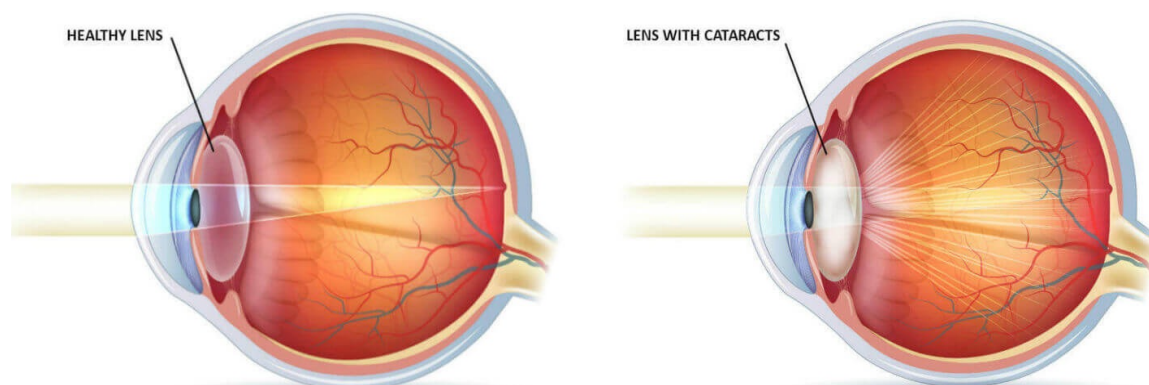


Cataract



What is a Cataract?

The lens of the eye is normally clear and transparent. It focuses light rays on to the retina producing a sharp image of what we see. When a cloudy area develops in the lens or the lens becomes opaque, the amount of light entering the eye is reduced and the light rays are scattered so the image we see becomes blurred.

This clouding of the lens is called a **cataract**. It is **not** a film on the surface of the eye that grows across the cornea on the outside of the eye.



What causes cataracts?

Cataract occurs as a normal part of ageing as a result of an alteration of the protein structure within the lens.

It can also occur as a result of an eye injury, certain diseases, long term use of corticosteroid medications or excessive exposure to ultraviolet light. Although it is predominantly caused by ageing, if there is a family history of cataract, it may occur at a younger age.

In the early stages, symptoms might include glare with slight blurring. Sometimes this only requires a change of spectacles to help improve your vision for a while. The time that it takes for a cataract to develop fully is variable unpredictable. Eventually the vision becomes quite hazy and foggy and colours become duller. When your sight is disturbing you or affecting your lifestyle it is time to consider cataract surgery.

How are cataracts treated?

Cataract can only be treated with surgery. There are no medications, eyedrops, exercises or glasses that can prevent or reverse cataract formation.

The surgery involves removing the cloudy lens through a small incision and replacing it with a permanently implanted artificial lens or intraocular lens (IOL).

Before surgery

Your ophthalmologist will take a full medical history of any health problems you may have.

You must provide a list of all medications you are taking including aspirin and blood thinners and disclose any allergies you may have.

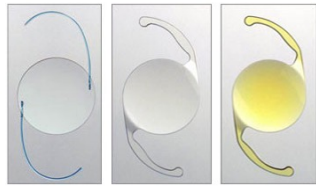
You will have measurements taken of the length and curvature of your eye to determine the power of the IOL to be implanted which will give you the best vision.

A full examination of your eye will be done to make sure there are no other problems that could also be contributing to your reduced vision.

Intraocular lens (IOL)

The IOL that is implanted into your eye is made of a foldable acrylic plastic which is perfectly safe and will not wear out and will last for a lifetime. It is injected into your eye through a tiny 2.4mm incision and positioned into the natural capsular bag of your original lens.

There are many different types of IOL to suit different needs of individual patients. Toric IOLs can be selected to correct astigmatism. Multifocal IOLs are available and may be suitable for certain patients and can allow for both near and distance vision.



Surgical Techniques

Cataract surgery is the most commonly performed eye operation and one of the most commonly performed operations in the world. As a result of this it has become streamlined and has a very high success rate and is relatively risk free. The most common technique is phacoemulsification.

Phacoemulsification

The operation is performed under local anaesthetic and light sedation to reduce anxiety, so the patient feels minimal or no discomfort and doesn't see anything happening. Under an operating microscope, the surgeon makes a tiny 2.4 mm incision at the edge of the cornea. A small probe which vibrates at very high frequencies is inserted into the capsular bag and divides the cataract into small pieces which are then gently sucked out of the eye through the probe.

