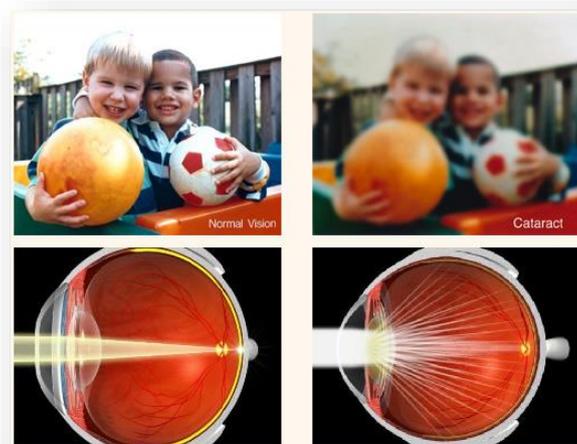
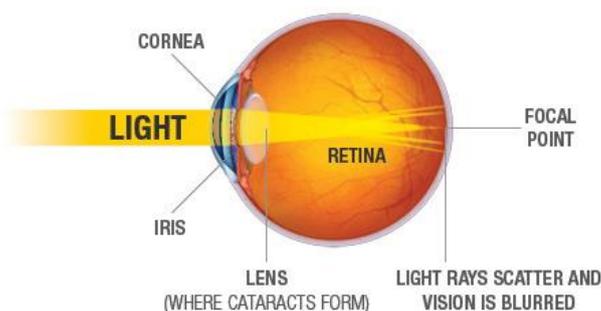




Cataracts

What is a cataract?

- The lens of your eye works like the lens of a camera.
- The lens, at the front of the eye, focuses light onto the retina at the back of the eye.
- Light passes through the lens to produce a sharp and focused image on the retina, then processed through the optic nerve to the visual system of the brain.
- When your lens becomes cloudy or opaque, it can no longer focus a clear image and your vision becomes blurred or hazy, referred to as opacification.
- A cloudy lens is known as a cataract.
- Many people do not realise they have a cataract, as cataracts can grow very slowly without impeding vision in their early stages.
- The most common cause of cataracts is biological aging.
- People with cataracts experience problems appreciating colours and changes in contrast as well as driving, reading and recognising faces.
- It is the most common cause of blindness.
- At some point the cataract will become so dense that it will compromise your quality of life.
- That's the time your eye specialist will discuss with you when the best time will be to remove it.
- Conventional surgery is the only



treatment for a cataract as it will not go away by itself.

Misconceptions

- There are many misconceptions about cataracts. Here are some of them. Cataracts are NOT:
 - a film on the outside of the eye
 - a film that grows across the eye
 - a 'growth'
 - caused by over-using or straining your eyes
 - made worse by using your eyes
 - able to be reduced with eye drops, pills or diet
 - something that has to be 'ripe' before being treated

The four types of cataract

1. Congenital

- It is not common but some babies are born with cataracts or children develop them in the early years of their lives.

2. Traumatic

- Cataracts may result from an injury to the eye, especially blunt injuries which cause the lens fibres to thicken, swell and whitening thus preventing light from getting through to the retina.

3. Secondary

- Some medications, most commonly steroids, and diseases, such as diabetes or iritis (inflammation of the eyes) may cause cataracts.

4. Age-related

- This is the most common form of cataract.
- Lens proteins degrade over time and can be accelerated by diseases such as diabetes or hypertension.

- There are three sub-classifications of age-related cataracts:

Nuclear sclerotic cataracts

- Nuclear sclerosis is a uniform hardening of the centre of the lens.
- It is often associated with increasing short-sightedness.
- If you once needed reading glasses, and now don't need them to see up close, you most likely have a nuclear cataract developing.

Cortical cataracts

- A cortical cataract is a more peripheral opacity that usually develops very slowly, often causing more glare than reduced vision in the early stages.

Posterior subcapsular cataracts

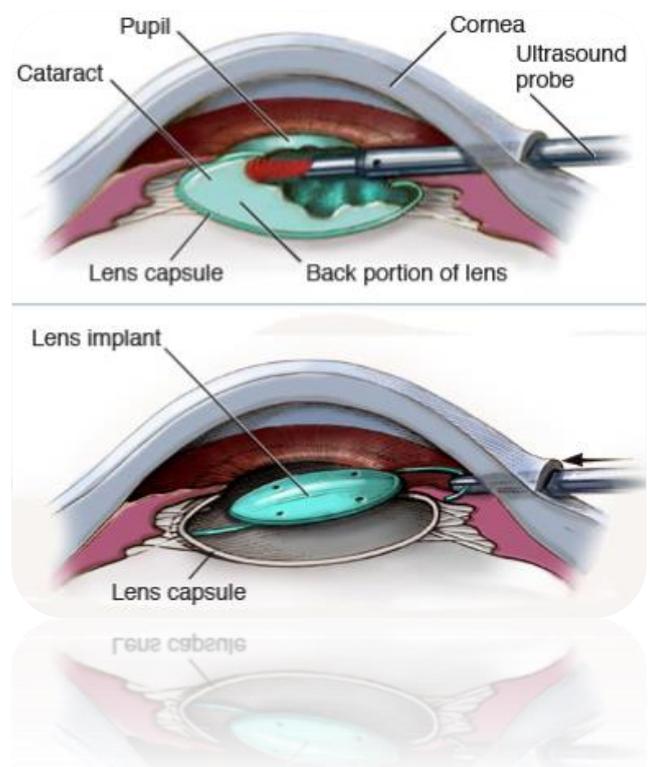
- A posterior sub-capsular cataract is associated with glare and a marked deterioration of vision in bright environments.
- For example, often your vision is better when reading an eye chart inside our rooms than it is when you go back outside afterwards on a sunny day.

Cataract surgery

- Cataract surgery involves removing the eye's natural lens and replacing it with a synthetic lens to restore the lens's transparency.
- An artificial intra-ocular lens (IOL) implant is inserted under local anaesthetic.
- The procedure is carried out by one of our ophthalmologists at a hospital.

The benefits of cataract surgery

- Improved clarity of vision.
- More independence, for example many patients regain improved eyesight to the point that they can regain their driver's license.
- Restored colour vision.
- Improved quality of life, for example less likelihood of falls.
- More confidence to drive at night.
- Reduced need for glasses other than for things like reading.



The risks of cataract surgery

- Major complications from cataract surgery are thankfully rare with on average 1 person in approximately 500 suffering some degree of side effect which may include:
 - Endophthalmitis or internal eye infection
 - Retained lens fragments where the cataract has not been completely removed
 - Macular oedema or swelling in the retina
 - Chronic inflammation
 - Night glare
 - A retinal tear or detachment
- Even if the surgery itself is successful the eye may still not see as well as you would like or expected.
- Other, ancillary, eye problems such as macular degeneration or ageing of the retina, glaucoma and diabetic damage may limit vision post-surgery.
- However even if you have such ancillary eye problems, cataract surgery may still be worthwhile and this is one of the things your eye specialist will weigh up with you.
- If your eye is healthy there is an excellent 98% chance that removing your cataract will result in good vision.
- The balance of 2% represents those patients who develop macular oedema some 2-6 weeks following entirely uncomplicated cataract surgery.

The alternatives to cataract surgery

- It is not essential to have cataract surgery.
- However the cataract will not go away and in most cases will get worse until only diffused light is let into your eye.

