

# Surgeons stuck a probe in my eye and now I can see again

WET age-related macular degeneration (AMD) affects a quarter of a million Britons and, left untreated, can lead to blindness. Treatment involved a monthly injection into the eye, but Josie Lippitt, 59, a retired practice manager from Whitstable, Kent, was one of the first to undergo a new operation to restore sight. Here she talks to DAVID HURST.

## THE PATIENT

WHEN I retired four years ago, my husband Brian and I were looking forward to moving to France. But just days into my retirement, I was writing Christmas cards when the vision in my right eye suddenly went.

It was as if there was a big grey splotch right in the middle of my eye — I could barely see anything. It was very frightening. Apart from having reading glasses, my eyes had been fine until two months before, when I'd gone to the optician for my annual eye check. He said my eyes had some debris made from dead cells floating around in them. He told me it was a condition called age-related macular degeneration (AMD).

He explained the condition was caused by my ageing retina — that's the bit of the eye that turns images into messages that go to the brain. Inside the retina is something called the macula, which you need for reading and seeing things close up.

The optician said I was lucky because there are two forms — wet and dry — and I had the latter, which was less likely to affect my sight. So, when my vision went two months later, I was really worried.

My husband took me straight to A&E, where an eye specialist told me I had the more serious, wet form. He said I could go blind in a matter of weeks if I wasn't treated.

The grey 'splotch' was caused by abnormal blood vessels growing in my eye, then leaking and scarring it.

I had a drug injected into my eye to stop them from growing and to slow down my sight loss. That was also pretty scary: you can see the needle coming towards your eye, but you're not allowed to move. It wasn't painful, but it did hurt a little when the anaesthetic eye drops wore off.

I was told I'd need an injection in my eye every month for the rest of my life. Without them, I would go blind in my right eye, and my left eye might go at any time too. I could always tell when I was due an injection because my sight

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## ME AND MY OPERATION

AGE-RELATED MACULAR DEGENERATION

would go downhill. It never stopped me doing anything major as I could use my other eye to read or watch films. But I did have trouble sometimes chopping veg, and I couldn't see well enough to put on my make-up.

Also, any plans had to revolve around hospital appointments, which did get me depressed.

Then my eye specialist told me about a new procedure being tested at King's College Hospital in London. Instead of jabs, the abnormal blood vessels were burnt off permanently using a probe. If it worked, it would mean I wouldn't need any more injections. It sounded amazing. I called the consultant leading the trial, Mr Tim Jackson, and went to see him in July. He told me it was a fairly straightforward procedure and, as I was suitable, I

could have the op the following month at King's.

After being given anaesthetic eye drops, the probe was put in for four minutes. Thankfully, I could not smell any burning. I couldn't see very much, because there was a patch over my other eye. The procedure took only 40 minutes, and half an hour after that I went home wearing an eye patch.

I had to put in antiseptic eye drops four times a day, but I felt fine. The next day I went back for a check and got the all-clear, so we went off to France for a week.

When I removed the patch a couple of days later, my sight was blurry but the splotch had gone. Over the next few months, my sight gradually started to recover, and since then it's improved tremendously. I can read, drive, cook and watch TV again.

Best of all, I haven't needed any more injections. It's an amazing operation that's changed my life.

## THE SURGEON

Mr Tim Jackson is consultant eye surgeon at King's College Hospital, London. He says: WET age-related macular degeneration is an aggressive condition

in which abnormal blood vessels form in the part of the eye called the macula. These blood vessels are very fragile and often leak blood and fluid, causing scar tissue to form.

This affects central vision, which is essential for everyday tasks such as reading and driving. Sufferers struggle to recognise faces at a distance, have a blurred or blind spot in the centre of their vision, and straight lines can appear wavy.

LEFT untreated, patients can lose their sight within weeks. Wet AMD is the leading cause of blindness in those aged over 50. Genetics are thought to play a role, although smoking and exposure to sunlight also contribute. But age is the main factor, with the condition usually affecting people over 50.

Until now, patients have been treated with regular injections of a drug called Lucentis into the eyeball. This works by preventing new blood vessels from forming.

However, while they can stabilise and even improve sight, these injections need to be done every month, which is a considerable

Picture: GETTY IMAGES



Josie Lippitt: Life's looking up since her eye op

burden on patients and the NHS. And at around £800 a time, the cost can climb to £10,000 a year.

Now, there's a new treatment — epimacular brachytherapy — which can cure the problem for good. We use radiation beams to 'burn' the abnormal blood vessels growing behind the retina. So there is less leakage of fluid and blood.

A third of patients — those at an early stage of AMD — get about a third of an improvement in vision because of reduced leakage, but even advanced cases can be stabilised.

The operation is carried out as a day-case under local anaesthetic. First we thread a tiny probe into the side of the white of the eye until it reaches the abnormal area in the retina. This will have been identified before surgery, using a special camera.

When the device is activated, a radioactive pellet travels down the inside of the probe into the eye. Once at the tip of the probe, it emits radiation for about four minutes; after this, the pellet is retracted and the probe removed.

Although the macula receives a high dose of radiation, the highly targeted delivery means that the overall dose to the body is minimal. It's a very safe operation.

Unlike the injections, the beauty of this technique is that it is a one-off treatment. Some patients may still require follow-up injections, but early indications are that even these would be far less frequent.

The technique is being trialled at about 15 hospitals around the country, including Arrowe Park Hospital, Wirral, Hull & East Yorks Hospital, Torbay Hospital, Bristol Eye Hospital and Southend Hospital.

To participate in the trial, visit [merlotstud.com](http://merlotstud.com) or ask your GP for a referral to a participating local hospital. If you live outside one of these regions, ask for a referral to Mr Tim Jackson, King's College Hospital, London SE5 9RS.