

CATARACT SURGERY

What is a cataract?

The lens in the eye (also known as the crystalline lens) focuses light on to the retina to produce a clear image. As we get older the lens becomes hazier and this blurs our vision to do our normal activities such as reading, driving or watching the TV.

What are the symptoms of cataract?

- Blurred vision
- Difficulty reading fine print
- Frequent changes required to your spectacle prescription
- Glare especially at night-time

What causes cataracts?

- Ageing
- Injury to the eye
- Surgery to the eye
- Diseases such as diabetes, inflammation to the eye
- Born with it (congenital)

When should a cataract be removed?

No treatment may be required in the early stages if there are no symptoms. However, if the symptoms affect your normal activities, an operation to remove the cataract and replace it with an artificial lens implant is recommended. This will allow more light to pass through to the back of the eye again.

How is the cataract removed?

Cataract surgery is usually performed using local anaesthetic. A tiny self-sealing incision is made on the surface of the eye. The cataract is removed by a technique called phacoemulsification where ultrasound is used to break the cataract into smaller pieces and then removed. An artificial lens implant is then placed into the eye in place where the previous cataract was.

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Are there any risks?

Cataract surgery is successful in a majority of cases. However, as with any other operation small risks do exist.

The most significant risks are:

- Infection
- Bleeding
- Retinal detachment
- Complete loss of vision (1 in 1000)

Complicated cataract surgery:

One of the other risks of cataract surgery is that the cataract may fall further into the back of the eye during surgery. As the cataract is held by a thin bag, this can easily break in about 2% of cases throughout the nation. This event is called posterior capsule rupture. If this occurs, further surgery would be necessary to correct this complication through a vitreoretinal surgeon.

What is the after-care following surgery?

Immediately after your operation:

You should only be in hospital for the day, or possibly overnight. Following your operation you will be discharged home using drops of Maxitrol which you should instill four times a day for four weeks. Other treatments are occasionally needed and will be prescribed if appropriate

Sometimes the eye is a little bit “scratchy” after the operation due to the tiny incision on the surface of the eye, but it should not be painful. Provided the eye does not become excessively painful you should continue your drops and return for review as arranged. You may take paracetamol, one or two tablets up to four times a day, if your eye aches during this time.

There will be a clear eye shield that should be used for at least two weeks after the surgery to protect your eyes from any accidental knocks during sleeping. Do make sure you do not get any shampoo or tap water into your eyes during the first two weeks.

Post-operative follow-up:

A follow up visit in 4 weeks is planned after the surgery to check that the eye is healing normally. If the eye has recovered well, you can visit your local optician for any reading or distance glasses if required.

At any point during the recovery period, do get in touch if the eye becomes increasingly red or painful or if the vision deteriorates suddenly.