

Patient
 Information

Posterior vitreous detachment

Introduction

The information in this leaflet will help to answer some of the questions you may have about posterior vitreous detachment. If you have any further questions or concerns, please do not hesitate to speak to the doctor or nurse caring for you.

What is posterior vitreous detachment?

Posterior vitreous detachment is an eye condition. The vitreous is the clear, jelly-like substance that fills the space at the back of the eye and provides nutrients to your eye.

With posterior vitreous detachment, this jelly becomes more liquid and comes away or separates from the retina (the light sensitive layer at the back of your eye). It then starts to move around.

Posterior vitreous detachment is not a retinal detachment.

Posterior vitreous detachment does not permanently affect your eyesight.

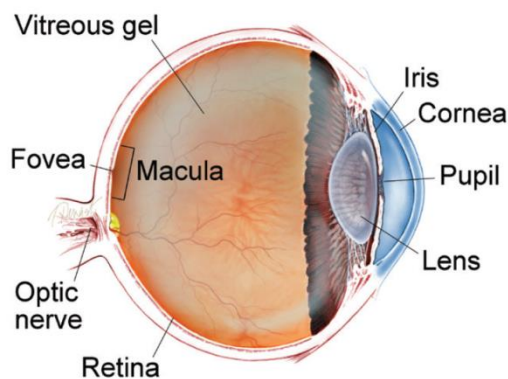


Figure 1: Normal eye

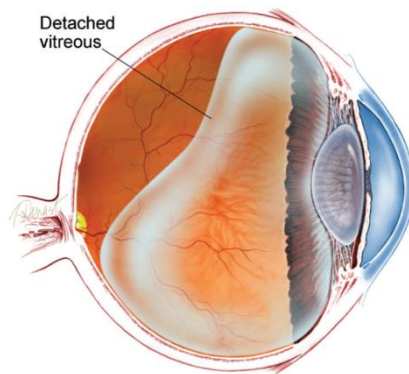


Figure 2: Vitreous detachment

Reference No.

GHP11588_08_23

Department

Ophthalmology

Review due

August 2026

**Patient
Information**

What causes posterior vitreous detachment?

With increasing age, the vitreous jelly changes and becomes more liquid. It slowly pulls away from the inside surface of the eye without causing damage to the retina in 9 out of every 10 patients.

Posterior vitreous detachment is a common condition and mostly affects people over the age of 50 years. There is nothing you can do to prevent it.

What are the signs and symptoms?

You may experience:

- Flashing lights like little flickers in the periphery (edges) of your vision.
- Black floaters in your vision that look like small spiders or tadpoles. These floaters move around and then settle as the eye rests.

Symptoms rarely happen in both eyes at the same time.

How is posterior vitreous detachment diagnosed?

An ophthalmologist (specialist eye doctor), optometrist or nurse practitioner will put eye drops into your eye to dilate (enlarge) your pupil. This will allow them to look at the middle and back of your eye with a microscope. The eye drops will affect your vision and make things appear blurred which usually lasts for 3 to 4 hours. You must not drive while your vision is affected.

What treatments are available?

There is no treatment available for posterior vitreous detachment. By having your eyes checked, you can be reassured that this is the cause of your symptoms and nothing more serious. You may find the symptoms irritating at first but they will settle and gradually become easier to live with. The effect of floaters may be reduced by wearing dark glasses, especially in sunny conditions or when looking at brightly lit surfaces.

Patient Information

Is there anything I should look out for?

You should contact the eye department via the triage line as soon as possible if the symptoms become worse and you notice:

- an increase in flashing lights.
- an increase in the number or size of floaters.
- a black shadow or a curtain effect coming over your vision.
- sudden deterioration in your vision.

These could be the signs of a tear in your retina. This happens if the vitreous is so firmly attached to the retina that it pulls and tears the retina as it moves away. This is not common and can be treated to reduce the chance of vision loss.

Contact information

Eye Triage

Tel: 0300 422 3578

Monday to Friday, 8:00am to 1:00pm and 2:00pm to 6.00pm

Out of the above hours, calls will be diverted to the eye doctor on call.

Further information

Royal National Institute of Blind People (RNIB)

This is a charity offering information on many different eye conditions. RNIB can also provide information in large print or in audio formats.

Helpline: 0303 123 9999

Email: helpline@rnib.org.uk

Website: www.rnib.org.uk

For the RNIB information about Posterior vitreous detachment please visit www.rnib.org.uk/your-eyes/eye-conditions-az/posterior-vitreous-detachment/

Content reviewed: August 2023

Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>