

Cataracts – Treatment of Adults

A GUIDE FOR PATIENTS

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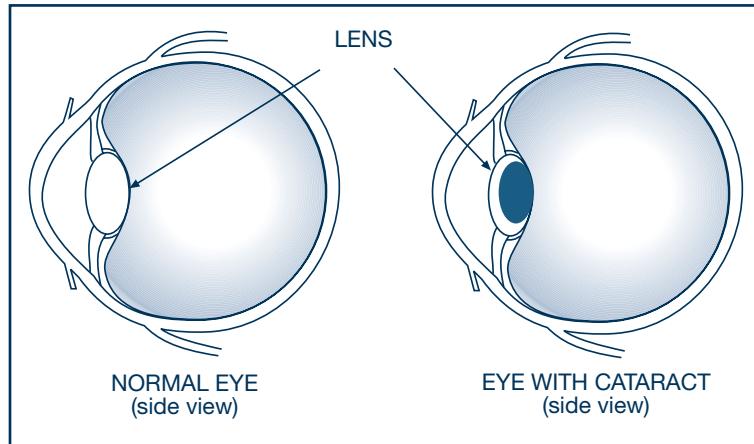
Your doctor has given you this patient guide because you have a cataract and may need surgery. You will probably have plenty of time to decide about cataract surgery. The British Columbia guideline, Treatment of Cataract in Adults, has been developed to assist you and your doctor in deciding how to best treat your cataract.

The recommendation is:

You should consider surgery only if your vision is so poor that you have difficulty with your usual daily activities

What is a Cataract?

A normal lens of an eye is clear. A cataract is a clouding in the lens that blocks some of the light and causes loss of vision. As a cataract develops, it becomes harder to see. Most people with cataracts have them in both eyes. One eye may be worse than the other. Some people with cataract don't even know it. The cataract may be small, or the changes in their eyesight may not bother them. Other people with cataract cannot see well enough to perform normal activities.



How do I Know if I Have a Cataract?

Usually a regular eye exam by your doctor is all that is needed to find 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 are:

- 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
- Double vision
- Better near vision for awhile (in farsighted people)

These symptoms can also be signs of other eye problems.

How is a Cataract Treated?

Non-Surgical management: Just because you have a cataract does not mean that you need it removed right away. A change in your glasses, stronger bifocals, or the use of magnifying lenses and better lighting may help you see better and may be treatment enough. In fact, you may never need cataract surgery. Many people put off having surgery until their vision becomes difficult or unacceptable.

Surgery: Cataract surgery involves two steps. The surgeon removes the lens, leaving behind the lens capsule (the outer covering). Sometimes the surgeon will use sound waves to soften the lens and remove it through a needle. In most cases, your lens is replaced with a clear plastic lens at the same time. This artificial disc, called an intraocular lens, is placed in the lens capsule inside your eye. If an intraocular lens is not inserted, you will require either contact lenses or cataract glasses.

What Should I Know About Cataract Surgery?

You probably won't need to stay overnight in a hospital to have cataract surgery. However, you will need a friend or family member to take you home and someone to stay with you for at least a day to help you. It takes a few months for an eye to heal after cataract surgery. Most people who have a cataract recover from surgery with no problems and improved vision. In fact, serious complications are not common with modern cataract surgery.

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. It causes the same vision problems as a cataract. Your doctor can recommend a further procedure to correct the problem.

How Do I Decide Whether Surgery is Right for Me?

Be sure to tell your doctor how your cataract has changed your vision and your life. Discuss the ways your cataract affects your ability to do the things you need and like to do, at work and at home.

The benefits of having cataract surgery are improved ability to carry out everyday activities at home and work, such as driving, reading, travelling and socializing, and increased safety, self-confidence, and independence.

No surgery is risk free. Although serious complications are rare with modern cataract surgery, if they occur they could result in loss of vision. If you have a cataract in both eyes, experts say it is best to wait until your first eye heals before having surgery on the second eye. If the eye that has a cataract is your only working eye, you and your doctor should weigh very carefully the benefits and risks of cataract surgery.

Some risks of cataract surgery include glaucoma (high pressure in the eye; about 1%), blood collection or bleeding inside the eye (about 1%), drooping eyelid (about 1%), swelling or clouding of the cornea (about 1%), infection (<1%), artificial lens damage or dislocation (<1%), retinal detachment (<1%), blindness (<0.1%), and loss of the eye (<0.01%).