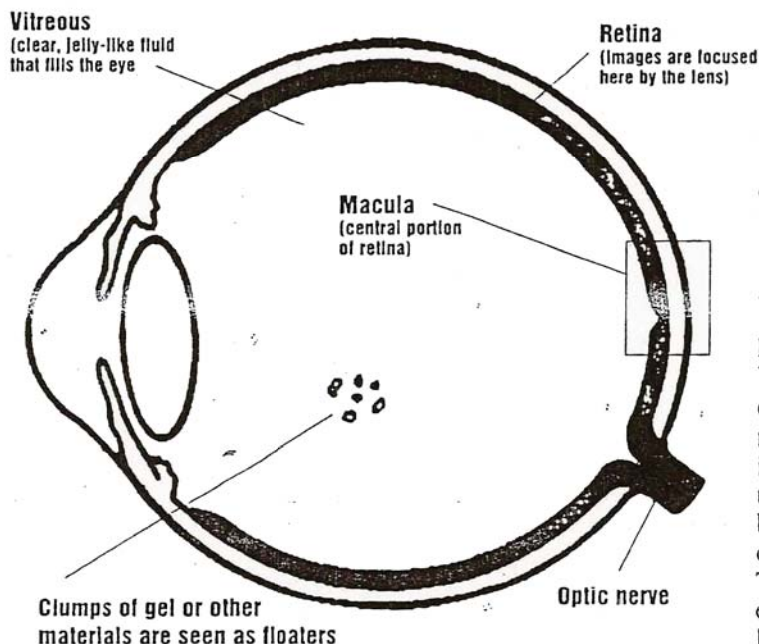


Floaters and Flashes

—Cause for Alarm?



Almost everyone has experienced spots or “floaters” in front of their eyes. The Romans described floaters as *muscae volitantes* (Latin for “flying flies”). Medical books still use this name today.

Most floaters are normal. But certain kinds of floaters — sometimes accompanied by flashes of light — may signal a problem that requires attention by an ophthalmologist.

In this interview, Dr. Civerchia explains why we have floaters and when to take them as a warning.

Q. What causes floaters?

A. Although floaters may appear to be in front of the eye, they actually come from small clumps of material located in the clear, jelly-like fluid that fills the inside of the eye. (This jelly-like fluid is called the *vitreous*.)

These small clumps of material cast shadows on the retina, and these shadows are perceived as floaters. [See illustration.]

Q. What does the shape of a person's floaters mean?

A. There is no significance to the shape. Floaters can look like small specks or like “bugs,” or can be long and stringy. The shape doesn't matter in any way.

Q. What can be done about floaters? Can they be removed?

A. Floaters cannot be removed. If they are interfering with your vision or if you find them annoying, try moving your gaze around. This will cause the vitreous fluid to swirl, allowing the floaters to move out of your line of sight.

also occur when a person receives a blow to the head or experiences a sudden head movement from a fall.

For about one person in six, vitreous separation will be forceful enough to create a hole, or tear, in the retina. When this occurs, numerous clumps of gel may form, or red blood cells may discharge into the vitreous. Either of these occurrences will usually be perceived as a sudden onset of numerous floaters. The person may also experience sudden flashes of light.

A retinal tear does not in itself cause a loss of vision, but the condition is potentially dangerous. This is because fluid can seep in through the hole, pushing the retina away from the back wall of the eye and causing the retina to detach. A detached retina may lead to permanent visual loss.

Q. If I experience many new floaters, or if I experience flashes of light, should I see an ophthalmologist?

A. Yes. An ophthalmologist should be consulted as soon as possible to determine whether a vitreous separation has occurred — and if so, whether there are any potential retinal problems.

If there are retinal problems, prompt treatment can result in good vision. But a delay in treatment may lead to permanent visual loss.

Q. Does a sudden onset of floaters always mean a retinal tear or detachment?

A. No, but the only way to know is to have a medical examination of your eyes.

Sometimes floaters will drift out of your line of sight by themselves. Then you won't be aware of them at all. In general, you're more likely to notice floaters when looking at a pale sky or other pale background such as a blank wall.

Q. Do floaters mean something is wrong with my eyes?

A. Sometimes they do and sometimes they don't. Let me explain.

Some floaters are caused by remnants of blood vessels that permeated the vitreous before birth. The blood vessel remnants throw shadows on the retina, causing the experience of floaters. These “congenital” floaters are entirely normal; everyone has them whether they notice it or not.

Floaters can also occur when the vitreous separates or pulls away from the retina. When this happens, small harmless clumps of gel are formed in the eye, and these are perceived as floaters. This “vitreous separation” occurs in many people as a natural result of the aging process. But it can