Floaters

A clear jelly-like substance called the vitreous humour (or gel) fills the inside of the eye. It allows light to reach the retina (and macula) at the back of the eye. With age the gel changes and becomes more watery. When this happens bits, called floaters, can break loose. They can be seen as specks, flecks, cobwebs or flashing lights that drift around in your field of vision.

Floaters are most noticeable when looking at plain backgrounds, such as the sky, white walls or computer screens. You won’t see the floaters, but will see shadows they cast on the retina. They never seem to stay still, as they move when your eye moves.

Not everyone who develops floaters will notice any symptoms. The brain adapts to changes in vision and often ignores floaters. If you notice a floater in your direct field of vision, moving your eye may help move it. Most people who develop floaters will notice something, although they tend not to permanently affect vision. Floaters aren’t usually a sign of anything serious.

There is no link between floaters and macular disease. Macular disease affects the tissues lying under the retina, while floaters occur when there is damage within the eye. It is impossible to predict or prevent floaters. Floaters may occur due to inflammation in the eye (Uvietis); eye infection; short-sightedness (myopia); cataract surgery; or diabetes.

The symptoms of floaters are similar to serious conditions such as a detached retina which is sight-threatening. The sudden appearance of floaters could mean that the vitreous gel is pulling on the retina which could cause a retinal tear and lead to
a detached retina. If aqueous fluid fills the hole left by the tear, sight can also blur. A retinal tear or detachment requires immediate medical attention.

Floaters may also indicate posterior vitreous detachment (PVD), which is more common than retinal detachment, but not as serious.

For most people floaters fade over a few months and become less troublesome. However, in some patients floaters persist, obscuring central vision and causing difficulties with activities such as reading or driving. Floaters can be removed with an operation called a vitrectomy, which removes the vitreous gel.

You should seek help from your ophthalmologist promptly if:
- If you’ve never had floaters or flashing lights before – the sudden appearance of them.
- You experience floaters already and they increase or change.
- Sudden change in, or loss of, vision – or if a dark shadow or curtain appears in your vision.
- More flashing lights than usual.

The best way to identify floaters and their causes is to have an eye test at least every two years. If you experience floaters, let your optometrist know. Also tell them how long you have had them, and whether you’ve had eye surgery or an eye injury.