

Procedure Information Sheet -Cataract Operation and Intra-Ocular Lens Implantation

Introduction

- Cataract is the clouding of the transparent lens of an eye which is responsible for focusing.
- > The procedure of cataract extraction is to remove the cloudy lens and replace with an intraocular lens implant to improve vision.
- Alternatives to intraocular lens insertion are uses of contact lenses or thick aphakic glasses.

Procedure

- 1. The procedure can be performed under general or local anaesthesia depending on your condition.
- 2. A small wound is made at near the white outer part of the eye. Depending on the type of cataract, the cloudy lens may be removed as a whole piece or as a number of tiny fragments.
- 3. Artificial intraocular lens is then inserted. The wound could be closed with stitches if needed.

<u>Pre-operative preparation</u>

- 1. Measurement of the axial length of the eye and curvature of the cornea are needed for calculation of the intraocular lens power.
- 2. Eyelids should be kept clean, lid hygiene is important to decrease the risks of post-operative infection.
- 3. Eye drops may be prescribed before the procedure. Make sure you follow the guides of its administration.
- 4. Cosmetics and makeup should be avoided on the day of procedure.
- 5. Inform your doctor if you have other systemic disease such as hypertension, stroke, heart disease, diabetes or take western medication (especially blood thinners like Aspirin or Warfarin), traditional Chinese medicine or healthy supplements on a regular basis.
- 6. You will need to sign a consent form and your doctor will explain to you the reason, procedure and possible complication.

Possible risks and complications

The operation is a safe and most people recover from cataract operations, but risks and complications may arise. Apart from possible complications related to anaesthesia, the following conditions may occur:

• Poor wound healing / wound gaping.



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- Severe bleeding inside the eye.
- Infection inside the eye.
- Intraocular lens non-implantation, damage or dislocation.
- Posterior capsule tear and exudation of vitreous body.
- High pressure in the eye.
- Retinal detachment.
- Unexpected refractive change.
- Swelling and clouding of cornea.
- Drooping of eyelid.
- Sympathetic endophthalmitis affecting the opposite eye.
- Retained cataract fragments.
- Clouding of the posterior capsule of the lens.
- Pupil distortion.
- Decentration or fogging of intraocular lens that may need centering, removal or re-implantation.
- Macular oedema.
- Blindness.

Post-operative information

A. After the operation

- 1. Eye pad or eye shield should remain in position as instructed by the doctor and you should remain bed rest.
- 2. Eye rubbing, swimming and vigorous activities should be avoided for a few weeks.
- 3. Avoid washing your hair for the first week after the procedure to prevent dirty water getting into your operated eye.
- 4. Wearing of dark glasses is desirable when you go outdoors.
- 5. You may not be accustomed to the eye pad or shield; it is advised to leave some lighting when you go to toilet at night to avoid fall.
- 6. Stitches applied during the procedure may remain in place unless they are loosened, broken, causing excessive astigmatism, infection or irritation.
- 7. It is advisable to wear clothes with buttons and not pullovers to avoid the clothe(s) coming in contact with the operated eye to prevent infection.
- 8. Avoid unnecessary straining after surgery. If you have constipation, take liberal amounts of vegetables, fruits and water to alleviate your constipation if there is no contraindication.



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B. Home care advice after the operation

- 1. Please follow up as instructed and comply with the medication regime. You will probably be given antibiotic eye drops after the procedure.
- 2. Time of recovery varies from person to person as different eye heals differently. If you have prior corneal or retinal diseases, glaucoma, uveitis or optic nerve damage, the resulting visual acuity may not be as good as expected.
- 3. After the procedure, your vision usually takes a few months to stabilize. Refractive error is common. Also, loss of accommodation may lead to reading difficulties. Besides, wound problem may cause astigmatism. Further action like stitches removal or glasses may be required for further vision adjustment. Occasionally some patients may report that the phenomenon of `floaters' may be more obvious after the operation.
- 4. The lens capsule supporting the artificial lens implant may get fibrotic and become partially opaque in some patients, laser treatment may be required when it affects the vision.
- 5. You should seek immediate medical attention from our Eye center or attend nearby Accident and Emergency Department if you experience acute ocular symptoms like sudden eye pain or blurring of vision before your next follow up appointment.

<u>Remark</u>

The above mentioned procedural information is not exhaustive, other unforeseen complication may occur in special patient groups or different individual. Please contact your physician for further enquiry.

<u>Reference:</u>http://www21.ha.org.hk/smartpatient/tc/operationstests_procedures.html

I acknowledge that the above information concerning my operation/procedure has been explained to me by Dr. ______. I have also been given the opportunity to ask questions and receive adequate explanations concerning my condition and the doctor's treatment plan.

Name:	Patient / Relative Signature:
Pt No.: Case No.:	
Sex/Age: Unit Bed No:	Patient / Relative Name:
Case Reg Date & Time:	Relationship (if any):
Attn Dr:	Date: