

Retinal detachment

Overview

Retinal detachment describes an emergency situation in which a thin layer of tissue (the retina) at the back of the eye pulls away from its normal position.

Retinal detachment separates the retinal cells from the layer of blood vessels that provides oxygen and nourishment. The longer retinal detachment goes untreated, the greater your risk of permanent vision loss in the affected eye.

Warning signs of retinal detachment may include one or all of the following: the sudden appearance of floaters and flashes and reduced vision. Contacting an eye specialist (ophthalmologist) right away can help save your vision.

Symptoms

Retinal detachment itself is painless. But warning signs almost always appear before it occurs or has advanced, such as:

- The sudden appearance of many floaters — tiny specks that seem to drift through your field of vision
- Flashes of light in one or both eyes (photopsia)
- Blurred vision
- Gradually reduced side (peripheral) vision
- A curtain-like shadow over your visual field

When to see a doctor

Seek immediate medical attention if you are experiencing the signs or symptoms of retinal detachment. Retinal detachment is a medical emergency in which you can permanently lose your vision.

Causes

There are three different types of retinal detachment:

- **Rhegmatogenous (reg-ma-TODGE-uh-nus).** These types of retinal detachments are the most common. Rhegmatogenous detachments are caused by a hole or tear in the retina that allows fluid to pass through and collect underneath the retina, pulling the retina away from underlying tissues. The areas where the retina detaches lose their blood supply and stop working, causing you to lose vision.

The most common cause of rhegmatogenous detachment is aging. As you age, the gel-like material that fills the inside of your eye, known as the vitreous (VIT-ree-us), may change in consistency and shrink or become more liquid. Normally, the vitreous separates from the surface of the retina without any complications — a common condition called posterior vitreous detachment (PVD). One complication of this separation is a tear.

As the vitreous separates or peels off the retina, it may tug on the retina with enough force to create a retinal tear. Left untreated, the liquid vitreous can pass through the tear into the space behind the retina, causing the retina to become detached.

- **Tractional.** This type of detachment can occur when scar tissue grows on the retina's surface, causing the retina to pull away from the back of the eye. Tractional detachment is typically seen in people who have poorly controlled diabetes or other conditions.
- **Exudative.** In this type of detachment, fluid accumulates beneath the retina, but there are no holes or tears in the retina. Exudative detachment can be caused by age-related macular degeneration, injury to the eye, tumors or inflammatory disorders.

Risk factors

The following factors increase your risk of retinal detachment:

- Aging — retinal detachment is more common in people over age 50
- Previous retinal detachment in one eye
- Family history of retinal detachment
- Extreme nearsightedness (myopia)
- Previous eye surgery, such as cataract removal
- Previous severe eye injury
- Previous other eye disease or disorder, including retinoschisis, uveitis or thinning of the peripheral retina (lattice degeneration)

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