The IOL is then injected into the eye. As the incision is so small it seals itself and usually requires no stitches. The operation usually takes about 25 minutes.

The eye is padded overnight with a plastic shield for protection.

The patient returns to Hurstville Eye Surgery the following morning where the dressing is removed and reviewed by the surgeon who will go through the post operative instructions with you.



Laser-assisted Cataract Surgery

In this technique, the surgery is performed in 2 stages. In another room, just before cataract surgery, a computer guided system is attached to the eye and the incisions into the eye and lens capsule are made with a laser. The patient is then taken to the operating theatre where the cataract is then removed by routine phacoemulsification techniques.

This method usually requires **extra out-of pocket costs** and **so far has not been shown to have any advantages over the standard proven operation.**

The Day Before Surgery

Ring **National Day Surgery-Sydney**, where you will have your operation, on **8566 0111** to find what time to report to the Hospital. If your operation is on a Monday (or Tuesday after a long weekend) call on the Friday before.

Day of Surgery

In general, you should fast for 2 or 3 hours before surgery. If you are admitted very early in the morning you may be asked to skip breakfast depending on the time of your surgery.

You will remain in your normal clothes for the surgery, so wear loose-fitting comfortable clothes. You should take your normal medications with a mouthful of water on the morning of surgery.

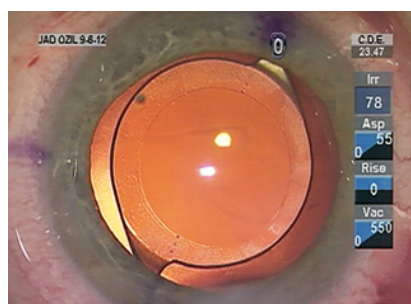
If you take Warfarin or Aspirin, these don't normally need to be stopped but the INR for Warfarin should not be higher than 2.5 at the time of surgery. Check with your GP if necessary.

On arrival at National Day Surgery-Sydney, eyedrops will be put into your eye to enlarge the pupil. There may be several drops used. The **anaesthetist** will anaesthetise your eye to make it numb. You will be unaware of this being done.

The skin around your eye will be thoroughly cleansed and light sterile coverings will be placed around your head. You will be awake during the operation but you will not feel anything or see anything other than perhaps some light.

You must keep still during the operation which takes about 25 minutes. If you have to move or cough, please warn your surgeon before doing so.

At the end of the operation an eye pad and plastic shield are taped over the eye. you will be taken to Recovery where you will be given something to eat and a cup of tea or coffee. You will rest for about an hour and then you can go home. It is imperative that you have someone to accompany you home.



After the Surgery

The following morning after the operation you will be seen in the rooms at **Hurstville Eye Surgery**, 33 MacMahon Street Hurstville, where the dressing will be removed and the eye checked by your surgeon.

- * You can resume normal activities except for strenuous exercise.
- * You can bend down, take a bath, shower and wash your hair.
- * It is important not to rub or press on the eye.
- * You must use the eyedrops as directed by your surgeon. Wash your hands before doing so.
- * Ask your doctor when you can begin driving.
- * In general do not resume sporting activities for 1-2 weeks after surgery. Ask your surgeon.
- * It is not unusual for the eye to feel gritty, like sand in the eye, for a short while as the wound heals.

Possible Complications of Cataract Surgery

The success rate of cataract surgery is excellent. More than 98% of patients achieve improved vision. There is an overall incidence of complications of about 1% of which 1 in 500 may be severe.

As with any operation, however, there are some risks. Remember that they are usually rare and unlikely to occur. **This list is to inform you and not to frighten you.**

- * Infection
- * Bleeding in the eye
- * high pressure in the eye
- * Excessive inflammation
- * swelling the cornea or retina
- * retained piece of cataract
- * Retinal detachment
- * Extremely rarely, blindness in the operated eye

Pre-existing eye problems such as macular degeneration, glaucoma or diabetic retinopathy can limit vision after surgery. Even with these problems, cataract surgery can still be worthwhile. Discuss the risks and benefits with your ophthalmologist.

YAG Laser capsulotomy

Sometimes, several months or years after cataract surgery, the vision can become cloudy again. This is not due to the cataract returning but the natural lens capsule that remains in your eye behind the IOL can thicken and become foggy.

This can be fixed in a few minutes by making an opening in the cloudy lens capsule with a laser restoring normal vision. It is called a **posterior capsulotomy** and is an office procedure which is painless and does not need to be repeated again.