

Patient information

Blocked Tear Duct in Children Ritleng Tube Intubation

This procedure is used for unblocking the nasolacrimal (tear) duct in children. Most children have already undergone syringe and probing of the duct, which has not led to adequate improvement in symptoms.

A very fine wire is passed down one or both tear ducts, before introducing a silicone stent (Ritleng tube) into the nose. The stent is left in place for approximately 6 weeks to keep the tear ducts open.

Before the operation

The operation involves the use of general anaesthetic, which means that your child will not be conscious during surgery.

Ritleng tube intubation is usually performed in the morning as a day case procedure.

On the day of surgery, no food or drink should be given after midnight. A glass of still water (not fizzy and with no juice or squash added) may be given up until 6.00am.

After the operation

When your child is fully awake, he/she will be encouraged to eat and drink before being discharged from the ward. This is usually 3 or 4 hours after the operation has finished. Children usually feel very little discomfort following the procedure. It is common to see some blood-stained tears and a small amount of discharge from the nose for several hours after surgery.

The silicone stent is not usually noticeable, but you may be able to see it running across the inner corner of the eye(s) if you look closely. You should encourage your child to leave it alone and not to rub the eye as far as possible.

You will be given eye drops to use for 2 weeks following surgery. A follow-up

appointment is usually arranged in the first fortnight following the operation.

The stent is usually removed 6 weeks after the operation. In some children, this can be done in clinic using eye drops only. For other children, the stent is best removed under a quick general anaesthetic. You will have the opportunity to discuss this with a doctor before a decision is made.

What are the potential risks of surgery?

Ritleng tube intubation is a safe procedure. Occasionally nose bleeds can occur following surgery. It is also possible to experience problems with the stent (Ritleng tube), which can come forwards slightly to form a loop across the front of the eye. If this happens, you should contact the Eye Treatment Centre, although in most cases the loop does not cause any problems.

In some cases, Ritleng tubes do not resolve the problems of watering and/or a sticky eye. In this situation the Ophthalmologist will discuss the options with you.

Eye Treatment Centre

Telephone on **01284 713933**

Monday-Thursday 8.00am-8.00pm Friday 8.00am-5.00pm

For Emergencies at the weekend and out of hours:

Telephone 01284 713000 and ask to speak to the 'on call' Ophthalmic Doctor.

Clinical research

West Suffolk NHS Foundation Trust is actively involved in clinical research. Your doctor, clinical team or the research and development department may contact you regarding specific clinical research studies that you might be interested in participating in. If you do not wish to be contacted for these purposes, please email info.gov@wsh.nsh.uk. This will in no way affect the care or treatment you receive.

Accessibility

If you require this leaflet in a different format, please contact the patient advice and liaison service on 01284 712555 or email PALS@wsh.nhs.uk

If you would like any information regarding access to our Trust services and facilities, please visit the website for Accessible: <https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>



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