



Subspecialist Eye Associates

Cataract

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Cataracts are common and occur naturally as we get older. It forms when the lens inside our eye gradually changes with age and becomes less transparent or cloudy, much like how old glass gets cloudy. Over time, a cataract will get worse, gradually making your vision more blurred. A straightforward operation can usually remove the cloudy lens and replace it with an artificial lens to help you see clearly again.

What Causes a Cataract?

Cataracts can be caused by a number of things, but by far the most common cause is growing older. Apart from this, other common causes include:

- Diabetes
- Trauma (any significant impact to the eye or head)
- Certain medication (such as steroids)
- Eye surgery for other conditions
- Other possible causes include: UV exposure, smoking & a lack of vitamins

How Do I know if I Have a Cataract?

Usually a regular eye exam by your eye doctor is all that is needed to detect a cataract. Sometimes other eye tests may be used to provide your doctor with more details about your eyesight. Some common signs and symptoms of cataract include:

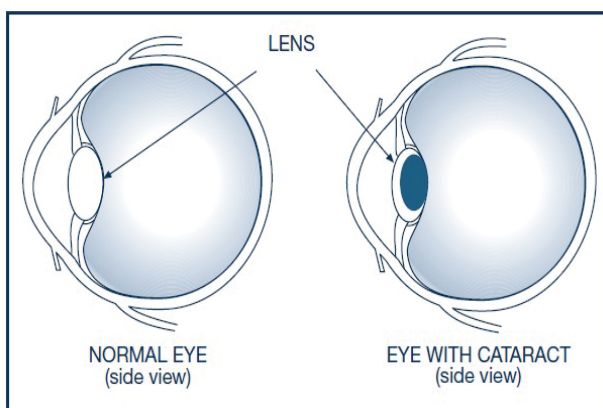
- Cloudy, fuzzy, foggy, or filmy vision
- Changes in the way you see colours
- Problems driving at night because headlights seem too bright
- Problems with glare from lights or from the sun
- Frequent changes in your eyeglass prescription
- Seeing double (even with 1 eye closed)
- Better near vision for a while (in far-sighted people)

How is a Cataract Treated?

Presently, the only way to treat a cataract is with surgery. This usually takes 10 to 20 minutes and involves two main steps.

Step 1: The surgeon uses a tiny ultrasonic probe to soften the lens and remove the cataract, leaving behind the lens capsule (the thin outer bag).

Step 2: A new, clear plastic lens is inserted into your eye immediately after Step 1. This artificial lens, called an intraocular lens (IOL), is usually placed within the lens capsule inside your eye. Your doctor will explain the selection of which IOL would suit your needs and wants the best.



What are the Complications?

No surgery is ever risk-free. Although serious complications are rare with modern cataract surgery, the very rare possibility of loss of vision should be considered before proceeding with surgery. If you have a cataract in both eyes, most surgeons would do one at a time, and wait for your first eye to heal before operating on the second eye, except in a few circumstances. If the eye that has a cataract is your only working eye, you and your doctor should weigh very carefully the risks and benefits of cataract surgery. Some of the risks of cataract surgery include the following:

- Glaucoma (high pressure in the eye; $\pm 5\%$)
- Bleeding inside the eye ($\pm 1\%$)
- Drooping eyelid ($\pm 1\%$)
- Swelling or clouding of the cornea ($\pm 1\%$)
- Less frequent risks: Artificial lens damage or dislocation ($\pm 1\%$), retinal detachment ($\pm 1\%$)
- Rare but severe risks: Severe infection ($\pm 0.1\%$), Blindness ($< 0.1\%$) & Loss of either eye ($< 0.01\%$)

Can a Cataract Return?

A cataract cannot return because all or part of the lens has been removed. In less than one-quarter of the people who have surgery, the lens capsule will become cloudy within two years after surgery. This is called Posterior Capsular Opacification (PCO) or 'after-cataract' by some. It causes the similar visual problems as a cataract. Your doctor may recommend a simple procedure to correct this problem.

What Should I Do Before Surgery?

Before you have your cataract surgery your general health, your vision and your eye will be checked very carefully. This is called biometry and is done by a machine which measures the length of your eye ball and the shape of your cornea (front of your eye). These tests help the ophthalmologist decide which lens to implant when they perform your operation to make sure your vision is as clear as possible after the surgery.

Immediately After the Operation

Your sight may not be as good as you expect for the first week after the operation, as the eye is still recovering from the surgery and will probably be a little swollen. Immediately after the surgery you will be given eye drops and it is very important to follow the instructions and to complete the course. Most people have some irritation or redness after the surgery but if your eye is very painful or your vision suddenly gets worse, you should let the hospital know as soon as possible as you may be required to be seen again.

Activities

After surgery, you can usually go back to your everyday activities as soon as you feel able. There are no dietary restrictions and you can read and watch TV as normal. In addition to taking eye drops, you may need to follow the following instructions for the first 1 to 2 weeks:

- DO NOT rub your eye. You may have to wear an eye shield (patch) when you are sleeping to avoid accidentally rubbing your eye.
- DO NOT go swimming (until your ophthalmologist says you can) to avoid contact with dirty water.
- DO NOT play contact sports, strain or lift heavy objects. Everyday lifting like light shopping is usually fine, but heavy lifting like moving furniture is best avoided.
- DO NOT wear eye makeup until the hospital are happy with your recovery.
- DO NOT wash your hair and get soapy water in your eyes for 2 weeks after surgery. Pamper yourself in this time and get a hairdresser to do it for you instead!

You also need to take extra care when it is windy or dusty outdoors, in case something blows in your eye, but you don't need to stay indoors. Wear a pair of wrap-around sunglasses for extra protection outdoors.

When Should I Have New Glasses?

The lens that is implanted in your eye is usually designed to give you clear distance vision without needing glasses. Sometimes this is not quite achieved and you will need a pair of distance glasses to fine tune the focus and get the best possible distance vision. Because the lens implant is not always able to provide in-focus near vision, many people will need to wear reading glasses after the operation and usually this will be a different pair than you had before the operation. In most cases an eye test called a refraction, will be done 4 to 6 weeks after the operation. This may be done by an optometrist in the hospital or you can see your own usual optometrist. If you had a multi-focal lens implanted, you may not require glasses as this can provide clear vision in the distance and up close most of the time.

What Should I Do if I Have a Problem?

Please contact your doctor if you have any problems or concerns. It is important to do so **URGENTLY** if you have any of the following:

- Severe pain after surgery
- Increasing redness, pain and blurring of the vision in the days or weeks after surgery
- Worsening vision – especially if you find that your vision initially improves after surgery, but then starts to decline.