

## **INFORMATION ABOUT THE ANAESTHETIC FOR YOUR EYE OPERATION**

### **What anaesthetic will I be getting for my eye operation?**

Specialist anaesthetists are doctors with extensive training. Anaesthesia can take on many forms including:

- local or regional anaesthesia – numbing a part of your body. Used to reduce pain during the procedure & afterwards.
- sedation – sleepy but not fully unconscious.
- general anaesthesia – fully unconscious.

Sometimes a combination of these will be used. Your anaesthetist determines the safest method of anaesthesia based on the operation, your physical health and your preferences.

Anaesthesia for eye surgery often combines local anaesthesia with sedation (i.e. twilight sedation). This combination is used when the area being operated on can be numbed and there will be minimal or no discomfort during the procedure. This combination is often safer and leads to faster recovery.

Some eye procedures require a general anaesthetic. This is chosen if the surgery could be uncomfortable either due to it being a long procedure or if the area being operated on cannot be numbed reliably.

### **Which medications should I continue and which ones should I stop?**

In general, all medications can be continued on the day of surgery and can be taken with a sip of water prior to your procedure. There are two main exceptions to this:

- Blood thinning medications e.g. aspirin, Plavix, Warfarin, Eliquis, Pradaxa, Xarelto
- Diabetes medications

You will be given advice either by the surgeon or the hospital regarding these medications. However, if you have not received advice or the advice is unclear please contact Dr Lincoln at [info@lincolnanaesthesia.com](mailto:info@lincolnanaesthesia.com)

### **How can previous problems with anaesthesia be addressed?**

Knowledge of previous personal or familial problems with anaesthesia can reduce the risk of these problems occurring again, so it's helpful for you to advise your anaesthetist of this. Problems can range from nausea & vomiting, difficulty with cannulation to more serious complications. Often these concerns can be addressed on the day of surgery but if you are concerned please feel free to contact Dr Lincoln at [lincoln@anaesthesia.care](mailto:lincoln@anaesthesia.care)

### **What are the risks of the anaesthetic?**

Obtaining consent for anaesthesia is becoming common practice. A document listing the complications of anaesthesia is attached below. It is important that you read this prior to your anaesthetic so any concerns can be addressed. Please note that this list is very extensive and Dr Lincoln will discuss any specific risks in more detail with you if he believes these are important. If you have any specific concerns please feel free to contact Dr Lincoln at [info@lincolnanaesthesia.com](mailto:info@lincolnanaesthesia.com)

### How long should I fast prior to the procedure?

It is common that patients fast for too long prior to procedures. Fasting prior to procedures reduces the risk of aspiration (ie. stomach contents regurgitating into mouth and lungs). Current recommendations are that you should not eat food or drink milk for 6 hours prior to your procedure. This generally means no food from midnight for procedures occurring in the morning and an early light breakfast (prior to 7AM) for procedures occurring in the afternoon. You can drink water and weak black tea/coffee up until 90 minutes prior to your admission to hospital time. Do not exceed 250ml each hour. The hospital will contact you the day prior to the procedure to inform you of your admission time.

### How will my pain be managed after the procedure?

Pain is variable depending on the procedure and even amongst different patients. Simple pain relief (paracetamol and ibuprofen) should be used in the first instance unless you have been told not to take them. If Dr Lincoln believes stronger pain relief may be required you will be provided with a prescription. Stronger pain relief medications often have side effects (drowsiness, nausea and constipation) and should only be used if required if the simple pain relief is not sufficient. If you find that your pain is not well controlled following your procedure please feel free to contact Dr Lincoln at [info@lincolnanaesthesia.com](mailto:info@lincolnanaesthesia.com)

### What can I do following my procedure?

It is important to follow the instructions provided to you by the hospital and surgeon after your procedure. Anaesthesia may impair your judgement and decision making skills for the first 24 hours. Therefore it is important you:

- Do not drive
- Do not operate machinery or tools
- Do not do any cooking
- Do not sign any legal documents or make important decisions
- Do not drink alcohol

If you are booked for day surgery a responsible adult should take you home and stay with you for the first night. You should also have a reliable mode of transport to return to hospital if required and not be further than 30 minutes from the nearest hospital. If you are concerned that you may not be suitable for day surgery please let me know as soon as possible.