

## PHOENIXVILLE EYE CARE SPECIALISTS

# CATARACTS

This brochure has been especially written and designed for persons who have vision problems from cataracts. Since cataracts occur frequently among older adults, many people need information about the latest developments in cataract care. A cataract is not the dreaded problem it once was. For most people with poor vision from cataracts, the prospects of regaining good vision and resuming normal daily activities are excellent.

### Introduction

Cataracts are the number one cause of poor vision among adults. Over two-thirds of the population over age 60 have a vision problem from cataracts, and over a million people undergo a cataract removal operation annually in the USA. Today a cataract can be surgically removed without discomfort. Using modern methods, poor vision from cataracts can be improved 98% of the time (the success rate of surgery).

Among the modern developments in cataract care:

**-Phacoemulsification** is a big improvement over the oldest style of cataract extraction.

**-Modern anesthesia techniques** are used. For most people the operation has little pain or discomfort at all. The actual operation takes about 15 minutes. Post op patients rarely require more than a Motrin or a Tylenol for discomfort.

**-Small incision surgery** and **Microsurgery** results in increased safety and faster recovery postoperatively.

**-Lens implants** can restore vision permanently and eliminate the need for thick "coke bottle" glasses or contact lenses.

## **What is a cataract?**

When the natural crystalline lens of the human eye becomes cloudy, it is known as a cataract.

Aging causes the lens of the eye to become hard in its center, and the ability to focus on near objects is diminished (usually requiring bifocals at age 45). As the lens ages, it also becomes less clear. Radiation, diabetes and certain medications may promote the early development of cataracts.

For reasons not completely understood, cataracts are occurring at younger ages. It is not unusual any more for patients in their 40s and 50s to have surgery.

For most people when diagnosed with cataracts, a mild cataract doesn't require immediate removal. Since cataracts usually occur in one eye first and later in the other, vision is usually not completely obscured.

For persons who have fine visual requirement such as watchmakers, accountants or draftsmen, a mild cataract may cause enough visual difficulty to seek its early removal. Artists who require fine color discrimination or truck drivers who need excellent night vision without glare also may need early removal.

## **Symptoms of cataracts**

With increasing age the lens of the eye becomes less transparent. By age 60 the light passing through the lens has been reduced by 50%; by age 80, it can be reduced by as much as 75%. For many people, the effect is like looking through a plastic bag. Below is a list of possible symptoms:

- Feeling of film over the eye
- Glare from bright sunlight, irritation, or poor vision when viewing oncoming automobile headlights at night
- If a cataract develops in just one eye, depth perception can be affected
- As the lens hardens, it can bend light rays so that close objects can now be seen without glasses (so-called "second sight")

-As the lens ages, it also yellows as the result of a lifetime of exposure to sunlight. As a result, many adults lose their ability to see blues and purples and all colors in general become darker or yellowy-brown.

### **How is the Cataract Diagnosed**

A cataract is diagnosed when your doctor examines the inside of the eye with a microscope. Once diagnosed, the cataract can be removed at any time. When cataracts interfere with normal daily activities such as reading the newspaper or being able to pass a driver's license requirement, then it is time to consider having it removed.

### **Prior to the Operation**

If a cataract is to be removed, the doctors will obtain some special tests. The length of the eye will be measured by ultrasound in fractions of a millimeter. This can be done in two ways-either by a special non-contact machine or a probe gently touching the front surface of the eye after anesthetic drops are given. Either take just a few minutes and do not require dilation of the eye, nor will this test affect your vision. The result of this test is important for the doctor to select the proper strength lens implant to restore your vision.

Behind a cloudy cataract is the retina, which must be healthy for good vision after the operation. The retina is like the film in a camera. The doctor may request special tests of the retina prior to the operation to assess its health.

Thanks to modern technology, persons with glaucoma are generally not prevented from having a cataract removed.

### **Small Incision Surgery**

Older style cataract surgery required a large incision. Best vision could take months to achieve, and there were more restrictions on activities postoperatively. The incision required numerous stitches to close and there was a higher risk of complications.

Today almost all surgery is done by the small incision method. The incision is about 3mm long and is closed by either zero or one dissolving suture. Because this method is less traumatic to the eye, patients usually have improved vision sooner, within days to a few short weeks. There is also less astigmatism (curvature) postoperatively. Because the incision is smaller, the risk of severe complications is much lower. The complete recovery period is usually much shorter, about 4 to 5 weeks when glasses are prescribed after surgery. There is also a much faster return to normal activities postoperatively.

99% of surgery is done by the small incision method, but some very advance cataracts or preexisting conditions will not lend themselves to this method. Your doctor will decide which method is safest for your particular eye. Rarely the doctor will switch from the small incision method to the larger incision method during the operation. The goal of the doctor is always to do what is safest for your eye and will give you the best visual outcome with the least risk of complications.

### **Phacoemulsification**

With the modern phacoemulsification method of removing a cataract, the hard center and its soft remnants are dissolved by ultrasound then gently removed by suction, and the thin capsule or shell around the cataract is left in place. This maintains the natural anatomy of the eye and reduced the chances of complications associated with older methods of cataract surgery.

By using phacoemulsification, the cataract can be removed through a small 1/4 inch incision. The artificial lens implant is placed in the same space (capsule) as the natural cloudy lens that has now been removed. The artificial implant requires no stitches to remain in place and should provide good vision for the remainder of a patient's lifetime. Artificial lenses are even safe to be implanted in children as young as 2 years old. They never "wear out".

Today the lens implant is recommended instead of thick "coke bottle" glasses or contact lenses. While contact lenses can provide good vision,

they can be difficult to handle, especially older patients or patients with allergies or tremors, and must be cleaned or replaced frequently at additional expense. Contact lenses are also unreliable in dusty, humid or windy environments. Cataract glasses seriously restrict side vision and magnify images 30% over their normal size. They are also somewhat unsightly to look at and heavy to wear.

For persons who have previously had a cataract removed, a lens implant may be placed inside the eye in a second operation. The lens implant is usually placed in front of the pupil in these secondary operations. After the operation the patient should be able to see well without glasses or contact lenses. After a thorough examination of your eye, your doctor will advise you if this procedure is recommended.

### **Complications**

While the possibility of complications always exists in any operation, serious complications are relatively rare. If you proceed with cataract surgery, you will be given a written consent form giving permission to operate on your eyes. This form is a legal document which attempts to explain the potential risks and benefits involved.

Modern cataract surgery is 98% successful in improving vision. Thanks to modern advancements like phacoemulsification, microsurgery, lens implants and small incision, this percentage may continue to improve.

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