

About dacryocystorhinostomy (DCR)

This is an operation that is carried out to help tear drainage.

Tears normally drain away from the tear drainage passages at the corner of your nose, into the back of the nose. If these become blocked, or are too narrow, then the tears cannot drain away properly and the eye becomes watery. The channels can become narrower if you have previously had disease or with age.

Infection can occur as a result of this blockage, and repeated infections can be troublesome.

Treatment

This will start with a visit to see an ophthalmologist (eye specialist). Often a test is performed to see if the passages are blocked. This is a simple procedure that involves gently squeezing a small amount of salty water into the passages to see if the fluid will pass through to the back of the nose. We use local anaesthetic drops so that the procedure is not uncomfortable.

It may also be necessary to perform an X-ray procedure called a dacryocystogram (DCG) to establish how narrow or blocked the passages are. The DCG is similar to the procedure above, except a special opaque dye is used so that the passages are visible on X-ray.

You will be able to discuss your condition with the doctor and if you both think that surgery is the best way of treating the problem, you will have your name added to the waiting list, and at a later date (about a month before surgery), be asked to attend a pre-assessment clinic.

At this clinic, we will give you further information about your stay in hospital, how long that may be and preparations you should make. It will be a chance for you to ask questions. We will carry out any further tests necessary for the operation to take place, such as ECG (electrocardiograph), or blood tests.

Before surgery we normally advise patients to avoid taking aspirin or other blood thinning tablets for 1 week, so as to reduce bruising. Please check with your GP. If you take Warfarin tablets the pre-assessment nurse will advise you how to proceed.

The operation

External DCR (tear drainage) surgery

DCR surgery takes about one hour and is usually carried out under local anaesthetic with sedation, but can be carried out under general anaesthesia. You may be required to stay in hospital overnight. A small cut is made at the side of your nose, (where spectacles would normally rest). The tear passage blockage is bypassed and a new passage created by joining the tear sac directly to the lining of the nose higher up. The skin stitches normally have to be removed 7-10 days later. The wound that is left heals very quickly into the crease lines and any scar almost disappears from view.

Endoscopic DCR

The surgeon may be able to perform this operation by passing a tube up the nasal passage and performing surgery from within the nose. This is an alternative approach that is not suitable for all patients, but avoids a skin incision.

Tubes are used following this surgery as in external DCR surgery. These are normally removed easily in clinic at a later stage and are not normally noticeable.

After surgery

Often a tiny silicone tube is left in the passage and passed down into the nose. This cannot be seen and is not uncomfortable. It is removed easily in clinic at a later stage, usually after 3 months.

You may need a dressing over the eye for the first night to reduce bruising and swelling placed. The nurses will advise you about this. The nose may ooze blood-stained fluid overnight after surgery.

You will have a short course of antibiotic tablets and some eye drops to use following surgery. The nurse will advise you on this.

Following surgery you should avoid hot drinks for 12 hours.

If you would like more information, please contact our nurse practitioners during office hours on:

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