

Your appointment

- Place:
- Date:
- Time:
- Eye to be operated upon: Right / Left

References

If you require a full list of references for this leaflet please email patient.information@ulh.nhs.uk

The Trust endeavours to ensure that the information given here is accurate and impartial.



If you require this information in another language, large print, audio (CD or tape) or braille, please email the Patient Information team at patient.information@ulh.nhs.uk

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Cataract Surgery

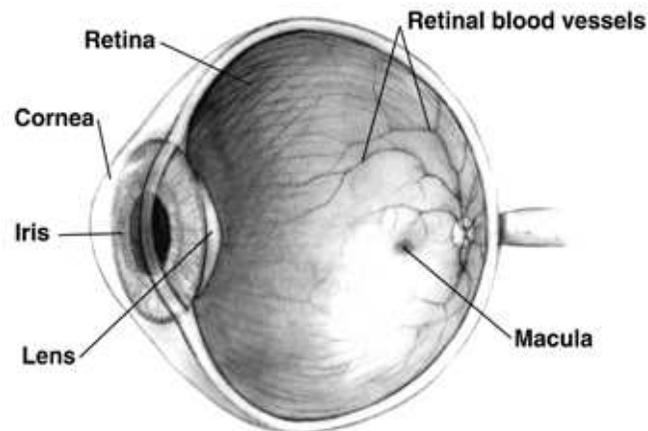
Ophthalmology Department
Lincoln County Hospital
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www.ulh.nhs.uk

Aim of the leaflet

The aim of this leaflet is to provide further information on cataract surgery. It provides advice for the condition and the treatment.

What is a cataract?

A cataract is clouding of the natural lens inside your eye. Most people over 70 have some lens clouding. Diabetes, injury or inflammation affecting the eye can cause cataract formation. Cataract affects your sight causing gradually increasing blurring, haziness and dazzling. Cataract does not cause redness, pain or watering. Once your eyesight is significantly affected by cataract, surgery can help.



- Your GP can supply a repeat prescription if the drops run out before 4 weeks.

Your eye should improve steadily over a few weeks

- At first you may feel a mild gritty sensation, your eye may be a little red and your vision will be blurred. This should all settle over a few weeks.
- You may take some ordinary pain-killers if necessary.

Leave 4 weeks after your operation before you see your Optometrist

- If you need cataract surgery for your other eye please ask your Optometrist or GP to write back to the Hospital.
- Once your eyes are fully settled after cataract surgery, you will probably need new lenses in your glasses.
- If you need a follow up appointment this will be posted to you.

Flying

It is safe to fly the day after your surgery. However, we strongly advise not arranging to fly so soon after your surgery in case you need to attend for a follow-up appointment.

Important advice to patients following cataract surgery

If you have problems with your eye, such as worsening vision, a lot of pain or redness, don't hesitate to telephone:

Lincoln County Hospital

Office hours: 01522 307180 then select option 4

Out of hours: Contact the on-call Ophthalmologist via switchboard on 01522 512512

You will soon be able to resume all your normal activities, but you should take a few precautions (listed below) in the first few weeks. You can drive after 2 days if your vision satisfies driving standards (your eye doctor or optometrist will have advised you before the operation).

Do not rub, press or poke your eye

- Keep the plastic shield on until the morning after the operation.
- Use the shield for the first 2 weeks when you sleep.
- During the day you do not need to cover your eye, but you can wear your normal glasses or sunglasses.

Keep your eye clean and dry

- If necessary clean gently around your eye with cooled boiled water and clean cotton wool.
- You should not swim for 4 weeks.

Use your eye-drops as directed

- Wash your hands thoroughly before putting your eye drops in.
- Usually you will be given drops to use 4 times daily for up to 4 weeks to prevent infection and inflammation.

How will removing the cataract affect my vision?

The goal of cataract surgery is to correct the decreased vision that was caused by the cataract. Before the operation your eye measurements will be taken in the clinic. During the surgery, the ophthalmologist (eye surgeon) removes the cataract (lens) usually with an ultrasonically powered needle and puts in a new artificial lens called an intraocular lens or IOL. The operation takes around 20 minutes. **It is not done by laser.** The eye is not removed from its socket.

Cataract surgery will not correct other causes of decreased vision, such as glaucoma, diabetes, or age-related macular degeneration. Most people still need to wear glasses or contact lens after cataract surgery for either near and/or distance.

Risks of cataract surgery

Although cataract surgery is performed as a day case with local anaesthetic, it is not a minor operation. Up to 1 in 10 operations do not improve vision, either due to other pre-existing eye conditions such as macular degeneration and glaucoma, or due to complications of surgery.

Risks and complications of surgery include:

Mild:

- Bruising of the eyelids due to the local anaesthesia
- Misshapen or larger pupil
- Possible allergic reaction to the eye drops postoperatively
- The upper lid may droop slightly

Moderate:

- Damage to the cornea or iris
- Tearing of the lens capsule and disturbance of the gel within the eye, resulting in displacement of the lens implant

- High pressure in the eye
- Inflammation of the eye postoperatively (especially if tiny lens fragments are remaining in the eye)
- 1 in 5 patients develop mild scarring of the thin membrane behind the lens implant (capsular opacification) months or years later which is treated by outpatient laser treatment
- Swelling of the back of the eye causing reduced vision (macular oedema)
- Lens implant problems such as displacement or wrong power
- Double vision

Severe and rare:

- Detachment or swelling of the retina
- Displacement of all or part of the cataract into the back of the eye requiring further surgery elsewhere
- Infection (endophthalmitis) – 1 in 700 risk
- Blind eye which may need to be removed – 1 In 1,000 risk
- Inflammation of both eyes (Sympathetic Ophthalmitis) potentially resulting in blindness – 1 in 40,000 risk

Risks of not having cataract surgery include:

- Gradual worsening of vision with time
- If you have very big cataracts:
 - It is more difficult to examine the back of your eye
 - The cataract surgery may be technically more difficult
 - Rarely, very ripe (hyper mature) cataracts may leak and set up inflammation and raise pressure within the eye

You must understand that you cannot be given a guarantee that a particular person will perform the procedure. The person will, however, have appropriate experience.

On the day of the operation

- Take your normal medication. With local anaesthetic, eat and drink normally.
- Wear comfortable, loose-fitting, washable clothes and avoid jewellery or make-up.
- Don't bring valuables as hospital staff cannot take responsibility for them.
- You will be in hospital for half a day. Ideally a relative or friend should accompany you on the Ophthalmic Day Unit.
- When you come to the Ophthalmic Day Unit, you will be checked by nursing and medical staff and given drops to open the pupil of your eye.
- During the operation you will be awake but you will have local anaesthetic to freeze your eye. You will be lying still on your back on a firm couch. A nurse will hold your hand. The surgeon will clean the skin around your eye and place a clean paper sheet over your face to prevent infection. The sheet will be kept clear of your mouth and nose so that you can breathe normally.
- You will see a bright light, but no details of the operation. You will feel some touch and pressure on your face around your eye, but you should not feel any pain.
- After the operation you will return to the Ophthalmic Day Unit. Your eye will be examined before you go home and the nurse will go through your post operative care.