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Patient
advice

JOHN PACEY LOWRIE LTD





DEAR PATIENT

We have created this brochure to provide you with important information about your prosthetic eye. Using artificial eyes can reduce the physical and psychological impairments that result from the loss of the natural eye.

From our daily practice, we learn what questions arise. Knowing how to use a prosthetic eye makes you feel more confident. However, please always remember: proper care and treatment are prerequisites for comfortable wear and trouble-free fitting of eye prostheses.

It is very easy if you follow the instructions below. Therefore, please read this information carefully. If you have any questions, please contact us. Our expert ophthalmologist will be happy to advise you.

Prosthetic eyes are not a modern invention, because the so-called “preferential eyes” already existed in the middle ages. They were painted leather eyes that were secured in front of the eye socket by a spring wire that was wrapped around the head. In addition, “insert eyes” were made of gold and silver, the irises of which were drawn with enamel paints. Already in the 18th century, people began to make glass prostheses that could be attached directly to the eye socket. Thanks to the development of medicine and ophthalmology, the best possible success in care is achieved for the patient.

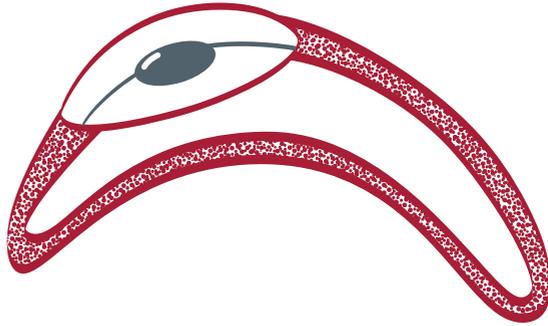
The cooperation between the ocularist and the ophthalmologist is base for a good start.

Thanks to the realistic copy and professional adaptation to the conditions of the eye cavity, artificial eyes allow you to wear them inconspicuously, fit them without problems and thus ensure a safe personal appearance.

Prosthetic eyes made of glass are manufactured as double-walled, hollow prostheses (reform eyes) or as single-walled shell eyes (scleral shells).

PROSTETIC EYE

*Glass eye
prostheses cross
section through
double wall*



Eye prostheses made of glass are the standard raw material. The material used is cryolite glass, which is specially produced for the production of eye prostheses. Due to the compatibility of the materials and the possibility of processing, cryolite glass is especially suitable for meeting medical requirements.

Advantages of a glass eye prosthesis:

- especially smooth, because the surface is fire-polished
- high gloss
- no allergic reaction
- low weight as a hollow body
- good chemical resistance
- high mechanical surface resistance

- good wettability of tear fluid
- biocompatible (compatible with the body)

Plastic eye prostheses (PMMA) are only made of solid material. Both thin and thick synthetic eye prostheses are made. These prostheses, unlike cryolite glass eye prostheses, are made of a monolithic mass. They have higher impact resistance and often weigh more, and have a lower wettability factor.

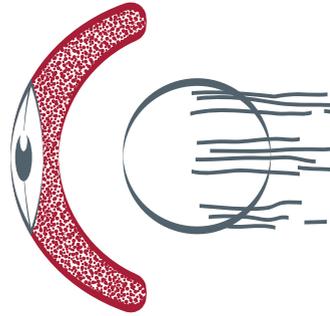
WE RECOMMEND

Advantages of PMMA ocular prostheses:

- Unbreakable (except in case of extreme load);
- There is no feeling of cold at very low temperatures;
- During the manufacturing process or after the end of the process, the prostheses can be adjusted;
- Use time up to 5 years, with periodic polishing (every 6–8 months).

The loss of volume after removal of the eyeball or eyeball contents is largely compensated by the implant. The remaining eye muscles that are attached to this implant provide flexible support for a later eye prostheses. The implant is covered by the conjunctiva

With an implant eye socket provided with double wall mesh prosthesis



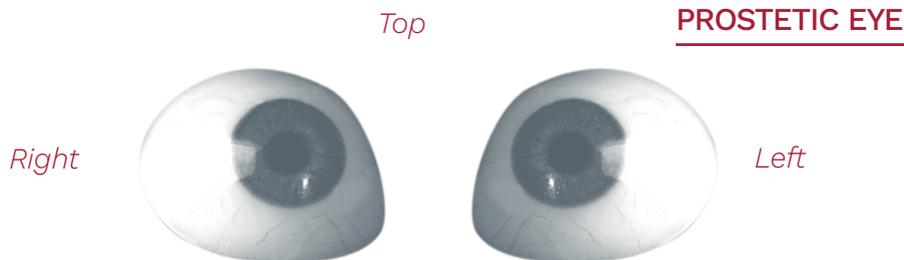
and is not visible.

