Hyphema

A hyphema is bleeding in the front chamber of the eye, inside the eye itself, between the cornea (*clear outer covering of the eye*) and the iris (*colored part of the eye*). It may occur from any form of injury to the eye. It may also occur on its own (*spontaneously*) in certain medical conditions.

Because of gravity, the blood generally settles to the lower part of the eye. This creates a clear red area, with a “fluid level” or straight top, which is clearly visible when looking at the eye. Very small hyphemas may only be visible to an eye specialist, when doing an examination with special tools. Very large hyphemas may completely fill the front chamber, so that the colored part of the eye cannot be seen at all. This is often called an “8 Ball” or “Grade 4” hyphema. It is a dangerous and often painful condition, that must be treated immediately.

CAUSES

The most common cause of a hyphema is injury (*trauma*). In some cases, even a very mild blow to the eye can result in a hyphema. Any condition that makes a patient more likely to bleed can also cause a hyphema. Examples include:

- Diseases that prevent normal blood clotting (hemophilia, blood disorders, low platelet count).
- Use of anti-coagulant drugs or blood thinners (Heparin, Coumadin).
- Overuse of aspirin, or similar medicines.
- Diabetes.
- Recent eye surgery.

SYMPTOMS

- A very small (*microscopic*) hyphema may cause no symptoms at all, or it may cause slightly blurred vision in the affected eye.
- A hyphema with a fluid level usually causes blurred vision in the affected eye.
- An "8 Ball" hyphema causes severe or total loss of vision in the affected eye, and may be very painful.

COMPLICATIONS

- The fluid normally present in the front part of the eye is constantly produced and drained from the inside of the eye, by an internal drainage system. When a hyphema occurs, the blood clogs up this drainage system. This may cause a build-up of fluid, resulting in increased pressure inside the eye. This condition is a form of glaucoma (*eye disease that involves pressure inside the eyeball*).
- "8 Ball" hyphemas may clog up the drainage system completely, causing a sharp (*acute*) and sudden rise in the pressure inside the eye. This is a dangerous and painful condition. "8 Ball" hyphemas must be treated as soon as possible. The longer they are present, the greater the danger of permanent damage and vision loss.
- It is important to know that every hyphema has the potential to “re-bleed” and become an "8 Ball" hyphema. The greatest danger of this happening is between one and two weeks after the hyphema first occurred.
- Chronic, recurring hyphemas can cause scarring inside the eye, which may cause further complications.

TREATMENT

Most hyphemas that are not "8 Ball" hyphemas clear up fully on their own. Depending on the amount of blood, it may take several days to a few weeks to clear, with a gradual return of normal vision.
The treatment for these types of hyphemas include:

- Restricted activity or bed rest.
- Stopping all medicines that can increase bleeding (aspirin, blood thinners).
- Drops to enlarge (*dilate*) the pupil of the injured eye (to prevent internal scarring).
- Close monitoring by your eye specialist, until the hyphema has completely cleared. This is to make sure eye pressure does not increase. Medicine to prevent or treat increased eye pressure may be needed.

The treatment of "8 Ball" hyphemas includes:

- Surgery to remove the blood from the front part of the eye.
- Medicine (drops or pills) to control the pressure in the eye.
- A small opening may be made in the iris (*colored part*) of the eye, to make sure the blood can drain out and that pressure in the eye does not become dangerously high.

HOME CARE INSTRUCTIONS:

- Follow your caregiver's instructions, otherwise more bleeding may occur. This could result in permanent loss of vision.
- Rest in bed as much as possible, as directed. Lie on your back, and use extra pillows to keep your head raised. You may go the bathroom, eat, and bathe while you are up.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.
- If you have an eye shield, remove it only to put in your prescribed eye drops, and then replace it over your eye. Do this until directed that you no longer need it, by your caregiver. This is to help protect your eye from further injury and a possible re-bleed.
- Do not bend forward or lower your head until the hyphema clears up. Do not do lifting or strenuous activities until the hyphema completely clears up, or as directed by your caregiver.

SEEK IMMEDIATE MEDICAL CARE IF:

- Your vision changes in any way, or you develop pain in the affected eye.
- You are unable to see the colored part of your eye, when you could see all or part of it before.
- You feel sick to your stomach (*nauseous*) or start to vomit.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

Always wear eye protection when involved in any sports or work-related activities that could result in an injury to your eyes.

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