

Cataracts



A Patient's Guide to Cataracts and Cataract Surgery



WillsEye Hospital

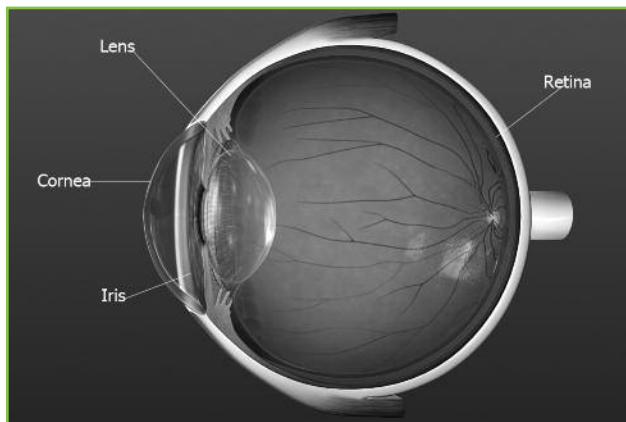
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840 Walnut Street, Philadelphia PA 19107
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A Patient's Guide to Cataracts and Cataract Surgery

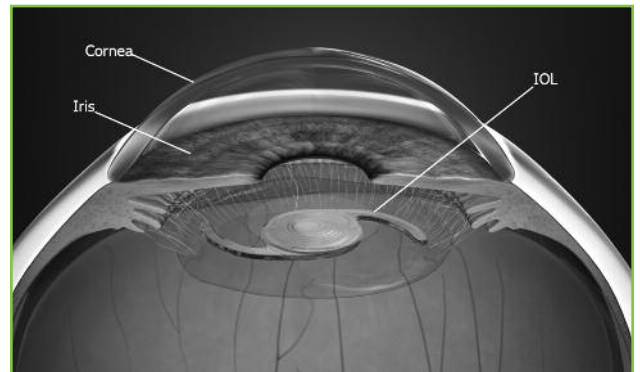
If your doctor has informed you that you have a cataract, it is important to understand your diagnosis and your options. Nearly everyone will develop cataracts at some point. Cataract is the term used to describe a clouding of the natural lens of the eye. This clouding of the lens is part of the normal aging process. Cataracts most often start to cause a noticeable difference in vision after 60 years of age. However, the formation of a cataract can be accelerated by many other factors besides age. These factors include trauma to the eye, infection, previous eye surgery and certain medications. Rarely, an infant is born with cataracts. To understand how and why a cataract affects your vision, it may be helpful to understand the process of sight.

The diagram below shows the structures of the eye. The cornea (the clear front window of the eye) and the lens (located behind the colored part of the eye) are responsible for refracting or focusing light on to the retina (the back of the eye). The retina contains nerve cells that transmit electrical impulses to the brain. The brain then interprets the image.



Cataracts cause a decrease in vision because the cloudy lens does not allow light to pass through and be focused on the retina. When we are young, the lens of the eye is flexible and clear. It can adjust or accommodate to allow us to see close or far away. At middle age, many people begin to notice difficulty with their reading vision. This is because the lens of the eye has stiffened and is no longer able to accommodate to see up close. As time goes on and the lens becomes cloudy, people may experience difficulty when driving at night due to glare from oncoming headlights. Decreased color perception as well as blurred vision for reading and seeing street signs may be experienced. Difficulty with other activities and a feeling that vision is just “not quite as sharp as it was” may also be symptoms of a cataract.

Some types of cataract develop quickly, others more slowly. A change in eyeglass prescription can sometimes improve vision but eventually the cataract reaches a point where changing the eyeglass prescription is no longer helpful. At that point, the only option to restore vision is to remove the cataract. Removing the cataract and replacing it with an intraocular lens implant (IOL) will remove the cloudiness and help restore the focusing power the eye had before the cataract formed.



Although all intraocular lenses are used to restore clarity of vision, there are many intraocular lens choices available to patients today.

Standard lens implants are monofocal, meaning they are designed to correct the vision at one focal length. If a patient chooses to have IOLs implanted that correct for distance vision in both eyes, they will most likely need glasses to read. Some patients opt for an IOL that corrects their vision for distance in one eye and an IOL that corrects their vision for near in the other eye.

Premium IOLs include the presbyopia-correcting IOLs and the toric IOLs. The decision to use these lenses must be made on an individual basis.

Presbyopia-correcting intraocular lenses are designed to correct for distance and near vision. The intended goal of these lenses is to decrease the need for glasses.

Toric intraocular lenses are used for those patients with astigmatism. Astigmatism refers to an irregularity in the curvature of the cornea. Toric IOLs are designed to correct distance vision and astigmatism.