Immediately after the operation, a place holder (conformer) is installed in the socket of the eye. Its task is to shape the eye cavity, prevent shrinkage and prepare it for installation with an artificial eye.

After the operation, you must turn immediately to the eye doctor to discuss further course of treatment.

In the case of severe injuries or pathological changes in and on the orbit, limitations in appearance and motility should be expected.

Usually, at this appointment, the modeling procedure is already done and after about 14 days, the first artificial eye is made and adjusted. Wearing a prostheses is strange at first, but not painful. The processing time for preparation should be approximately 1-2 hours.



Usually, the short part of the prosthesis is directed towards the nose. However, some shapes may differ from this scheme.

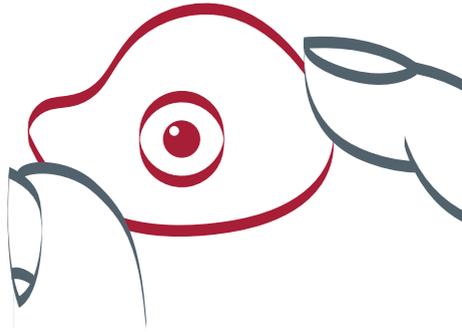
Please note that we will make the eye prosthesis individually for you.

Specifically according to the anatomical requirements of your eye socket.

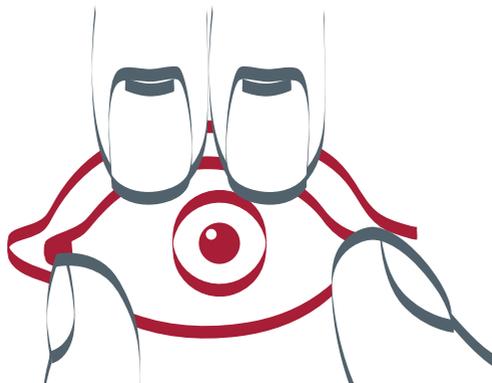
EYE PROSTHESIS INSTALLATION

Inserting the prosthesis may seem a little unusual at first, but with a little practice it will be quite easy to do. To avoid damage to the artificial eye, it should always be inserted and removed on a soft surface. Sit at the table, put a cloth on it as a pad and place the table mirror in front of you. The artificial eye must be thoroughly cleaned before insertion 8 (see Cleaning and Care).

① Hold the artificial eye so that the top part is exposed. The short part points to the nose.



② Now lift the upper eyelid with your free hand and press the exposed upper part of the artificial eye behind the upper eyelid. Hold the artificial eye in this position and pull the lower eyelid down. Gentle pressure on the artificial eye, supported by a circular motion, places it in the correct position. This way, all air pockets behind the artificial eye can escape.



REMOVAL OF EYE PROSTHESIS

If the ophthalmologist has prescribed ointment or drops for you, you should use them according to the instructions. In the case of ointments, it is preferable to apply them to the back of the artificial eye before inserting it. The ointment is evenly distributed in the conjunctival sac by gently pressing on the prosthesis, supported by circular movements. Before inserting the artificial eye, the drops should be instilled directly into the eye socket.

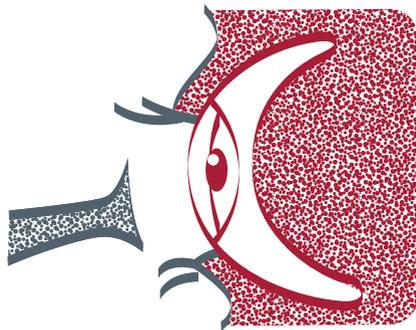
Similar to insertion, removal of the prosthesis is very easy with little practice. When removing the prosthesis, please always remember to use a soft surface to avoid damaging the artificial eye when it falls.

① In a relaxed position, look up. Place the index finger on the nose on the bottom eyelid. Now bring the lower eyelid under the edge of the artificial eye in an outward stroking motion. Now move the eye slightly forward while looking up and it will slide itself out of the eye socket.



② Sometimes a suction cup can help a little:

- Pull the lower eyelid down, pull the hook behind the lower edge of the artificial eye and thereby pull it out of the eye socket.
- Place a slightly moistened pacifier on the artificial eye. Now pull the lower eyelid down and pull the artificial eye forward.



Please note:

When rubbing or wiping your eyes, always point towards your nose. If you sweep in the opposite direction (especially the lower eyelid), you can twist or push out the prosthesis.

