

Flashes and Floaters

If you have difficulty reading this leaflet, please ask us to send you a copy in a larger print size.

If your first language is not English, we can arrange for an interpreter to be available. Please let us know in advance if you require this service.

What are Flashes?

Having flashes in the eye, often at the edges of vision, is fairly common. Each flash, which can vary from a bright light to almost a sparkle, can last varying lengths of time. You may have experienced this sensation if you have ever been hit in the eye and seen “stars”. The symptoms can be more noticeable when going from a light to a dark room.

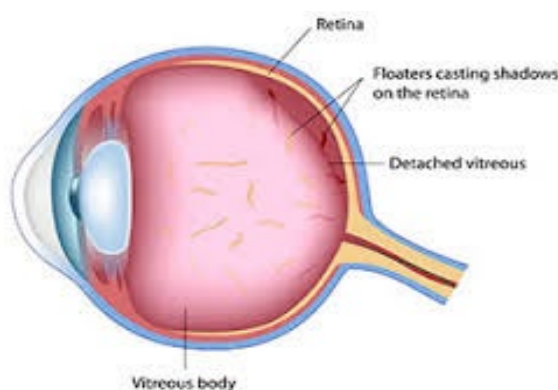
What causes Flashes?

Flashes are most commonly due to changes in the vitreous humour. The vitreous humour is the jelly-like substance which fills the inside of the eye, between the lens and the retina. As we age, the vitreous tends to pull away from the retina, which is referred to as posterior vitreous detachment (PVD). This condition is harmless in itself and happens to most people as they get older.

Flashes, on their own, do not always mean there is an urgent problem. However, if the flashes are new to you, or you are also experiencing other visual symptoms at the same time, such as dark floaters or patterns or shapes in your vision, you should seek a same-day appointment with an optician or your GP to see if the retina at the back of the eye has a tear or retinal detachment. Alternatively, you are advised to go to the nearest Accident & Emergency department.

What are Floaters?

You may sometimes see small specks or clouds moving in your field of vision. They are called floaters. You can often see them when looking at a plain background, like a blank wall or blue sky. Floaters are actually tiny clumps of gel or cells inside the vitreous, the clear jelly-like fluid that fills the inside of your eye. While these objects look like they are in front of your eye, they are actually floating inside. What you see are the shadows they cast on the retina, the nerve layer at the back of the eye that senses light and allows you to see. Floaters can have different shapes: little dots, circles, lines, clouds or cobwebs.



What causes Floaters?

When people reach middle age, the vitreous gel may start to thicken or shrink, forming clumps or strands inside the eye. The vitreous gel pulls away from the back wall (retina) of the eye, causing a Posterior Vitreous Detachment (PVD). It is a common cause of floaters.

Posterior Vitreous Detachment is more common for people who:

- Are short-sighted
- Have undergone cataract operations
- Have had YAG laser surgery to the eye
- Have had inflammation inside the eye

The appearance of floaters may be alarming, especially if they develop suddenly. You should see your doctor or optician right away if you suddenly develop new floaters.

Are floaters ever serious?

The retina can tear if the shrinking vitreous gel pulls away from the wall (retina) of the eye. This sometimes causes bleeding in the eye that may appear as new floaters.

A torn retina is always a serious problem, since it can lead to a retinal detachment. You should see your doctor or optician as soon as possible if:

- Even one new floater appears suddenly or if there is a “shower” of black spots
- You see sudden flashes of light
- You notice other symptoms, like the loss of side vision or dark shadow across your field of vision which is constant.

What can be done about floaters?

Floaters can get in the way of clear vision, which may be quite annoying, especially if you are trying to read. You can try moving your eyes, looking up and then down to move floaters out of the way. While some floaters may remain in your vision, many of them will fade over time and become less bothersome. **Even if you have had some floaters for years, you should have an eye examination immediately if you notice new floaters.**

It is technically possible to remove floaters, either with a laser treatment called YAG vitreolysis (not available on the NHS at the time of writing) or by surgical removal of the vitreous (a vitrectomy). This surgery is done by retinal surgeons after careful assessment of the individual patient.

What will happen if the retina tears?

The retina is the light-sensitive layer at the back of your eye which receives images and sends them to your brain. If the retina tears, it may come away from the back of the eye and can lead to a retinal detachment which can result in you losing part or all of your vision.

How is retinal detachment treated?

A tear may be treated by using a laser. If treated quickly you may have a better chance of full recovery. However, if your retina has become detached, you will need surgery. The operation may restore most of your vision but may come too late for a full recovery.

Migraine

Some people experience flashes of light that appear as jagged lines or “heat waves” in both eyes, often lasting 10-20 minutes (but can last up to an hour). These types of flashes are usually caused by spasm of blood vessels in the brain, which is called migraine.

If a headache follows the flashes, it is called a migraine headache. However, jagged lines or “heat waves” can occur without a headache. In this case, the light flashes are called ophthalmic migraine, or migraine without headache.

How are your eyes examined?

Your doctor or your optician may refer you to an ophthalmologist at the Eye Department. Your pupils will be dilated with eye drops. During this painless examination, your ophthalmologist will carefully observe your retina and vitreous. Because your eyes have been dilated, you may need to make arrangements for someone to drive you home afterwards.

Contact information

If you experience **new flashes in your vision**, or if you are having other visual symptoms at the same time, such as **dark floaters or patterns or shapes in your vision**, you should seek a same-day appointment with an optician or your GP to see if the retina at the back of the eye has a tear or retinal detachment. Alternatively, you are advised to go to the nearest Accident & Emergency department.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments please contact the Patient Experience Team – on 0300 131 4731 or by email at: esh-tr.patientexperience@nhs.net

Hand hygiene

The trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4434 Email: esh-tr.accessibleinformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Sources of Information

Understanding Retinal Detachment. RNIB and the Royal College of Ophthalmologists. 2020. [Understanding - Retinal Detachment | RNIB](#)

NICE clinical knowledge summary on Retinal Detachment. 2019. [Retinal detachment | Health topics A to Z | CKS | NICE](#)

Association of Optometrists. 2016. *Flashes and Floaters*. www.aop.org.uk/patients

Lowth, M. 2015. *Flashes, Floaters and Haloes*. Patient info. www.patient.info/health/flashes-floaters-and-haloes-leaflet

Reference

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