

Information for Patients

Monocular Vision

You may only have one eye to see with (called monocular vision) because you have had one eye removed, suffered a sudden loss of vision or because one eye has to remain covered. To start with you can expect to have difficulty in judging how far away something is, for example a cup when you reach for it. You can expect to have similar difficulty when you try to put something down, for example replacing the cup in the saucer.

With practise things will get better. As the months go by, you can increasingly expect to be able to judge distances better. As you can only see with one eye you will have a 'blind side'. You will eventually get used to turning your head so that you can see everything in front of you; this will become automatic.

Driving is not advised for the first few months while you get used to seeing with one eye. If you have sight in only one eye you can hold an ordinary driving licence; however, you will need to inform the DVLA and your insurance company.

If you have recently lost the sight in one eye, either temporarily because of a dressing, or permanently, you may find these ideas useful whilst you are adjusting.

- When putting a drink down, place the other hand on the table or surface then place the drink next to it.
- It can be difficult to judge the last step on the staircase. Move cautiously, feel ahead with your foot and keep a hand on the banister.
- When going for a meal, make sure that your friend or partner sits on your seeing side. Also, be aware that the waiter may approach you from your blind side.
- You will find it useful, when crossing the road, to stop at the kerb and to gauge its depth before crossing.

- Always wear protective glasses at work or when gardening or doing repairs or DIY work around the house, in order to protect your good eye. Plastic lenses are the safest.

Always protect your seeing eye.

