



Types of orbital implants

Where suitable, implants can be made of silicone, polymethyl methacrylate (PMMA / acrylic), medpore or hydroxyapatite. These materials are normally compatible with the body.

In some cases, a 'fat-graft' procedure may be used instead of an implant. This involves taking a small amount of fat from another part of the body (usually the abdomen) and putting it into the socket.

### What happens after surgery?

After surgery, a shell is usually placed in your eye socket. This is called a conformer or shell and stays in the

socket until your first artificial eye is fitted. The conformer helps prevent the socket from contracting and also protects the delicate socket tissue while it is healing.



Eye conformers or shells

As the weeks pass, the swelling in your socket will reduce and the conformer may become loose in the socket. If the conformer becomes dislodged, please contact the Artificial Eye Clinic on the number below for advice. The conformer will be placed back into the socket in the clinic if you cannot do this at home.

**Artificial Eye Clinic**  
**Shankill Health and Wellbeing Centre**  
**83 Shankill Road**  
**Belfast**  
**BT13 1FD**  
**Tel: 028 9504 0798**

## Before eye removal surgery



## Patient information leaflet

## Removal of an eye

The decision to have an eye removed is extremely difficult to make. You will have the opportunity to discuss it fully with your consultant ophthalmologist (eye doctor) before proceeding.

It can be a very upsetting time for patients and their families. You may be upset, shocked and anxious about having your eye removed and may worry about other aspects of the procedure. This leaflet will try to explain as much as possible why and how an eye is removed.

The decision to have your eye removed is the beginning of a journey. If you feel that you could benefit from support to manage and cope with your feelings, a counselling service is available.

## Reasons for eye removal

There are a number of reasons why an eye needs to be removed. These may include:

- **Blind and painful eye** – an eye that is not seeing and is very painful.

- **Blind and unsightly eye** – an eye that is not seeing and looks unsightly.
- **Choroidal melanoma (tumour)** – an eye with a tumour inside it that cannot be treated in other ways. Melanoma is the most common type of eye cancer in adults.
- **Retinoblastoma** – this usually affects children and is a rare cause of eye removal.
- **Trauma** – an eye with a very serious injury sometimes needs to be removed. This is the most common cause of eye loss. This can be the result of a ruptured globe (eyeball), a penetrating or perforating eye injury, or blunt force trauma.

## Surgical removal of an eye

When a patient has made the decision to have their eye removed, it can be removed by one of two surgical methods:

**Evisceration** involves the removal of some of the internal contents of the eyeball. The sclera (white part of the eye) and the external eye muscles are kept.

An implant is inserted and stitched into the eye socket. It is wrapped in the remaining sclera to seal it in the socket.

**Enucleation** involves the removal of the entire eyeball, including the sclera. The eyelids and surrounding structures are not usually affected.

An orbital implant is inserted and stitched deep into the eye socket. It is then covered with conjunctiva (the lining of the eyelids and front of the eye), which seals it into the socket. This procedure will always be used for eye cancer cases.

## What is an orbital implant?

An orbital implant is a small round ball used to restore a more natural appearance to the eye socket and eyelids when the natural eye has been removed.

It is attached to the remaining muscles in the eye socket and then covered with the conjunctiva. When these muscles move, they help move the orbital implant and enhance movement of the artificial eye once it is fitted.