



Epiretinal Membrane (page 1 of 2)

What is an epiretinal membrane?

The human eye is like a camera and the retina is like the photographic film. At the very centre of the retina is the macula. This is a very specialised area, which we use for reading and recognising complex shapes and colours. Sometimes, scar tissue forms which grows across the macula. If this scar tissue contracts, it may cause distortion of the retinal tissue. In some cases, this contraction may also affect central vision, particularly when reading and doing other visually demanding tasks.

What causes an epiretinal membrane?

Epiretinal membranes are quite common and affect up to 8 out of 100 people in their later years. In most cases, there is no underlying cause for the epiretinal membrane and it appears to be related to normal age-related changes inside the eye. It is thought to happen because the vitreous (jell-like substance inside the eye) pulls away from the retina. Sometimes the membrane may also form following laser or eye surgery, diabetes, retinal vein occlusions or after inflammation inside the eye.

How will an epiretinal membrane affect my vision?

For most people, while the scar tissue is developing, it does not appear to affect vision. However, when it stops growing, it contracts (shrinks) and causes distortion of your central vision – for example, straight lines appear wavy or crooked in appearance, and reading is difficult.

Depending on the severity of this distortion, you might notice changes in your central vision. In some cases, patients only notice symptoms when one eye is covered –for example during an eye test at the optician.

How is an epiretinal membrane treated?

The only way to treat a symptomatic epiretinal membrane is by having an operation. Eye drops or glasses will not help.

Should I have surgery for my epiretinal membrane?

Treatment for epiretinal membrane is only required in those cases where the vision has been affected. The main reason to proceed with the operation is to attempt to correct the distortion of your central vision.

If you are not aware of any visual problems, you would not need to have surgery. However, if the distortion affects your ability to work, drive, read, or perform other important activities, you should consider having

Department of Ophthalmology
01722 336262 ext 5366

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Name: Rashi Arora
Role: Consultant
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an operation.

Some patients decide not to have an operation and accept the distorted central vision in the affected eye. This is reasonable, especially if the vision in the other eye is not affected. There is no "right" or "wrong" decision, as every person has different needs and priorities.

Will the problems get worse if I leave it?

Not necessarily as the growth of the membrane is slow often taking many years. In general, you should only go ahead with surgery if you find the distortion of your vision troublesome at the moment, and not as a preventative measure. Left untreated, this condition will not cause blindness.

What does the surgery involve?

We do not have the facility to perform epiretinal membrane removal surgery at Salisbury District Hospital. You will need to be referred to Southampton, Bournemouth or Swindon for the operation. The surgery of epiretinal membrane removal usually takes an hour and is performed under a local anaesthetic. You will need an operation called a "vitrectomy", which involves your surgeon removing the vitreous (gel-like substance) from inside your eye. Your surgeon will then grasp and gently peel away the epiretinal membrane from the retina.

Please ask the eye team for referral if you feel the epiretinal membrane is affecting your quality of life and you're keen to explore the surgical option.

Where can I find more information?

RNIB

Helpline 0303 123 9999; internet www.rnib.org.uk; email helpline@rnib.org.uk

The Macular Disease Society

Helpline 0845 241 2041; internet www.maculardisease.org; email: info@maculardisease.org