

Cataracts and Cataract Surgery

Information and advice for patients

Ophthalmology

What are cataracts?

A cataract is a cloudy area in the lens of your eye. The lens is located just behind the iris (coloured part of the eye). The lens helps to focus light entering the eye to give a clear image on the retina (light-sensitive layer that lines the inside of the back of the eye).

The lens is transparent (clear) but if it becomes clouded the passage of light is obstructed and this impairs vision. A cataract never causes complete blindness, but if it is very dense you may only be able to see light or dark.

What causes cataracts?

Most cataracts develop as people get older, usually after the age of 65 years. They can start at a younger age if you have diabetes or longstanding inflammation in the eye, are taking certain tablets or if you have had an injury to the eye. Very occasionally some forms of cataract may be present from birth. Sometimes there is no known cause.

What are the symptoms of cataracts?

The symptoms of cataracts are:

- a gradual reduction in your vision
- blurred and misty vision
- being dazzled when looking at bright sunlight or car headlights at night

Cataract does not cause pain or redness of the eye. You may have a cataract in one eye, or in both eyes.

How are cataracts diagnosed?

Your optician or the ophthalmologist will see the cataract when they examine you.

How are cataracts treated?

The main treatment for cataracts is with surgery. This involves removing the cloudy lens (cataract) and replacing it with a new clear lens (implant).

What is the benefit of cataract surgery?

The benefit of cataract surgery is that it can improve your vision. 95 out of 100 people see better after the operation.

What are the risks of cataract surgery?

- There is a risk that technical problems may result in you not having the implant put in at the time of surgery. A second operation may therefore be needed. This occurs in 1 in 100 patients.
- Part or the entire cataract could fall backwards onto the surface of the retina at the back of the eye during the operation. This would need a second operation to remove it. This occurs in 1 in 200 patients.
- There is a risk of developing a severe infection in the eye which needs special treatment, and which can lead to total loss of sight. This occurs in 1 in 1000 patients. 1 in 10 needs laser treatment at some time in the future.
- There may also be problems related to the local anaesthetic injection. These can include a bruising around the eye and occasionally temporary problems with double vision after the operation. The anaesthetist will discuss the risks of the anaesthetic with you.

What are the risks of not getting treatment?

The risk of not getting treatment is that the cataract will gradually get worse however this can take many years in some patients. It is safe to leave the cataract alone if it is not causing any problems. You only need cataract surgery if you are having problems with your vision and want to proceed with surgery, or if you are a driver and your vision is below the legal requirement for driving.

Are there any alternative treatments?

When cataracts are mild, vision can sometimes be improved by a change in your glasses. If your optician can not improve your vision with glasses, the only treatment is surgery to remove the cataracts.

Preparing for the operation

You will need a pre-operative assessment before your cataract surgery, to check that you are well enough for the operation. This may be done on the same day as your clinic visit. Please be aware if you are a Soft Contact Lens wearer, you will

need to remove them one week before pre op date. If you are a Hard Contact Lens wearer, you will need to remove them one month before your pre op date. Just before the operation, the nurse will instil eye drops to enlarge the pupil, which will make the vision blurry for a few hours.

What happens during the operation?

The operation normally takes 30–45 minutes and is usually performed with a local anaesthetic. This means that you will be awake for the operation and your eye is made numb with eye drops and/or injections around it. You will need to lie flat and keep your head as still as possible. You will not be able to see what is happening but may be aware of a bright light. In some cases the operation is done with a general anaesthetic (where you are put to sleep).

The surgery is often done by making a small cut in the eye and breaking the cataract up with a special probe using ultrasound. Alternatively it may be done with a slightly larger cut and the cataract is removed in one piece, in which case stitches will be needed to close the cut. The new lens implant will also be inserted during the operation. The implant is made either of plastic or a flexible material such as silicone and is permanently fixed inside your eye. It is not a contact lens and cannot drop out of your eye.

Please be aware that the NHS only offer Mono-focal implants that correct for distance vision, and you will require reading glasses after surgery. Multifocal implants (to correct distance and reading vision) are only available privately.

After the operation

At the end of the operation a pad or shield may be put over your eye to protect it. Most patients are able to go home the same day as their operation.

Pain

If you have any discomfort or pain in the eye following surgery it should be relatively mild and should be settled by using a common painkiller such as Paracetamol. Do not exceed the recommended dose on the packet.

Normal activities

You are allowed to bend or stoop, but should avoid strenuous exercise in the first two weeks after the operation. Your doctor or nurse practitioner will advise you when you can return to work and you will be advised at your follow-up appointment when you can return to driving.

Avoid swimming until six weeks after the operation. You can watch TV and read as normal.

Caring for your eye

It is important not to rub the eye or press hard on it. You can wash your face as normal but keep the eye closed and pat dry.

Eye drops

You will be given drops to use after your surgery which you should continue using until your follow-up appointment. You can obtain a repeat prescription for your eye drops from your GP. It is important to wash hands before instilling the eye drops to prevent infection.

Symptoms to report

If your vision becomes more blurred or your eye becomes more painful please contact the Birmingham and Midland Eye Centre A&E on 0121 507 4440 (option 1). The department is open seven days a week between 9am to 7pm.

Follow-up

You will be given a follow-up appointment for two to four weeks after the operation and will not usually need any further appointment after this. You can see your optician to change your glasses once you have been told to stop using your eye drops.

Contact details

If you have any query or an eye problem following this procedure, please contact us on the following numbers:

Birmingham and Midland Eye Centre, Eye Accident and Emergency Department
Number: 01215074440 (option 1) between 08:30 am and 19:00 pm.

After 19:00 please call the main hospital operator to transfer your call to the main Accident and Emergency Department through: 01215543801 (24 hours service).

Further information

Royal National Institute of Blind People

Information about vision, eye conditions and treatments and support
www.rnib.org.uk

Government website

www.gov.uk/cataracts-and-driving

For more information about our hospitals and services please see our websites www.swbh.nhs.uk, follow us on X @SWBHnhs and like us on Facebook www.facebook.com/SWBHnhs.

Sources used for the information in this leaflet

NICE (2017) Cataracts in adults: management Available at: <https://www.nice.org.uk/guidance/ng77> [Accessed on 06 January 2025]

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