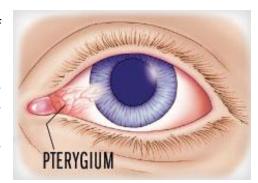


Pterygium

What is a Pterygium?

A Pterygium (tuh-ridge-ee-uhm) is a wing shaped growth of tissue that extends from the conjunctiva (the thin membrane covering the white of the eye) onto the cornea (the clear domed window in front of the iris and pupil). Pterygia typically develop on the nasal side and in both eyes. It's important to note that a pterygium is not cancerous. Some individuals may confuse pterygia for cataracts. Cataracts involve the clouding of the lens inside the eye and are not easily visible to the naked eye.



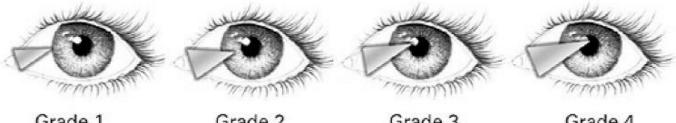
What causes Pterygia?

Pterygia grow in response to ocular surface irritation and exposure to ultraviolet (UV) radiation. They are exceptionally common in Queensland among individuals who spend extensive time outdoors, including farmers, cricketers and surfers. Most develop in our teenage years and slowly progress across the cornea.

Are Pterygia dangerous?

In the early phases pterygia are not considered sight threatening, but they can be cosmetically displeasing and cause discomfort. Those that do cause corneal distortion to the pupil zone warrant removal before they grow into the pupil region. Both the pterygium and the residual scarring post removal will distort vision. It is crucial to have a pterygium examined via slit lamp biomicroscopy every year as progression into the corneal tissue generally exceeds that which can be seen by the naked eye. Topographical corneal changes can also be mapped with our corneal topographer. If you notice any rapid changes in tissue on or around your eyes, it's imperative to seek immediate evaluation.



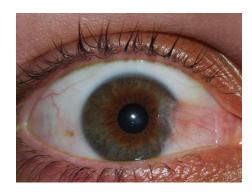


Grade 1 Grade 2 Grade 3 Grade 4



How can Pterygia be treated?

In cases where the pterygium is not actively encroaching upon the cornea, safeguarding the eyes from ultraviolet light exposure, reducing exposure to allergens, improving eyelid health and tear film function can help stabilise its growth. If the pterygium is stable and not compromising vision no further intervention is needed. However, when the pterygium is actively advancing onto the cornea and jeopardizing vision surgical removal is required.



We recommend **P.E.R.F.E.C.T.** (Pterygium Extended **R**emoval **F**ollowed by **E**xtended **C**onjunctival **T**ransplant) surgery. Performed by a handful of ophthalmologists in Queensland and New South Wales, this procedure has reduced the pterygium recurrence rate from the 10 to 15% to 0.1%. More importantly the cosmetic appearance achieved after P.E.R.F.E.C.T. is usually so good that the patient forgets which eye has had the surgery a few months later.

The same technique is used for the removal of a recurrent pterygium after removal by other surgeons. The surgical procedure is far more difficult and may take 1% - 2 hours of operating time. The recurrence rate is 0.5%, but the cosmetic result is not always as good as when the surgical procedure is used on a pterygium which has never been removed before.

Recovery can take several weeks. It's advisable to undergo surgery before the pterygium progresses to the point of interfering with vision. We can evaluate the pterygium and refer you to a pterygium ophthalmologist if removal is necessary.

How can Pterygia be prevented?

The most effective method to lower your risk of developing a pterygium is by shielding your eyes from ultraviolet (UV) radiation. UV radiation exposure not only contributes to the development of pterygia but also increases the risk of cataracts, macular degeneration, and eye lid and facial skin cancers.

- Avoid the sun especially from 10 am to 4 pm.
- Wear a broad-brimmed hat that will reduce by half the amount or UV radiation reaching your eyes.
- Wear sunglasses- Wraparound sunglasses are best.



