



## References

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# Epiretinal Membrane

Ophthalmology Departments  
Lincoln County Hospital  
Pilgrim Hospital  
[www.ulh.nhs.uk](http://www.ulh.nhs.uk)

## Aim of the leaflet

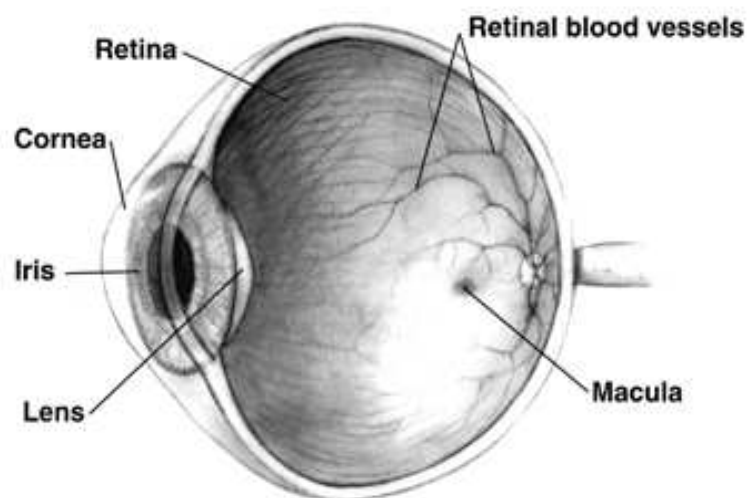
The aim of this leaflet is to provide further information on epiretinal membrane. It provides advice for the condition and the treatment.

## Other names

Epiretinal membrane, preretinal membrane, cellophane maculopathy, retina wrinkle, surface wrinkling retinopathy, premacular fibrosis and internal limiting membrane disease.

## What is an epiretinal membrane?

An **epiretinal membrane** is scar tissue that has formed on the eye's macula, located in the centre of the eye's light-sensitive tissue called the retina. The macula provides the sharp, central vision we need for reading, driving and seeing fine detail. An epiretinal membrane can cause blurred and distorted central vision.



## Contact details

If you have any questions about any of the information contained in this leaflet please contact:

### **Clinic 8, Lincoln County Hospital**

01522 307180

Monday to Friday 9am to 5pm

### **Royle Eye Department, Pilgrim Hospital**

01205 445626

Monday to Thursday 8am to 8pm, Friday 9am to 5pm

## External sources of information

The following websites have further information:

### **Macular Society**

Tel: 0845 241 2041

[www.maculardisease.org](http://www.maculardisease.org)

### **Royal National Institute of Blind People**

Helpline: 0303 123 9999

[www.rnib.org.uk](http://www.rnib.org.uk)

## **How successful is this surgery?**

Surgery to repair an epiretinal membrane is very delicate and while vision improves in most cases, it does not usually return to normal. On average, about half of the vision lost from an epiretinal membrane is restored; some people have significantly more vision restored, some less. In most cases, vision distortion is significantly reduced. Recovery of vision can take up to three months. Patients should talk with their eye care professional about whether treatment is appropriate.

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

The most common complication of a vitrectomy is an increase in the rate of cataract development. Cataract surgery may be needed within a few years after the vitrectomy. Other, less common complications are retinal detachment either during or after surgery and infection after surgery. Also, the macular pucker may grow back, but this is rare.

**For further information please speak to your doctor.**

Most of the eye's interior is filled with vitreous, a gel-like substance that fills about 80% of the eye and helps it maintain a round shape. The vitreous contains millions of fine fibres that are attached to the surface of the retina. As we age, the vitreous slowly shrinks and pulls away from the retinal surface. This is called a vitreous detachment and is normal. In most cases, there are no adverse effects, except for a small increase in floaters, which are little "cobwebs" or specks that seem to float about in your field of vision.

However, sometimes when the vitreous pulls away from the retina, there is microscopic damage to the retina's surface (Note: This is not a macular hole). When this happens, the retina begins a healing process to the damaged area and forms scar tissue, or an epiretinal membrane, on the surface of the retina. This scar tissue is firmly attached to the retina surface. When the scar tissue contracts, it causes the retina to wrinkle, or pucker, usually without any effect on central vision. However, if the scar tissue has formed over the macula, our sharp, central vision becomes blurred and distorted.

## **What causes an epiretinal membrane?**

Most macular puckers are related to vitreous detachment, which usually occurs in people over age 50. As you age, you are at increased risk for macular pucker.

An epiretinal membrane can also be triggered by certain eye diseases and disorders, such as a detached retina and inflammation of the eye (uveitis). Also, people with diabetes sometimes develop an eye disease called diabetic retinopathy, which can cause an epiretinal membrane. An epiretinal membrane can also be caused by trauma from either surgery or an eye injury.

## **What are the symptoms of an epiretinal membrane?**

Vision loss from an epiretinal membrane can vary from no loss to severe loss, although severe vision loss is uncommon. People with an epiretinal membrane may notice that their vision is blurry or mildly distorted and straight lines can appear wavy. They may have difficulty in seeing fine detail and reading small print. There may be a grey area in the centre of your vision, or perhaps even a blind spot.

## **Is an epiretinal membrane the same as age-related macular degeneration?**

No. An epiretinal membrane and age-related macular degeneration are two separate and distinct conditions, although the symptoms for each are similar. An eye care professional will know the difference.

## **Can an epiretinal membrane get worse?**

For most people, vision remains stable and does not get progressively worse. Usually macular pucker affects one eye, although it may affect the other eye later.

## **Is an epiretinal membrane similar to a macular hole?**

An epiretinal membrane and a macular hole are different conditions, although they both result from the same reason: The pulling on the retina from a shrinking vitreous. When the "pulling" causes microscopic damage, the retina can heal itself; scar tissue, or an epiretinal membrane, can be the

result. If the shrinking vitreous pulls too hard, it can tear the retina, creating a macular hole, which is more serious. Both conditions have similar symptoms - distorted and blurred vision. Also, an epiretinal membrane will not "develop" into a macular hole. An eye care professional will know the difference.

## **How is an epiretinal membrane treated?**

An epiretinal membrane usually requires no treatment. In many cases, the symptoms of vision distortion and blurriness are mild and no treatment is necessary. People usually adjust to the mild visual distortion, since it does not affect activities of daily life, such as reading and driving. Neither eye drops, medications, nor nutritional supplements will improve vision distorted from macular pucker. Sometimes the scar tissue which causes an epiretinal membrane separates from the retina and the macular pucker clears up.

Rarely, vision deteriorates to the point where it affects daily routine activities. However, when this happens, surgery may be recommended. This procedure is called a vitrectomy, in which the vitreous gel is removed to prevent it from pulling on the retina and replaced with a salt solution (because the vitreous is mostly water, you will notice no change between the salt solution and the normal vitreous). Also, the scar tissue which causes the wrinkling is removed. A vitrectomy is usually performed under local anaesthesia.

After the operation, you will need to wear an eye patch for a few days or weeks to protect the eye. You will also need to use medicated eye drops to protect against infection.