

Vitreous Hemorrhage

Vitreous hemorrhage, or bleeding, results in a sudden change in vision as it blocks light moving through the vitreous to the retina. This hemorrhage specifically occurs in front of the retina in the posterior section of the eye. The vitreous hemorrhage may be the result of an aneurysm of a blood vessel in the eye, trauma to the eye, a retinal tear, a retinal detachment, a new blood vessel (neo-vascularization), or as a result of another underlying disease state.

The vitreous is normally a clear, jelly-like fluid that fills the inside of the eye. Various disease states can cause the vitreous to fill with blood so that light entering the eye will not reach the retina properly.

Other disease states that can affect the vitreous include diabetes, hypertension, sickle cell anemia, and carotid artery disease. Diabetics are particularly susceptible because the disease triggers the growth of new blood vessels within the eye. When someone has diabetes, the vessels can become weak and bleed easily. This is why blindness is a concern for patients suffering from diabetes. Vitreous hemorrhage occurs more frequently in patients over 50, but can occur at any age.

Someone experiencing a vitreous hemorrhage may experience the following symptoms:

- Sudden onset of blurry vision
- Light flashes
- Floaters (spots that seem to float across the field of vision)
- Blindness

Initial treatment may be observation alone. Minor hemorrhages often clot and resolve on their own over time. Unfortunately, it may take months for full visual recovery from a vitreous hemorrhage.

Current research has produced drugs that can dissolve the vitreous gel inside the eye and may dramatically reduce the recovery time.

For more severe and debilitating vitreous hemorrhage, a vitrectomy may be performed. A vitrectomy is a surgical procedure that removes the vitreous gel and the blood from inside the eye. (For more information on this procedure, please see our web page on Vitrectomy)