

Great Ormond Street Hospital for Children NHS Foundation Trust: Information for Families

After your child has orbital sclerotherapy

This information sheet explains how to look after your child after they have had sclerotherapy for a malformation of their eye at Great Ormond Street Hospital (GOSH) and what to expect in the days following treatment.

The medicine injected into the malformation may make the area around the eye swell a lot over the first week or two. The eye is often completely closed for a few days. Bruising around the eye can be quite severe and last several weeks. Sometimes the bruise can extend onto the white part of the eye and here it looks bright red. This can look painful but is quite normal. The bruising can take quite a long time to fade. Sometimes there can be clear fluid leaking from the eye for a few days; this is nothing to worry about.

These aftereffects are expected and show that the medicine is working. Most children only need regular pain relief medicine, such as paracetamol or ibuprofen, for a few days. Your child will be fine to go back to school when they are comfortable but should not doing any PE or sport until the swelling has started to settle down.

The swelling should start to go down within a week but the effects of the treatment, such as a decrease in the size of the malformation, may not be obvious for several months.

Lymphatic malformations are prone to small bleeds into the cysts from the tiny surrounding blood vessels. Most of the time, this is not a problem. Your child's malformation may have shown signs of this in the past, such as sudden swelling or bruising. Sclerotherapy of the malformation may trigger another bleed

in the days or weeks following treatment but this is extremely rare. If a large clot forms behind the eyeball itself, it can push the eye forward and cause stress on the optic nerve. If your child usually has good vision in that eye, a large blood clot has the potential to damage the vision in that eye if the pressure is not relieved, for instance by a small operation to release the pressure behind the eye. Often, the eye doctors may decide to let the swelling settle slowly on its own. If the eye is pushed forward, the eyelids may not be able to close and this will leave the front of the eye unprotected, so your child may need to be given eye drops to use until the swelling settles. If sudden severe swelling happens, your child needs to be reviewed urgently by an eye doctor. You need to contact your local eye hospital team about this.

Your child may have had an infection in their eye in the past, though this is rare with orbital malformations. Infections are rare after sclerotherapy but if the eye area is very hot, red and painful, with a persistent thick yellow discharge from the eye, you should contact your local eye hospital about this.

If you have any questions, please call the ophthalmology clinical nurse specialist on 020 7405 9200 extension 0597 or 0487

Compiled by the Ophthalmology and Interventional Radiology departments in collaboration with the Child and Family Information Group

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