Ophthalmology department

Cataract surgery Information for patients, relatives and carers

Introduction

This leaflet has been designed to give you information about your **cataract surgery**. We hope it will answer some of the questions that you or those who care for you may have at this time. This leaflet is not meant to replace the discussion between you and your medical team but aims to help you understand more about what is discussed. If you have any questions about the information below contact us using the details on the back page.

Why do I need cataract surgery?

A cataract is a clouding of the natural lens of your eye and affects your eyesight. It can occur in most people as they age.

When the cataract has reached a stage where your vision is affected significantly, the only treatment option is cataract surgery. Cataract surgery involves removing the cloudy layers of the lens and replacing these with a clear artificial lens implant.

An ophthalmic (eye) surgeon will carry out your operation. This is a doctor who has already spent several years training and has a lot of experience in treating eye problems. A doctor who is still in training may carry out part or all of your operation under the supervision of a more experienced surgeon.

What are the benefits of cataract surgery?

The main benefit is clearer sight and an improvement in your colour vision, as things will seem less yellow.

Most people find that their sight improves considerably after surgery.

You will need to get a new prescription for your glasses four to six weeks after your operation, although in some cases, off-the-shelf ready-made reading glasses of +2.00 or +3.00 dioptres may be adequate for reading purposes.

If you have another medical condition, such as diabetes, glaucoma or age-related macular degeneration, your vision may still be limited, even if the operation to remove the cataract is successful.

Please note that your vision may not be completely clear immediately after the operation but may take up to four weeks and in some cases longer to improve.

You cannot develop cataract again after cataract surgery. However, it is common to develop capsule opacity (thickening of the membrane that houses the new lens) several months to years after surgery, which can cause blurry vision and is rectified by a 20-minute outpatient laser procedure.

What is required before cataract surgery?

- Before surgery, you will have a pre-operative assessment. This is needed to check you are suitable for the procedure from a health perspective. Please ensure you bring the names of your current medication. At the pre-assessment, measurements will also be taken from your eye (biometry) to determine what the replacement lens power will be.
- Your pre-operative assessment may be on the same day as your appointment.
- Depending on the findings, you may be asked to see your GP for better control of your blood pressure or diabetes if you have these conditions. Or you may be asked to return for further tests or another consultation with your surgeon.
- If your blood pressure (BP) at the pre-operative assessment is ≥ 160/100 it is likely that you will be discharged back to your GP. Your GP will be advised to ensure your BP is better controlled, then refer you to us for cataract surgery again.
- If your random blood sugar level is > 10mM or your HbA1C is greater than 69mmol/mol it is likely that you will be discharged back to your GP. Your GP will be advised to ensure your blood sugar is better controlled, then refer you to us for cataract surgery again.

What types of replacement lenses are available?

- **Monofocal lenses:** These are the most common type of replacement lenses used in the NHS. They are designed to improve either distance or near vision but not both.
- **Toric lenses:** These lenses are designed to improve astigmatism in the eye if present. Astigmatism is where the eye is more curved in one direction compared to the other. Some NHS centres including ours use these lenses in select cases if the criteria for their use is met. Additional tests are needed to determine if they are a suitable choice.
- **Multifocal lenses:** These lenses are designed to improve distance as well as reading vision. There are various types available including toric versions and there are specific criteria that need to be met for their use. This lens type is not available on the NHS at the present time.

NB: Please note that regardless of lens type used, glasses may still be required to optimise vision either for distance or near vision, or both. We recommend getting a formal assessment with your optician 4 to 6 weeks after surgery.

Are there any risks associated with this operation?

Complications are rare and, in most cases, can be treated effectively with drops or additional surgery, or both.

In a small number of patients, further surgery, or other treatment, may be necessary.

Very rarely (for about one in every 1,000 patients), complications can result in blindness.

Possible complications after the operation include:

- bruising of the eye or eyelids
- high pressure inside the eye, causing pain and blurred vision
- clouding of the cornea, causing blurred vision
- unexpected vision correction outcome after surgery (refractive surprise) or movement of the implant from the correct position
- swelling of the retina (macular oedema), causing blurred vision
- detached retina (where the retina separates from the wall of the eye), which may require surgery
- infection in the eye
- allergy to the eye drops used after the operation

Are there alternatives to this treatment?

Early cataracts are treated with glasses, but when they develop further, surgery is the only treatment.

Without the operation, your vision will gradually deteriorate further, but you are unlikely to have other problems.

Is there anything I should do to prepare for my operation?

Unless you have been told otherwise, please take all your usual medication on the day of surgery, **especially your BP medication!** If your BP is too high on the day of surgery your surgery may be cancelled.

Similarly, if your blood glucose is too high on the day of surgery, your surgery will likely be cancelled.

If you are having a local anaesthetic (which is the case for 95 per cent of patients), you can eat and drink as normal. If you are having sedation or a general anaesthetic, you will need to fast for six hours before your surgery.

What happens on the day of my operation?

On the day of your surgery, you will be asked to attend the day-case unit on the 4th floor of the **Western Eye Hospital** or the Riverside Wing if your surgery is at **Charing Cross Hospital**.

If you are having a general anaesthetic, you will be asked to attend Alex Cross Ward on the 2nd floor at the Western Eye Hospital.

