

ARTIFICIAL EYE CLINIC

Vienna, Virginia

An ocular prosthesis fits the socket of an enucleated eye

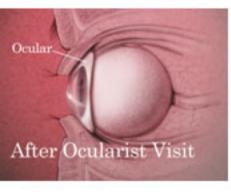




While ocular prosthesis are sometimes referred to as "glass eyes", for the last sixty years they have been made of acrylic plastic called methyl methacrylate



Prosthetic eyes are impression fit, and molded to fit in front of an ocular implant

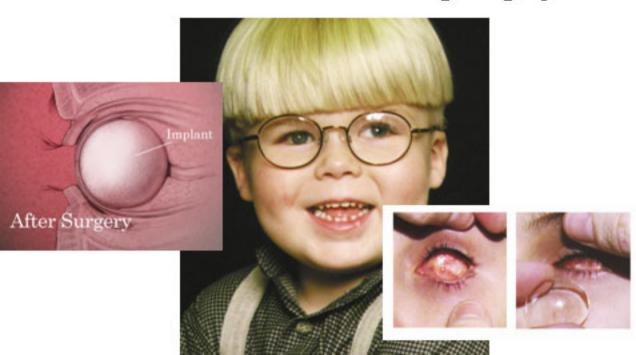






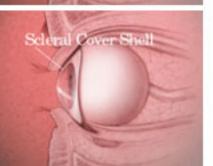


Ocular prostheses are generally made four to six weeks following surgery



Scleral Cover Shells are prostheses which cover blind, deformed, or discolored eyes, or cover disfigured globes









Ideal candidates for Scleral Cover Shells include

- Phthisical Eyes
- Microphthalmic Eyes
- Eviscerations

















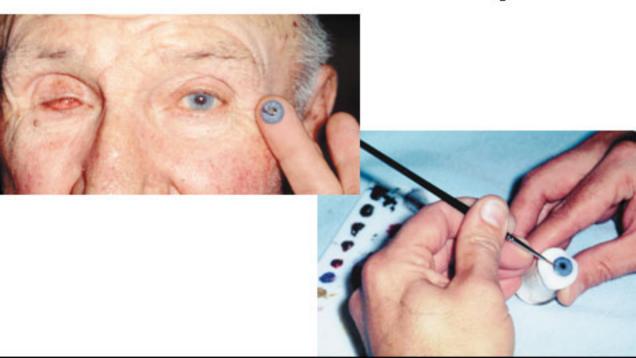
Making an Ocular Prosthesis



The process begins by taking an impression of the eye socket



The iris is hand painted from direct observation of the unaffected eye



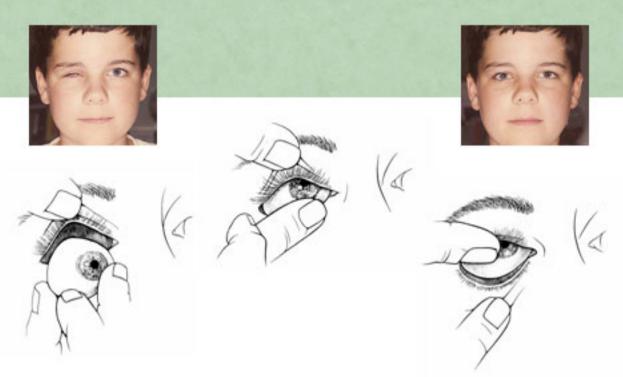
The shape is cast in acrylic, further painted and polished



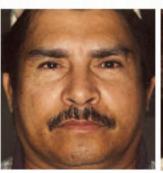
Finally, the prosthesis is complete and ready for insertion



Insertion/Removal/Care



Most patients can wear a prosthesis continuously, day and night, for months without removal. It has been found that frequent removal sometimes irritates the socket









Mild soap, such as baby shampoo is suggested as a cleaner, along with annual polishing of the prosthesis



According to the American Academy of Ophthalmology the three most difficult issues regarding ocular prostheses, include:

- superior sulcus depressions
- ptosis
- chronic mucus exudates

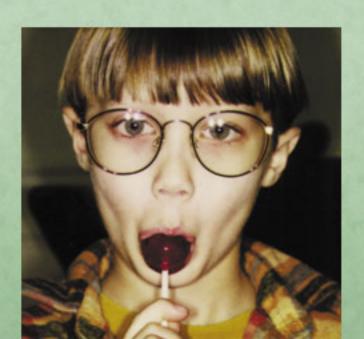


Suggestions



Realistic Expectations

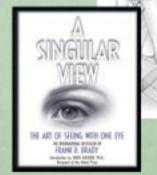
- Movement
- > Appearance



PATIENT RESOURCE – SUGGESTED READING

A Singular View, the Art of Seeing with One Eye

by Frank Brady





- "An excellent reference book." Wills Eye Hospital, Philadelphia, PA
- "This book is written as a manual for the newly one eyed and addresses the problems
 that occur during daily living with monocular vision" American Medical Journal
- "A wonderful resource for patients who need to deal with the loss of one eye."
- Sean Donahue, M.D., Ph.D., Assistance Professor of Ophthalmology, Pediatrics Neurology, Vanderbilt University