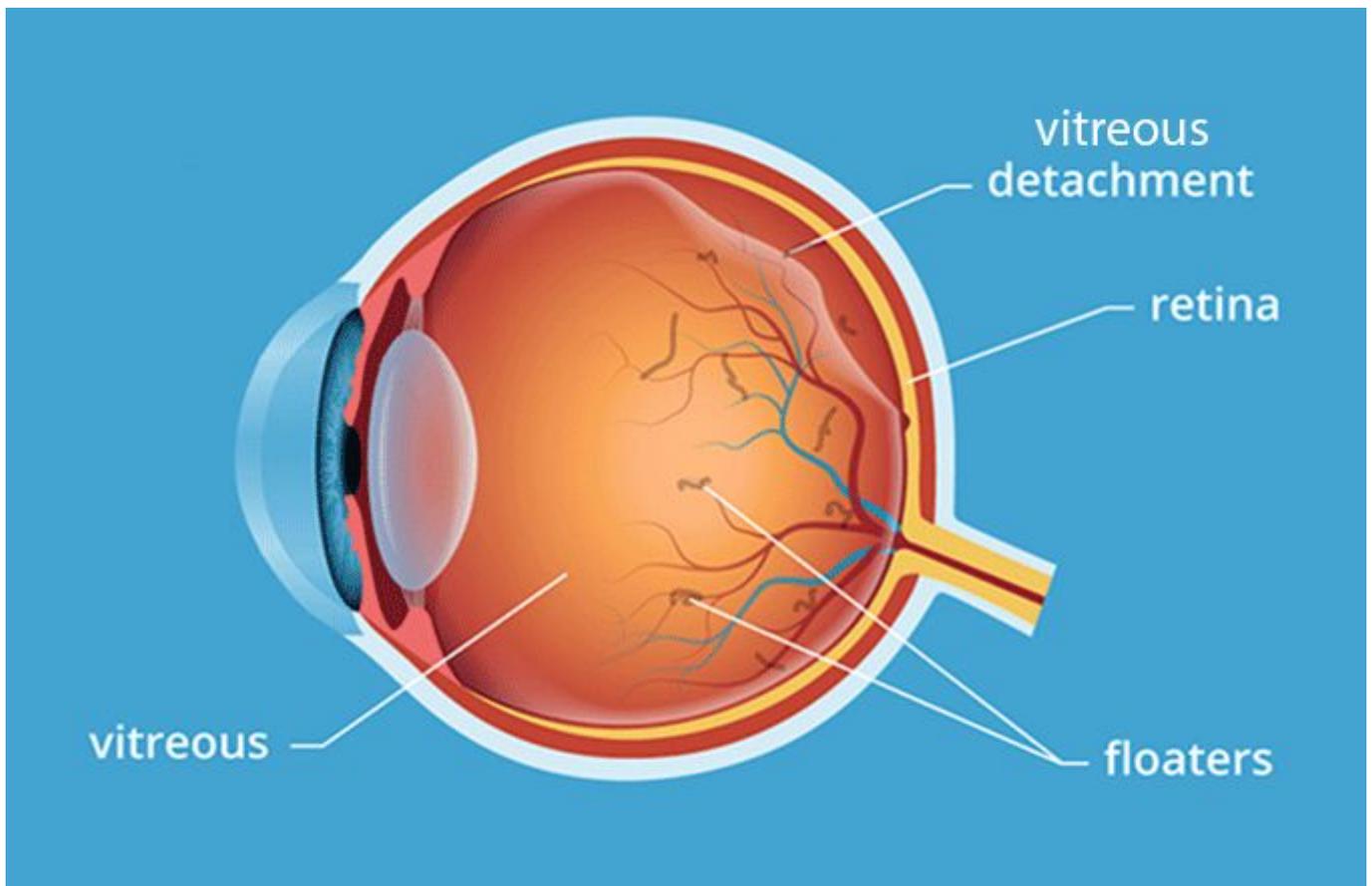


Posterior Vitreous Detachment

The middle of the eye is filled with a substance called vitreous. The vitreous is normally attached to the retina, in the back of the eye. A posterior vitreous detachment (PVD) is when the vitreous pulls away from the retina.



What causes a PVD?

As we age, the vitreous changes. It becomes less solid and more liquid-like. It shrinks and pulls away from the back of the eye. The vitreous is attached to the retina by millions of microscopic fibers. When enough of these fibers break, the vitreous separates completely from the retina, causing a PVD.

What Are Symptoms of a PVD?

Most people with a PVD will not notice any symptoms. Some with PVD will have the following symptoms:

- flashes of light in peripheral or side vision
- floaters, or tiny specks, moving around in your field of vision or rarely,
- decreased vision or a dark curtain or shadow moving across your field of vision

Who Is at Risk for PVD?

A PVD, much like wrinkles, is a normal part of aging. It usually happens to most people by the age of 70. These are some risk factors that may cause a PVD to happen earlier:

- nearsightedness
- cataract or other eye surgeries
- diabetes
- trauma (injury) to the eye

Can a PVD Cause Vision Loss?

For most people, a PVD is a benign (harmless) event with no symptoms and no vision loss. Others may notice a lot of floaters. Floaters can be bothersome but usually become less noticeable over time.

For a small amount of people having a PVD, problems occur when the vitreous detaches from the retina. The vitreous pulls too hard from the back of the eye and takes a piece of the underlying tissue (the retina) with it. This is called a

retinal tear. It can lead to a retinal detachment, which can cause permanent loss of vision.

If I think I'm having a PVD, what should I do?

Most people don't know they are having a PVD. But if you notice a lot of floaters or flashes of light suddenly, or have a decrease in vision, see your ophthalmologist as soon as possible.

These symptoms can be normal, but they can also mean that you have a retinal tear or retinal detachment. You won't be able to tell the difference but an ophthalmologist can. If a retinal tear or retinal detachment is treated early enough by an ophthalmologist, you can save your vision.

How is PVD treated?

If a PVD happens normally without any damage to the retina, no treatment is needed. If a retinal tear happens during a PVD, treatment is usually needed. Your ophthalmologist will seal the retina to the wall of the eye using a laser or cryopexy (freezing treatment).