- The nurses will check you in and carry out all the pre-operation tasks, including measuring your BP and blood glucose level if you are diabetic. The nurse then administers the medication (drops or pellet) to dilate (enlarge) your pupils ready for the surgery.
- The surgical team will also see you before surgery to check everything is in order and answer any questions or queries that you may have.
- When the time comes for your surgery, you will be taken to the operating theatre where we will check your details again.
- The appropriate anaesthetic will then be given to you. This is usually just anaesthetic eye drops administered beforehand with additional anaesthetic given inside the eye during the operation. In some cases, you may be given an injection around the outside of the eye (called a sub-tenon's injection) before the operation.
- The operation takes about 30 minutes to complete. If you need to cough or adjust your position during the operation, please warn your surgeon. We will then take you back to the day-case unit.

Please eat and drink as normal after your surgery.

How will I feel after the operation?

You may notice a dull ache or bruising sensation around your eye after surgery. This usually settles over one to two days. Your eye may also be redder than usual after your surgery. This gradually settles over seven to ten days.

When can I go home?

Most patients go home the day of their surgery. You can go home once the nurses have checked you over and you have received your medications.

It is very rare that you would have to stay overnight in hospital, even if you are having a general anaesthetic.

On the day of your surgery, you can expect to be in the hospital for around four to five hours.

How do I care for my eye at home?

Immediately after your operation, a pad or shield will be put over your eye to protect it from any accidental rubbing or knocks.

You should remove the pad or shield the morning after your operation and, if necessary, clean your eyelids and the surrounding skin with a tissue or cotton wool dipped in clean, warm water.

If you notice increasing pain, redness or reduced vision following surgery, please contact us on the numbers below.

If you have any pain or discomfort during the evening after your operation, you should take a painkiller such as paracetamol every four to six hours.

It is normal for your eyes to feel itchy or sticky with some mild discomfort and watery discharge for a few days after your operation.

Eye drops

Please make sure that you use the eye drops prescribed by the doctor, as they will help to prevent infection and reduce irritation.

- 1. You should start using the drops the morning after your operation, following the instructions below.
- 2. Wash and dry your hands thoroughly before touching your eye or putting your drops in.
- 3. Tilt your head back, and using one finger, gently pull your lower eyelid down.
- 4. Keeping your head tilted, look up and gently squeeze the eye dropper until a drop falls inside the lower lid. If you did not feel the drop go in, try again. Do not let the dropper touch the eye.

Use the drops four times a day, or as prescribed. You may find it easier to remember if you put them in at the same times each day. You should continue to use them for at least four weeks after your operation or until your doctor tells you to stop.

Eye medication Right or Left eye How many weeks? How many times a dav? R L П Π

Is there anything I need to avoid?

Be very careful for the next three weeks after your operation.

Do not:

- rub your eye
- let soap or shampoo get into your eyes. It might be safer to put your head back when washing your hair (or ask someone to help you) for the first week after your operation
- drive until you are advised you can. You can see your optometrist 1 week after surgery to confirm whether you can drive
- go to work until you feel comfortable to do so (usually within a week)
- do any heavy housework or strenuous exercise, or go swimming
- knock your eye when putting on your glasses

Do:

- read, write, watch television and use a computer
- bathe or shower as usual
- be careful going up or down stairs
- go out for walks, do light shopping and cooking
- wear the plastic shield at night for one week, using thin sticky tape or sellotape to hold it in place
- use your old glasses if they help. You will need new lenses in your glasses when your eye has healed, four to six weeks after surgery
- wear ordinary sunglasses or your old glasses if your eyes are sensitive to bright light or windy weather

Useful contact telephone numbers

If you have questions before your appointment, please contact the pre-assessment nurse on **020 3312 9784 / 9730 / 9612** at Western Eye Hospital or **020 3311 0137** at Charing Cross Hospital between 09.00 and 17.00, Monday to Friday.

If your eye becomes red or painful, or have any other concerns, please contact:

- Western Eye Hospital emergency department: 020 3312 3245
- Western Eye Hospital eye clinic: 020 3312 3236
- Alex Cross ward at the Western Eye Hospital: 020 3312 3218
- Day care unit at the Western Eye Hospital: 020 3312 9614
- Charing Cross Hospital eye clinic: 020 3311 1109 or 020 3311 1233
- Charing Cross Hospital Riverside Daycare unit: 020 3311 1460

If you have not received a post-surgery appointment, please contact 020 3312 3275 option 2 or email imperial.wehoutpatients@nhs.net

Will I need to visit the hospital again?

Yes. We will send you an appointment to attend the eye clinic one to four weeks after your operation.

At this appointment, we will tell you when to stop using your eye drops and when to go to the optician for new glasses. If you wish to have surgery to your other eye, you will be put on the waiting list at this appointment. Many patients can wait until after they have had surgery to both eyes, before seeing the optician for new glasses.

Please contact the appointments office on 020 3312 3275/3227 if you do not receive an appointment.

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (PALS) on 020 3313 0088 (Charing Cross, Hammersmith and Queen Charlotte's & Chelsea hospitals), or 020 3312 7777 (St Mary's and Western Eye hospitals). You can also email PALS at imperial.pals@nhs.net The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Alternatively, you may wish to complain by contacting our complaints department:

Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street London W2 1NY

Email: ICHC-tr.Complaints@nhs.net

Telephone: 020 3312 1337 / 1349

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team: imperial.communications@nhs.net

Wi-fi

Wi-fi is available at our Trust. For more information, visit our website: www.imperial.nhs.uk

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