

# Understanding cataract

The Eye Service

St Bartholomew's Hospital



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## What is a cataract?

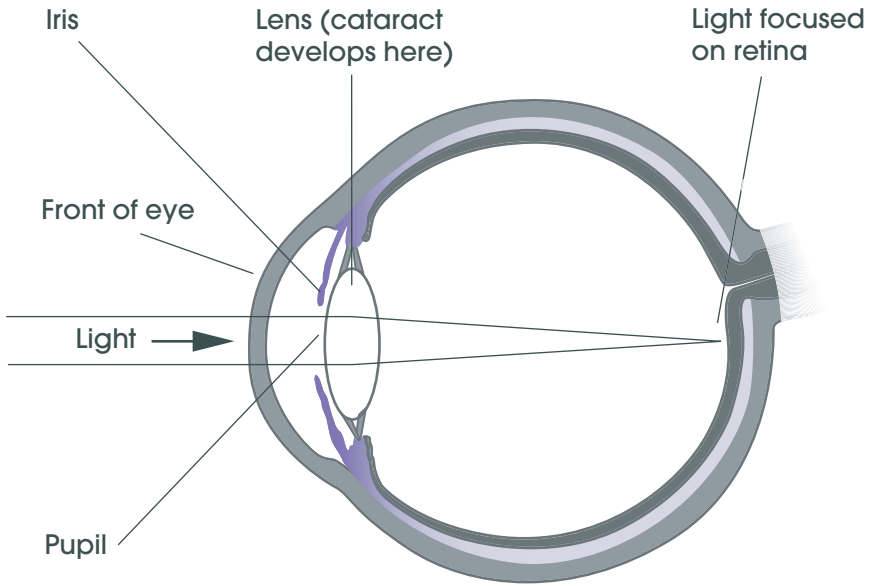
If your doctor or optometrist/optician has told you that you have a cataract, do not be alarmed. Many people develop cataracts and most can be treated successfully.

A cataract is a clouding of the lens of the eye, a clear structure found behind the pupil and iris. The iris is the coloured part of your eye and it has a hole in the middle, the pupil, which appears black. Light enters your eye through the pupil and is focused by the lens on to the back of your eye (the retina) to form an image.

With a cataract your vision becomes blurred because the cataract in your lens acts like frosted glass, interfering with your sight. It is not a layer of skin that grows over your eye.

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Cross-section of the eye



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## How does a cataract affect your sight?

### Blurry sight

This is very common. You may notice that your sight has become blurred or misty as though your glasses are dirty or scratched. However, new glasses do not improve your vision.

### Dazzled by light

You may be dazzled by lights, such as car headlamps, and sunlight.

### Change of colour vision

Your colour vision may become washed out or faded.

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## What causes cataracts?

Cataracts can form at any age. Most develop as people get older but we don't yet know why, although research is being done into a number of possible causes. In younger people we know that they can occur in those with diabetes, patients on certain medication, and as a result of other longstanding eye problems.

## How can I be treated?

The only effective treatment for a cataract is an operation to remove the cloudy lens. This is then replaced with an artificial lens. Diets and drugs do not reverse or stop the development of cataracts.

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## When can I be treated?

In the past eye specialists often waited until the cataract became 'ripe' (advanced), and your vision was very poor, before suggesting you had a cataract removed. Nowadays, with modern surgery, the operation is usually done earlier. You will probably want to consider surgery as soon as your poor eyesight interferes with your daily life and your ability to read, work, or do the things you enjoy.

If you are a driver you must reach the visual standard required by the Drivers and Vehicle Licensing Authority (DVLA), their contact number is in the back of this booklet. It may be necessary to have a cataract removed in order to keep your licence. Please ask your eye doctor for more information if you drive.

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## Your Eye Clinic appointment

During your visit to the clinic an eye surgeon (ophthalmologist) will examine you to see whether cataract surgery would help. If it would, and you decide that you would like to have a cataract operation, a date for surgery will be arranged. You will be asked to sign a consent form for the operation.

If you have cataracts in both eyes we will operate on different dates at least three weeks apart.

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## Your pre-operative assessment

Your assessment for surgery will take place in the Radcliffe Eye Theatre and Ward, St Bartholomew's Hospital. There is a map at the back of this booklet. You will be given a general health check to make sure you are fit enough for the operation. Your eye will also be measured (scanned), so that the surgeons can plan your surgery. As your health check and eye scan are often done on the same day as your eye clinic appointment, please be prepared for a long visit to the hospital; it can take up to four hours.

