



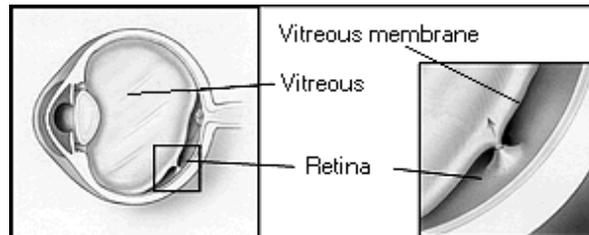
Vitreous floaters

Vitreous floaters are very common. In fact everyone probably has them. They are more obvious when viewed in bright light against a plain background. This leaflet gives advice to people who have noticed an increase in their floaters recently.

What are they?

The eye is rather like a camera. The space between the lens and the film in a camera is just air, but in our eyes this space is filled by **vitreous fluid**, a liquid a little like the white of an egg. This fluid is not perfectly clear. There are particles floating in it, and it is these particles that appear to be floating in front of us as grey black blobs often the shape of tadpoles or circles.

In later life, new floaters are often described as being like a net curtain, which can suddenly appear. This may be due to a **posterior vitreous detachment**, where the vitreous fluid shrinks and pulls a layer called the vitreous membrane away from the **retina** (light sensitive tissue at the back of the eye). This sometimes causes **flashing lights** as the vitreous pulls on the retina. As soon as the vitreous detaches from the retina and starts floating around, the back surface of the vitreous becomes visible as floaters. This is quite common, and usually does not cause further problems. There is no treatment recommended for a vitreous detachment or floaters. Fortunately they often move out of view within a month or two.



Posterior vitreous detachment

However, there is a small chance that a posterior vitreous detachment can also cause a break in the retina, which may lead to a **retinal detachment** (where the retinal tissue becomes separated from the eye). The symptoms of this are the sudden appearance of several floaters, flashes of light, and a reduction in vision, particularly **peripheral vision** (side vision or away from the centre). Reduced peripheral vision caused by a retinal detachment **should be treated quickly**. The detached area of the retina causes a blind spot. You can check your own peripheral vision by closing one eye and making sure that you can see your hands (as you move your fingers), in the corner of your sight. Check the up and down vision too, one eye at a time. If you suspect you have a retinal detachment, contact **eyepractice** or your GP straight away. An appointment at the acute eye clinic can be arranged if necessary. If **eyepractice** is closed and your vision has worsened over the past few days (or hours), go to the hospital casualty department.

If you have recent (less than a month) symptoms of flashes and floaters, you may need to see a medical eye specialist to check the retina for damage. Contact **eyepractice** for advice.