



Pre-operative information before cataract surgery

Cataracts are an opacity within the lens of the eye. Some cataracts affect only a small part of the lens and do not interfere with vision. Where cataracts are extensive enough to affect vision surgery can be considered. Cataracts tend to go through a process of progression and maturation. This process can trigger inflammation in the eye -lens induced uveitis. The level of this inflammation varies between patients and types of cataracts

The surgical technique used to remove the cataract is called phacoemulsification. This is a microsurgical technique carried out using an operating microscope. The phacoemulsification system is a device with a hand-piece that is placed in the lens inside the eye and breaks up the cataract with ultrasonic vibration and simultaneously aspirates the fragmented cataract from the eye. The whole cataract is removed from the eye through a 3mm incision in the cornea.

The lens sits in a bag called the lens capsule. A circular hole is made in the lens capsule and the lens is broken up with the phacoemulsification. The phacoemulsification equipment keeps the eye inflated with a special fluid called balanced salt solution, the flow of which also cools the eye and reduces the impact of friction from the handpiece. While the handpiece is not in the eye, the eye is kept inflated with special viscoelastic gel which allows us to work inside the eye. The gel is used to keep the eye inflated while a replacement lens is inserted into the eye into the capsular bag. This lens is introduced through the 3mm incision and unfolds when in the eye.

Any damage or break in the lens capsular bag can mean that a replacement lens cannot be placed in the eye. This does not mean that the eye will not be able to see, but the final focusing power of the eye will be altered. Generally dogs cope with this very well. Compared to the minimal vision through a dense cataract, an eye without a lens (-an "aphakic" eye -) is generally a big improvement.

Cataract surgery by phacoemulsification is easier to perform and has a better success rate when it is done as early as possible in the progression of the cataract disease process. There is usually a balance to be struck between early surgery and intervening when the animal has a problem with vision. The window of opportunity for surgery varies with patients. Some patients have a rapid progression of cataract requiring an early intervention while some have a slow cataract progression giving owners plenty of time to make up their mind on the best course of action. It is important to control any lens induced uveitis that is present (inflammation caused by the lens cataract).

The initial assessment of the cataract patient will look at the degree of cataract present and any concurrent problems within the eye - the suitability for surgery will be assessed and we'll talk through the aftercare that will be required.

The success rate from cataract surgery is good generally with upwards of a ninety percent success rate of dogs still visual one year post operatively. The success rate may vary in different groups of patients however, and aftercare may be more complex or difficult in some cases which is why an individual assessment is important. Aftercare will be a minimum of two different types of drops, given 4 times daily for the first week -usually an antibiotic drop and an anti-inflammatory drop. A drop to reduce intraocular pressure may also be required where the pressure levels rise post operatively. Oral antibiotics and anti-inflammatory medication is also used and patients ideally need to be kept calm and quiet in the immediate post operative period.

Cataracts cannot re occur once they have been removed, and the outcome once the immediate post-operative period has been safely negotiated is usually good. However complications threatening vision can occur, meaning that vision is lost after surgery. These complications include uveitis (inflammation inside the eyeball), glaucoma (a pressure rise in the eye) and sometimes retinal detachment. In the worst case scenario, these complications can create eyes that are painful enough to require removal.

Care in the post operative period is vital. The patients at West Midlands Referral are treated as day patients, but will not be discharged until we are happy with their progress. A re examination will be requested 48hrs post op and 7 days post op with further checks at about 1 month post op ,3 months post op and 6 months post op. Usually this cost is all covered in the cost of surgery. Should there be concerns and should more frequent examinations required there will be no extra charge for these although the costs of medications will be payable if these exceed the usual level of post op medications

Our fixed prices for surgery include any follow up consults as outlined above, but there may be charges for further medication or revision surgery.

For further advice please contact us by phone on 07944 105501 or at mail@wm-referrals.com. Consider texting/emailing pictures.