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## The operation

You will be able to have your cataract operation soon after you arrive at the Radcliffe Eye Theatre and Ward. Most people have a local anaesthetic and can leave hospital on the same day. Please make sure someone accompanies you home. If you need a general anaesthetic you may have to stay for one night after surgery.

You will be awake under a local anaesthetic, and you may be aware of some movement and lights, but you will see very little. You will not feel anything as your eye will be numbed. The operation usually only takes about 20-30 minutes although it can last longer.

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## Cataract removal

During the operation we will make sure you are as comfortable and relaxed as possible.

Using a microscope to magnify your eye, the surgeon will make a very small cut in the eye surface. The lens containing the cataract is broken up by ultrasound waves (not a laser), and removed through this incision. An artificial lens, called an intraocular lens implant, will then be placed in your eye where it will remain permanently. Stitches are not usually necessary as the cut in the front of your eye is so small. After the operation a pad and/or shield will be put over your eye to protect it.

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## After the operation

We ask you to leave the eye pad in place for about 18 hours. Most people notice an instant improvement in sight when the pad is removed, although complete healing may take several weeks. You will be given eye drops to use during this time.

Before you leave hospital you will be given instructions about the eye drops, and information about what to do when you are back home including a number to call in case of emergencies. Most people are able to carry on with their normal activities as soon as the eye pad is removed.

The eye specialist, or nurse in the eye clinic, will be able to answer any further questions you may have and tell you when it would be advisable to go back to work or drive again. You will be given a follow-up appointment before you leave hospital.

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## The risks and benefits of cataract surgery

Cataract surgery is usually very successful. 95 out of every 100 patients (95%) have improved vision if no other eye problems are present.

Difficulties during surgery occur in 1 in 20 operations (5%), but these are usually resolved at the time of surgery. Rarely, another operation may be necessary.

The most serious complication is permanent loss of vision in the operated eye, usually because of bleeding or infection. This is extremely rare and only affects approximately 1 in a 1000 people (0.1%).

Within five years of surgery it is possible that the lens membrane, which is left behind to support the artificial lens, will thicken and this will reduce your vision. This is a relatively common problem, but it is easily correctable with painless outpatient laser treatment.

**If you are worried about anything not covered in this booklet please ask a member of staff any questions you would like, or you could contact your optician or GP for further advice.**

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## Useful contact details

### **Eye (Ophthalmology) Clinic**

2nd floor Outpatients  
St Bartholomew's Hospital  
West Smithfield  
London EC1A 7BE

Tel: 020 7601 7159

### **Eye (Ophthalmology) Clinic**

2nd floor Outpatients  
The Royal London Hospital  
Whitechapel  
London E1 1BB

Tel: 020 7377 7000 ext. 2482

### **Radcliffe Eye Theatre and Ward**

1st floor Queen Elizabeth Wing  
St Bartholomew's Hospital

Tel: 020 7601 7104

[www.bartsandthelondon.nhs.uk](http://www.bartsandthelondon.nhs.uk)

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## For further information

### **Royal College of Ophthalmologists**

17 Cornwall Terrace  
London NW1 4QW

Tel: 020 7935 0702

### **Drivers and Vehicle Licence Agency**

#### **Drivers' Medical Group**

Longview Road  
Morrison  
Swansea SA6 7JL

Tel: 0870 600 0301



**Radcliffe Eye Theatre & Ward**  
 First floor  
 Tel: 020 7601 7104

**Eye Clinic**  
 2nd Floor  
 Tel: 020 7601 7159

**Queen Elizabeth II Wing**

**Henry VIII Gate**

**New Gate**

**Nurses Gate**

**Goods Gate**

Hosler Lane

Cock Lane

Holborn Viaduct

Newgate Street

King Edward Street

Giltspur Street

Long Lane

West Smithfield

Kenton & Lucas Wing

North Wing

Great Hall

Pathology

West Wing

Minor Injuries

Robin Brook Centre

Outpatients Wing

Holder Wing

East Wing

Restaurant

Little Britain

Queen Mary Wing (QMW)

King George V Wing (KGV)

Dominion House

Bartholomew Close

Bartholomew Close

The Square