As you can see, intraocular lenses are definitely not “one size fits all”. Before your surgery, your doctor will discuss these lens options with you.

Prior to cataract surgery, antibiotic eye drops may be prescribed to prevent infection. Cataract surgery is most often done as an outpatient procedure with local anesthesia (a numbing gel is placed in the eye) and light intravenous sedation. You should not see instruments coming toward your eye and you should not feel pain in your eye during surgery. The incision made to remove the cataract is so small that it usually does not require stitches. Phacoemulsification (a type of ultrasound) is the most common method used to remove the cataract.

The Femtosecond Laser is another option available for your doctor to use during cataract surgery. The Femtosecond laser is an FDA approved computer guided laser that is programmed by the surgeon. This device can aid the surgeon in the performance of some of the steps involved in the removal of a cataract. It can also be used in procedures performed to correct astigmatism.

Most cataract procedures take only a short time and most patients recover quickly. After surgery, you will be asked to wear a clear plastic shield home from the hospital or surgery center to protect your eye. It is particularly important to refrain from rubbing your eye until the eye is completely healed. Antibiotic and anti-inflammatory drops will be prescribed for use after surgery. Your doctor will provide you with further post-operative instructions. Usually you will be asked to return to the office the next day for a follow-up visit. Generally, patients can resume their normal activities after this post-operative visit.

Cataract surgery is one of the safest surgeries performed in the United States today. It has an excellent success rate. All surgeries have risks and your doctor will discuss general and individual risk factors with you before your surgery. We encourage you to discuss any questions you have with your surgeon.

You may have heard the term “secondary cataract”. It is not possible to develop another cataract in an eye that has already had cataract surgery. However, about 20% of patients develop a clouding of the capsule behind the IOL. This can occur months or years after the original surgery. When cataract surgery is performed, most of the natural lens is removed but most of the capsule or membrane that surrounds the lens is left in place. This capsule helps to keep the fluids behind the lens undisturbed and also holds the IOL.

If this capsule becomes clouded, the patient may experience a blurring of their vision. The cloudiness can easily and painlessly be corrected by creating a small opening in the capsule. The procedure, called a Capsulotomy, is done using a YAG laser. It is performed on an out-patient basis and takes only a few minutes. Injections are not required.

We hope that this brochure has provided you with a better understanding of cataracts and cataract surgery. Many of the latest advances in surgery, implants and instrumentation were developed at Wills Eye. Few hospitals in the world perform more cataract surgeries than Wills Eye and its surgical network.

At the present time, there is no way to prevent the formation of cataracts. It is the goal of Wills Eye Hospital to provide you with the best care possible in managing this condition.



About Us

Wills Eye Hospital is a global leader in ophthalmology. Established in 1832 as the nation's first hospital specializing in eye care, we now are known worldwide for our clinical expertise. Today, we continue to shape the field of ophthalmology thanks to our talented, skilled physicians and staff who are dedicated to improving and preserving sight.

Wills Eye's core strengths include:

Research: We maintain a close connection between innovative research and advanced care as our physicians pursue research that can be translated quickly into clinical care.

Education: Wills Eye pioneered the development of ophthalmology as a unique branch of medicine in the U.S. and created the nation's first ophthalmology residency program in 1839. Our tradition of innovation and excellence has made Wills Eye a premier training site for all levels of ophthalmic medical education.

Patient Care: Our motto – Skill with Compassion – is central to every aspect of patient care. We remain steadfast in our commitment to improving quality of life for our patients and their loved ones

Become a valued partner in the work we do. Your gift to Wills Eye Hospital will help us continue providing the best care possible, advance research for innovative treatments, and train new generations of ophthalmologists.

Please call 215-440-3154 or visit www.willseye.org/make-a-gift and make a donation today!

Cataract and Primary Care Service

215-928-3041

Main Number	215-928-3000
Physician Referral	1-877-AT-WILLS
.....	1-877-289-4557
Emergency Service	215-503-8080

Retina Service	215-928-3300
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**Cataract and Primary
Eye Care Service** **215-928-3041**

Contact Lens Service	215-928-3450
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Cornea Service	215-928-3180
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Glaucoma Service	215-928-3200
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Neuro-Ophthalmology Service	215-928-3130
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Oculoplastic Service	215-928-3250
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Ocular Oncology Service	215-928-3105
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Pediatric Ophthalmology and Ocular Genetics Service	215-928-3240
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Low Vision Service	215-928-3450
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Laser Vision Correction Center	215-928-3700
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To learn more, please visit us at www.willseye.org



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