

Patient Information – Epiretinal Membrane

Department of Ophthalmology

What is an epiretinal membrane?

An epiretinal membrane is a scar-like tissue that forms over the macula. The macula is the tissue near the centre of the eye's retina that's responsible for central vision. Epiretinal membrane is also known as macular pucker or cellophane membrane. The cause is usually unknown.

How is it diagnosed?

Epiretinal membrane can be diagnosed using Optical Coherence Tomography (OCT) to produce cross-sectional images of the macula. You may also need a Fluorescein Angiography.

What can be done about this?

Many cases of epiretinal membrane are mild enough that no treatment is necessary. If vision is significantly affected, your doctor may recommend a surgical procedure (called a vitrectomy) to remove the membrane. The only proven treatment for this condition is surgery. This condition is not the same as macular degeneration but the symptoms can be similar.

How will I know if I need treatment?

Many membranes are asymptomatic and do not cause any problems with vision. Epiretinal membrane typically progresses slowly and affects central vision by causing blurring and distortion. If vision deteriorates or affects daily activities, vitrectomy surgery with removal of the epiretinal membrane may be recommended.

Treatment is unnecessary if the epiretinal membrane is mild, stable and having little or no effect on vision. Only cases where the membrane is causing problems need to be considered for surgery.

What does surgery involve?

The surgical procedure (operation) for this condition is called a vitrectomy. In this procedure, the surgeon makes tiny incisions in the sclera (white portion of

the eye) and uses delicate instruments to enter the back portion of the eye. The vitreous gel is then removed followed by the peeling of scar tissue.

How successful is treatment?

Surgery to repair an epiretinal membrane is very delicate, and while vision improves in most cases, it does not always return fully (to normal). Recovery of vision can take up to 3 to 12 months.

Are there any risks?

The development of a cataract is the most common risk, with most patients needing cataract surgery within 12 months. These are usually very successful and further improve the vision. Another approach is to treat both the cataract and membrane with one operation and this may be offered to you.

Some patients develop a retinal detachment which can reduce vision dramatically. If detected early these can also be operated on and vision restored. Other risks include infection of the eye and reoccurrence of the epiretinal membrane. Some of these complications are significant but, fortunately, very rare. Please do ask about this if you require more information.

What to expect after surgery

You will probably not see very well from your eye for at least one month. Vision then improves over the next 12 months. In some patients, despite successful removal of the membrane, vision does not always improve. However, vision can improve in around 75% to 85% of patients.

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