Frequently asked questions

1. Will I need to have LPI repeated?
   Usually this procedure will only be performed once. Occasionally the procedure will need to be repeated in order to enlarge the hole in the iris created by the first procedure.

2. How long should I take off work/sport/swimming etc?
   You will need to take approximately 2-3 days off work, sport and swimming. Dr Phipps can provide a sick certificate for this period.

4. When can I drive after LPI?
   You will need to avoid driving for 2-3 days after LPI. It is recommended that you wear sunglasses during the day for the following week after you commence driving.

5. Do I need someone with me on the day the procedure is performed?
   Yes. You will need to have someone with you to drive you home after the laser procedure.
What is Laser Peripheral Iridotomy?
Laser Peripheral Iridotomy (LPI) is an effective, safe and simple procedure to improve eye health for patients with narrow angles.

What is Narrow Angle?
This is when the space between the iris and the cornea is too narrow. The iris can cover the drainage canals when the pupil enlarges. This can then lead to high eye pressure causing damage to the optic nerve and loss of vision.

Why do I need to have this procedure?
Narrow angles may be a precursor to angle-closure glaucoma. Laser Peripheral Iridotomy changes the fluid out-flow dynamics of the eye. It eliminates the risk of a sudden or acute closure of the angle and reduces the risk of a gradual closure of the angle.

There are two ways in which angle closure can manifest itself in people with narrow angles. It can occur very quickly with intense pain, headaches, nausea, redness and blurred vision occurring over a few hours.
Alternatively, angle closure can occur slowly over months to years leading to the eye pressure gradually increasing to dangerous levels and slowly damaging the optic nerve with minimal symptoms. The best time to have LPI is before angle closure occurs.

Treatment
Treatment is to create a small internal hole within the iris. The iris does not heal as other body tissues do and so this hole will remain open permanently. This hole will not be visible cosmetically. Narrow angles usually affect both eyes. Both eyes usually receive treatment and they can be treated at the same appointment.

What to expect during the procedure
The LPI is performed in the doctors’ room after administering an anaesthetic drop to the eye. The procedure usually lasts around three minutes per eye. Approximately 20 minutes prior to the procedure a pupil constricting drop (Pilocarpine) will be placed in the eye often leading to a mild eye or frontal headache.
A contact lens is placed on the eye during the procedure. You may be able to hear some clicking sounds produced by the laser machine.
The procedure itself is painless; however, you may experience a sensation in the eye during the procedure.

What will happen after the procedure?
Your vision will be blurred. You will be given anti-inflammatory eye drops to be administered to the treated eye for a few days. Usually you will be seen again for another eye examination in 4 to 6 weeks. You are able to resume wearing contact lenses.

What are the side effects?
You may experience some redness, eye discomfort, sensitivity to bright light and blurry vision for up to three days after the procedure.

What are the risks of LPI?
Dr Phipps will discuss the risks with you in detail.
There is a small risk of raised eye pressure for a short period of time after the procedure. To prevent a rise in eye pressure from happening you may be given additional eye pressure lowering drops before and/or after the procedure.
There have been very few reports of serious problems after LPI. These serious problems may include bleeding of the iris (pigmented part of the eye), severe inflammation inside the eye and swelling of the cornea (front part of the eye). These problems while prolonging the recovery time almost always fully resolve.
Very rarely patients can experience troublesome visual symptoms in the long term related to light entering the eye through the Laser Peripheral Iridotomy.