# FAQ

### WHEN CAN I WASH MY HAIR/FACE?

You can wash your face, but do not touch the operative bandage or get it wet. It will be removed here at The New York Eye Cancer Center. After the bandage is removed, you should gently clean your eyelids each day with a clean washcloth and baby soap. You should not rub your eyelids or run the shower into your operated eye. You can take a shower with your operated eye closed.

### WHAT SORT OF CARE WILL MY EYE NEED WHEN I GET HOME?

You will place antibiotic-steroid drops or ointment on your temporary prosthesis 2-4 times a day for 1 month. This will help you heal more safely and quickly.

### WHEN CAN I RETURN TO MY NORMAL ACTIVITIES?

You should not lift, strain, or rub your eye for at least 10 days after surgery. Do not take aspirin or other blood thinners unless your primary care physician says they are required. You should be able to return to school or work within 2-4 weeks after surgery.

## HOW OFTEN WILL I NEED TO BE CHECKED AFTER THE POST-OPERATIVE PERIOD?

Dr. Finger recommends that you have an eye and systemic exam every 6 months for the first 5-years and then yearly thereafter.



Office Hours: MON - FRI: 9 AM - 5 PM

#### After Hours Contact:

Our live phone attendant will find your **The New York Eye Cancer Center** doctor. In case of emergency, you may go to your local emergency room; the doctor there should be instructed to contact us.

(01) 1-212-832-8170



contactus@eyecancer.com



THE NEW YORK EYE CANCER CENTER

ENUCLEATION



Paul T. Finger, M.D.

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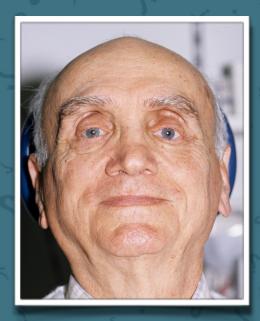
## What Is Enucleation?

"Enucleation" is what eye doctors call the surgery to remove the eye. It is different from "exenteration," which is the removal of the eye as well as the surrounding structures of the eye. While other methods exist to control the tumor, this is currently the only treatment that allows Dr. Finger to remove the tumor from your body. After decades of finding ways to spare the eye and vision; Dr. Finger only has to remove about 6% of eyes. Most of the rest of the patients tumors can be treated with eye and vision-sparing radiation techniques.

When the eye must be removed, patients also lose the vision in that eye. However, with time, almost all patients are able to do all the thir get they used to do before losing the reye.

### References:

- 1. Enucleation. *Survey of Ophthalmology* 2000;44:277-301.
- 2. Early ocular prosthesis insertion improves quality of life after enucleation. *Optometry*. 2006 Feb; 77:71-5.



One of our patients, pictured above. After enucleation and after becoming accustomed to his prosthetic, he is very pleased with his outcome.

Can you tell which one?

### TIPS:

- Reading the book "A Singular View" by Frank Brady may help in your transition.
- ALWAYS wear unbreakable "polycarbonate" glasses to protect your good eye.

## Does Surgery Hurt?

The eye is surrounded by bones, so it is easier to tolerate removal of an eye compared to other major surgeries. Nearly all enucleations are outpatient surgeries.

Your surgery will be performed while you are asleep under general anesthesia. Therefore, you will not feel anything until you wake up.

Dr. Finger wants to maximize your comfort, so he places a local anesthesia into the remaining orbital tissues at the end of surgery. This ensures you will have the least pain possible. Despite the injections, most patients have a headache after surgery. The headache is usually treatable with plain Tylenol.

Five days after surgery you will have your bandage removed by Dr. Finger or his associates. At that time, we typically place a temporary ocular prosthesis (eye) for your aesthetic comfort.

After a final prosthetic fitting, 90% of our patients are happy with their look, and 80% say others can't even tell they are monocular.