

Post-Operative Vitrectomy Care and Physiotherapy

Post-operative care

After your vitrectomy, in order to maximise your recovery and reduce complications it is important to follow the instructions from Dr Chauhan and his team as well as the following.

Posturing

For the 5-10 days (Dr Chauhan will let you know how many) starting on the day of surgery, posturing will be required to allow for maximal recovery.

Posturing involves keeping your eyes facing vertically downwards for **50 minutes of every waking hour**. This allows the gas bubble to rise to the back of your eye to allow for healing.

During the day, the use of a specialised aid such as a **RetinaRest** (www.retinarest.com) is encouraged to enable you to continue with daily activities such as reading and watching TV.



Sleep

Sleeping on your side is ideal but sleeping on your back is to be avoided. To avoid rolling onto your back, place pillows behind your back or pin a tennis ball in a sock behind your back to prevent rolling onto your back.

Walking

When walking, keep looking vertically downwards, whilst trying to keep your head up as upright as possible. Walking is encouraged for its many other health benefits.

Activities

Most seated activities should be possible and may be easier with the use of the RetinaRest. For other activities that you are not sure of, it is best to contact Dr Chauhan's team.

Post-operative exercises

Exercises are important to maintain good neck health and to prevent unnecessary compensation at the neck and shoulders.

Exercises are outlined with instructions on the other side of this paper.

How often

Exercises should be completed as often as required during the 10 minute break from posturing every hour. During the 10 minute break it is recommended to look around, move your neck or go for a short walk for a change of surroundings.

Post-operative physiotherapy

Stiffness and discomfort may occur due to posturing. If this is the case, assessment and appropriate treatment from a physiotherapist experienced with post-operative vitrectomy care is recommended to alleviate symptoms and restore mobility.

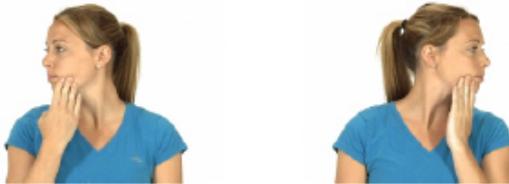
1. Head rotations



- In standing, do circles with your head in both directions.
- Do not go all the way back into extension as you rotate.

Repetition: 10 Frequency: 2x/day

2. Assisted active neck rotation



- Stand or sit tall.
- Slowly rotate head to bring chin over shoulder and look to the side.
- Apply gentle pressure to opposite cheek bone with your hand to assist movement.
- Return to neutral position.

Repetition: 10 Frequency: 2x/day

3. Stretching side bending



- Lift one arm and bring it up and across your head.
- Sit straight and place the palm of your hand on your head.
- Use your hand to pull your head gently down towards your shoulder until a stretch is felt on the opposite side of the neck.
- Maintain the position.
- Do not turn your head or tilt it forward or backwards while you perform this stretch.

Sets: 2 Repetition: 30 Frequency: 2x/day

4. Stretching levator scapula



- Sit tall on a straight chair.
- Grab the bottom of the seat with your hand on the injured side to lower the shoulder by pulling down.
- Tilt and turn your head to the opposite side.
- Nod head forward until a stretch is felt along side and back of neck.
- Apply extra pressure (gently) with your hand to increase the stretch if needed.
- Hold the stretch and relax.

Sets: 2 Repetition: 30 Frequency: 2x/day

5. Stretching SCM



- Sit and place both hands over the collarbone on the affected side.
- Pull it down towards floor gently with hands.
- Raise your chin and lean your head sideways away from hands until a stretch is felt along the side of the neck.
- Maintain the stretch.

Sets: 2 Repetition: 30 Frequency: 2x/day