CLEANING AND CARE

Your prosthetic eye is a valuable thing that needs to be taken care of. This involves proper care by spending a little time on it every day. It is best to find a place where you will not be disturbed as this will ease cleaning ritual. The more relaxed and calm you feel, the easier this ritual becomes.

— The prosthesis must be thoroughly cleaned at least once a day. Make sure your hands are clean and dry and sit comfortably at the table with a towel spread out in front of you.

— After removing the prosthesis, clean it with lukewarm water in a bowl (never under running water!), then dry it carefully with a clean cloth.

— Moisten the prosthesis with water or saline and insert it back into the eye socket.

That's all you need to consider when cleaning. Artificial eyes can usually be worn day and night.

However, in certain circumstances, we recommend that the patient remove the prosthesis for a short period of time. Please discuss this with your eye doctor.

Please note:

- Do not leave the artificial eye in the liquid overnight
- Never clean over sinks or stone floors
- Do not use corrosive liquids
- Do not clean with hard objects

The stability of the prosthesis depends on environmental influences, the condition of the eye socket and the pathological factors of the patient (for example, due to changes in the eye socket or due to growth-related needs in children). All artificial eyes are subject to surface wear, which can cause damage to the eye socket.

The average wearing time of the prosthesis, about 1 year, should be shortened in exceptional cases, if the above-mentioned factors greatly affect the wearing time.

Environmental influences, dust and dirt, as well as functional disorders of the eyelid apparatus can also shorten the wear time.

When the surface becomes rough, irritation of the conjunctiva occurs. Thus, their protective function is disturbed. The first signs that a new eye prosthesis is needed are increased tear flow, viscous yellowish discharge or itching in the area of the eye socket and the edge of the eyelid. If these symptoms persist for several days, contact an ophthalmologist immediately. Damage to the surface of the prosthesis and irritation of the conjunctiva can only be seen after removing the prosthesis in a dry state.

Please note:

It is advisable to always have a spare prosthesis at hand. Keep this in mind for your next vacation trip. This way, if your artificial eye is damaged or lost, you can reduce the time until your next eye doctor visit. The orbit must not remain unprocessed for more than a certain period of time.

QUESTIONS AND ANSWERS

In principle, the patient can move freely as an eye prosthesis wearer. Many of our patients are excellent athletes or contractors. Although, we would like to say that there are certain activities (such as DIY) that generally require the use of safety glasses.

However, as the field of view has certain limitations, special care must be taken performing various activities.

You must follow some rules:

Tennis, squash, badminton, golf

For sports such as tennis, squash, badminton and golf, we recommend that our patients wear sports glasses.

Riding

Riders should also protect their eyes well and, above all, be careful off-road so that their eyes are not injured by breaking branches.

Swimming

As a swimmer, you should always wear swimming goggles to protect the eye socket and conjunctiva from “swimming pool conjunctivitis”. It is an inflammation of the mucous membrane of the eyes, which unfortunately can sometimes be caused by

contaminated water in public baths. You should rather do without diving in the swimming pool. A common occurrence is that the prosthesis is washed out of the eye socket due to the pressure when diving rapidly into the water.

Diving

Special precautions apply to divers. For standard air pressure on land, add pressure of 1 bar for every 10 meters of water depth. The air-filled spaces in the diver's body change pressure depending on the compressed breathing air carried with them. This can affect the prosthetic eye, which is filled with negative pressure. If the artificial eye explodes under these conditions, it can cause injuries with corresponding consequences during diving. This problem does not exist for snorkelers.

Sauna

Visits to the sauna should also be enjoyed with some caution. It happens that the rapid temperature changes can damage the eye prosthesis.

Flying

Patients who wear eye prostheses have no problems with traffic. Although the internal pressure of the aircraft is reduced during flight, this does not affect the external pressure. Therefore, we also assume that you can enjoy a carefree flight to vacation or business meeting.





JOHN PACEY-LOWRIE LTD.
VALTERS' PROSTHETIC EYE LAB.

JOHN PACEY LOWRIE LTD is the only eye prosthetic company with long-term work experience and highly qualified specialists providing cryolitic glass and PMMA eye prosthetics in the UK.

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www.institut-trester.de and Valtera Protezu Laboratorija LLC. **www.vpl.lv**

Made:

Eye prosthesis made of cryolite glass

PMMA eye prosthesis

PMMA Scleral Shell

It is recommended to remove the prosthesis:

At night

Once a week

According to the need

Change the prosthesis after:

6 mon.

1 year

5 years

Polishing of the PMMA prosthesis:

	Planned next visit date	Polishing date
1.		
2.		
3.		
4		

Additional use of medications:

No

According to the doctor's recommendations