

## **Cataract**

### **What is a cataract?**

It is where the lens of the eye becomes cloudy, so it is difficult to see through.

You may find:

- things look cloudy or blurred
- bright lights dazzle
- you may see double in the affected eye.

### **What is the lens?**

The lens is inside the eye directly behind the coloured part, which is called the iris.

Little muscles are attached to the lens. These move, and by slightly altering its shape they help you focus on what you want to see.

### **What causes cataracts?**

The most common cause is ageing, but occasionally they happen because of injury, or as a complication of other conditions.

Some symptoms:

- slight blurring of vision
- spectacles always seem to need cleaning
- seeing slightly double
- change of colour vision, becoming more yellow
- difficulty with glare and bright lights.

### **What can be done to help?**

In the early stages of cataract, spectacles may help you see clearly enough.

### **Will I need an operation?**

When your vision has become so poor that it seriously affects everyday life - such as driving, watching TV, or reading - then your optometrist will refer you to an eye specialist, called an ophthalmologist, in the hospital. The ophthalmologist will assess your eyes and help you decide about an operation.

### **What does the operation involve?**

It is often carried out under local anaesthetic, and usually as a day-case procedure (no overnight stay). The cloudy lens inside your eye is removed and replaced with a new, clear lens made of special plastic. Afterwards, your vision is usually much better, unless there are other reasons for your poor sight besides the cataract.

## **Should I have cataract surgery?**

Whether you decide to have cataract surgery will depend on many things. Just because you have a cataract doesn't mean you should have it removed immediately. And these days, you don't need to wait till a cataract is 'ripe' (well developed).

Your decision will probably depend on how much the cataract is affecting your daily life. So please read the following four questions because they will help you decide whether cataract surgery is right for you:

### **How well can you see?**

Generally, if you can see quite well, it's probably best not to have surgery yet. All cataract surgery carries a small risk, so it's better to wait until you really need it.

If you can answer 'yes' to most of the following points, then you may benefit from having surgery soon:

- Do you find it difficult to move around easily and safely, such as when crossing the road, using the stairs or getting on and off public transport?
- Does the glare from sunlight or car headlights bother you a lot?
- Are you finding it difficult to do everyday tasks, like cooking, dressing and housework?
- Does your eyesight prevent you doing your hobbies or sports, or things like watching TV and reading?
- Are you starting to find it difficult to cope with things like recognising people and handling money?

### **1. Can you see well enough to drive?**

Generally, the chance of your eyesight being improved by surgery is slightly lower if you can already see well enough to drive safely.

### **2. What does your optometrist think?**

Ask your optometrist for their advice. They can tell you about the risks of surgery and help you decide whether you want to have it.

### **3. How quickly will your cataract worsen?**

We can't say how quickly your cataract will develop and get worse. But even if your cataract is bad, this won't usually affect the result of the surgery.

### **NHS Choices Shared Decision Making**

To aid your decision whether to proceed with cataract surgery the NHS has created an online shared decision-making tool, this can be found at: <http://sdm.rightcare.nhs.uk/pda/cataracts/>

## If you decide to have surgery

If you decide to go ahead with surgery, you will need to return the Health Questionnaire form to your optometrist, if you have not been given a Health Questionnaire then contact your optometrist to see whether you need to book a sight test prior to referral.

## About your records

The provider keeps the records for these services on a computer. If you are referred to other health professionals, the details may be shared with them to ensure you get the best care.

## I want cataract surgery – what now?

Unless you have chosen to pay for private treatment, your optometrist will offer you a choice of where to have treatment. Currently, you can choose Stepping Hill, Macclesfield General, Withington, Optegra (Didsbury) or SpaMedica (Manchester) without giving reasons for your choice.

If you need to contact your chosen hospital, the contact numbers are listed below. You should hear from them within 4 weeks.

Stepping Hill	0161 419 4010
Macclesfield General	01625 663 333
Withington	0161 217 3299
Optegra	0161 240 0700
SpaMedica	0161 838 0870

You will be offered an appointment to see the eye specialist at the place you have chosen. They will assess whether the operation is suitable for you. If the eye specialist decides surgery can go ahead, you will be given a date for your operation.

## What happens in a cataract operation?

The operation takes about half an hour and is usually done under local anaesthetic – you'll be awake, but your eye will be numb so you won't feel any pain. Most patients don't need to stay in hospital overnight.

The surgeon will remove the affected lens from your eye and put in a plastic implant lens. This is done by making a small cut in the cornea – the front window of your eye, which normally seals itself afterwards.

## Are there any risks?

There are risks with any surgery, and there can be complications with cataract surgery. The risk of a complication that may seriously threaten your sight is about 3 in 1,000. However, about 950 in every 1,000 operations don't cause significant problems to the patient's vision.

## After the surgery

About four weeks after your operation your optometrist will assess your eyes; this assessment is vital as it ensures your eye has fully recovered from the cataract surgery. You will probably need to wear glasses for some tasks, possibly with a different type of lens. For example, if you used reading glasses before, you may now need varifocals, or vice versa. This is quite normal and will ensure you get the best vision possible.

During the first few years after surgery some patients develop a condition called posterior capsular thickening, which can affect their sight. If this happens, your sight will go hazy, almost like the cataract has returned, and you will need simple laser treatment to clear your vision. Your optometrist will be looking out for this and will tell you if you need this treatment.