



## Cornea Transplant Rejection

### \*\*\* Important – Do Not Throw Away \*\*\*

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One of the most important concerns regarding your transplant is to know whether or not you are having a rejection. It is necessary to be able to tell whether or not your body is rejecting its new cornea. So how can you tell?

When can it happen? Most transplant rejections occur in the first six to 12 months, but may occur many years later. Often rejections occur when the patient has had the flu, or a recent flu immunization (see note \*). **DO NOT** let this keep you from having your flu vaccination. Infections, blood transfusions, or any other factors that can stimulate your immune system, may also cause your body to reject the graft. **DO NOT** let this keep you from obtaining any necessary medical treatment.

What do I look for? It is helpful to monitor your eye for certain signs and symptoms. Think of **RSVP**.

**R**edness – graft rejection may be associated with a red eye

**S**ensitivity – to light, any increase from your baseline

**V**ision – decrease in vision, especially if foggy or cloudy

**P**ain – discomfort, irritation or foreign body sensation

Many of these signs and symptoms are common after surgery. They are short term and should only improve. If they recur, however, that **should prompt an immediate call to our office**. Graft rejection episodes are usually reversible and prompt treatment can help ensure that you keep your graft as long as possible.

\* Flu vaccinations should be treated in the following manner:

Resume prednisolone acetate (Pred Forte) 4 times a day in the grafted eye for 2 days before and 2 weeks following the vaccination.

If you have a history of a viral or other infectious eye disease that prompted your initial transplant, please call prior to your shot.

**Should you have any questions about this information or your corneal graft, please call our office at (614) 863-3937.**