week.

Contact the office or doctor on call if the pain:

- Becomes worse
- Causes a lot of nausea or vomiting

Eye Socket Care

You will have a large dressing for at least a week after surgery.

The taped dressing (Figure 1) may get pink or red from light bleeding in the first few days but **should not** be removed or changed.

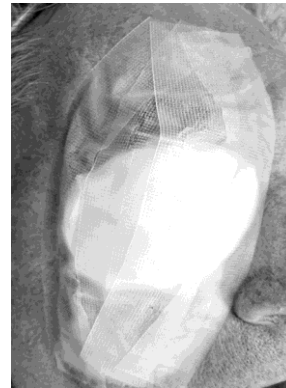


Figure 1. Postoperative pressure dressing

This bandage keeps pressure on the socket to keep down swelling and bleeding. You do not need ointment while the pressure dressing is in place.

This bandage will be changed or removed at your first postoperative appointment with your surgeon.

Starting Eye Ointment

Ointment will be placed in the socket at the end of surgery. You do not need to re-apply it until the dressing is removed.

After the bandage has been removed, place a thin layer of ointment in the socket with a clean finger or Q-Tip® 3 times a day.

Eye Socket After Surgery

At first, the socket may appear bruised. It may have a hollow appearance (Figure 2). There may be sutures, which typically dissolve on their own.



Figure 2. Appearance of an exenteration wound 10 days 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 the socket. This may slow healing or risk the outcome.

Artificial Eye Fitting

After surgery, you may see an anaplastologist about having a prosthesis made. Anaplastologists are medical artists trained in fitting and making custom eye prosthetics. The anaplastologist usually needs to wait at least 8 weeks before fitting you with a prosthesis.

You may need another surgery in order to wear a prosthesis. Regular maintenance visits every 6-12 months with the anaplastologist is required. This will help keep your prosthesis fitting well and in good condition. The prosthesis is held in place with adhesive or magnets.

The prosthesis does not restore your eyesight. Some patients choose to wear a patch over their eye socket instead of having a prosthesis.

Driving

Most patients who have lost sight in one eye and have good vision in the other eye will be able to drive in the future. Those who have lost an eye cannot get a commercial driver's license.

Who to Call

If you have any questions, please call one of the phone numbers below.

Ophthalmology Clinic
(608) 263-7171

Rockford Clinic
(815) 399-1141

For More Information

A Singular View: The Art of Seeing with One Eye (Paperback) by Frank B. Brady

This website includes photos of prostheses:
<https://www.medicalartresources.com/>.