SYMPTOM

Eye floaters

Eye floaters are small shapes that drift across your field of vision.

WHAT IT FEELS LIKE
Specks or threads drifting across my vision

WHERE IT IS FELT
In the field of vision, often one eye

MOST COMMON CAUSES
Age-related vitreous changes, posterior vitreous detachment, nearsightedness

WHEN IT IS URGENT
Sudden new floaters, flashes, a curtain, or vision loss

USUALLY LASTS
Often persistent but less noticeable over weeks or months

SEE A DOCTOR IF
Floaters are new, increasing, persistent, or interfering with vision

Overview

Eye floaters are small dots, lines, rings, or cobweb-like shapes that seem to move through your vision. They are especially noticeable when you look at a bright, plain background, such as a white wall or clear sky.

Floaters usually come from the vitreous, the clear, jelly-like material filling the inside of the eye. Tiny fibres or clumps within this gel cast shadows on the light-sensitive retina at the back of the eye. You see these shadows as floaters.

Many floaters are related to normal changes inside the eye and are not harmful. However, a sudden onset of floaters can sometimes mean that the retina has torn or started to detach. This needs a same-day eye examination.

What it may feel or look like

Floaters may look like:

They move when your eyes move and may continue drifting after your eyes stop. They often seem to move away when you try to look directly at them.

Floaters are within your field of vision rather than on the surface of your eye. Blinking, rubbing your eye, or using lubricating eye drops will not usually remove them.

Flashes are different. They may look like brief sparks, lightning streaks, or camera flashes near the side of your vision. New floaters and flashes can occur together when the vitreous pulls on the retina.

- Black or grey dots
- Fine threads, hairs, or squiggly lines
- Rings, circles, or cobwebs
- Small clouds or clusters of spots

Common causes

Age-related vitreous changes are a frequent cause. Over time, the gel inside the eye becomes more liquid and develops small clumps or strands. Their shadows become visible as floaters.

Posterior vitreous detachment happens when the vitreous gel separates from the retina. This becomes more likely with age and can cause a sudden ring, cobweb, or group of floaters. It is often uncomplicated, but the pulling can occasionally tear the retina.

Nearsightedness can make vitreous changes occur earlier. Nearsightedness means distant objects look blurred because of the shape of the eye.

Less common causes include inflammation inside the eye, bleeding into the vitreous, previous eye surgery, or an eye injury. Bleeding may be linked to abnormal or damaged retinal blood vessels, including those caused by diabetic eye disease.

A retinal tear or retinal detachment is a more urgent cause. A tear is a break in the retina. A detachment happens when the retina lifts away from the tissue supporting it. Prompt treatment can help protect vision.

When to seek medical care

Arrange a same-day assessment by an optometrist or ophthalmologist if you develop:

An ophthalmologist is a doctor who specialises in eye conditions and surgery. If same-day eye care is unavailable, go to an emergency department. Sudden major vision loss or a serious eye injury requires immediate emergency care.

Book a routine appointment if your floaters appeared gradually, are becoming more noticeable,

or interfere with reading, driving, or work. Longstanding, unchanged floaters without flashes or vision loss are less likely to be urgent, but you can still discuss them at a regular eye examination.

Eye pain or redness is not typical of simple age-related floaters. Seek prompt advice if either occurs, particularly with light sensitivity or reduced vision.

- A sudden first episode or sudden increase in floaters
- Floaters with new flashes of light
- A dark curtain, shadow, or veil across your vision
- Missing, blurred, or reduced vision
- New floaters after an eye injury or eye operation

How the cause is found

The eye professional will ask when the floaters began, whether they came on suddenly, and whether you have flashes, shadows, pain, or vision changes. They may also ask about nearsightedness, diabetes, previous eye surgery, injury, and past retinal problems.

Your vision and pupils will be checked. Dilating drops are usually used to widen the pupils so the retina and vitreous can be examined. The drops can cause temporary blurred vision and sensitivity to light. You may need sunglasses and help getting home if your vision is affected.

If blood or another problem blocks the view of the retina, an ultrasound scan of the eye may be needed. Sometimes no retinal tear is seen at the first examination, so follow-up may be advised if symptoms continue or change.

Treatment and self-care

Age-related floaters and an uncomplicated posterior vitreous detachment often need no treatment. They may remain present, but your brain can gradually become less aware of them. The floaters may also settle away from the centre of your vision.

You cannot safely dissolve or remove floaters yourself. Moving your eyes may shift one temporarily, but this does not treat its cause. Adjusting screen brightness or using softer indoor lighting may make floaters less noticeable against bright backgrounds.

Procedures to treat floaters are generally considered only when persistent floaters seriously disrupt vision. Vitrectomy removes the vitreous gel through eye surgery. Laser treatment may

break up selected floaters. Both have limitations and possible complications, so an eye specialist must weigh the expected benefit against the risks.

Treatment is different when another condition is responsible. A retinal tear may be sealed with laser treatment or freezing therapy. A retinal detachment usually needs surgery. Bleeding, inflammation, or infection requires treatment directed at its underlying cause.

What to expect

Some floaters become less noticeable within weeks or months, although they may not disappear completely. Stable floaters can remain visible for years without damaging the eye.

Symptoms from posterior vitreous detachment can change as the gel continues to separate. Follow any examination or follow-up plan you are given. Seek another urgent assessment if you develop additional floaters, flashes, a curtain-like shadow, or reduced vision, even if a previous examination was reassuring.

Floaters themselves do not usually cause blindness. The concern is whether a new floater is a sign of a retinal tear, bleeding, or another eye condition.

Common questions

Can screen use cause floaters?

Screens can make existing floaters easier to see against a bright background, but ordinary screen use does not usually create vitreous floaters.

Are floaters the same as migraine symptoms?

No. Migraine visual symptoms often involve shimmering lines, zigzags, or a spreading blind spot. They may affect the view through both eyes and usually change over several minutes. True floaters drift with eye movement and often remain visible over longer periods. New or unusual visual symptoms still need medical assessment.

Can young people have floaters?

Yes. Floaters can occur at any age. Nearsightedness, eye inflammation, injury, surgery, and other eye conditions can make them more likely in younger people.

Should I avoid exercise?

Routine activity does not usually need to stop because of longstanding, stable floaters. If floaters began suddenly, followed an injury or operation, or are being monitored for a retinal problem, ask the eye professional who examined you about temporary activity limits.

Sources

- National Eye Institute. "Floaters."
- American Academy of Ophthalmology. "What Are Floaters and Flashes?"
- American Society of Retina Specialists. "Posterior Vitreous Detachment." Retina Health Series.
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