

Cataract Surgeries Programme
Patient Information Leaflet on Cataract Surgery

1. Purpose of Operation

To restore the clarity of ocular medium by removing the cataractous lens.

2. Nature of Operation

- (a) Removing the lens
 - The lens must be removed through a surgical incision
- (b) Replacing the lens' function
 - Usually by means of an intra-ocular lens
 - Other choices are contact lenses and thick aphakic glasses

3. Outcome

- (a) Most people recover from cataract operation with improved vision (i.e., better than pre-operative status). However, no surgery is risk free. Loss of vision can happen if complications arise.
- (b) Post-operation vision usually needs a few months to become stabilized. Refractive error is common after surgery. Loss of accommodation would lead to reading difficulties and scarring of wound may lead to astigmatism. Further adjustment with removal of sutures (see paragraph (e) below) or spectacles may be required.
- (c) If the patient has prior corneal diseases, retinal diseases, glaucoma or uveitis, the post-operative visual acuity may not be as good as expected, even without operative or post-operative complications. Such would be due to the prior damage of other visual receptors like the optic nerve etc.
- (d) If a patient had his/her eye operation done recently and has acute ocular symptoms like sudden eye pain or blurring, he/she can make enquiry to his/her Private Ophthalmologist or go to any nearby HA Accident and Emergency Departments to ask for advice (after office hours) without the need to abide rigidly to the booked follow-up date.
- (e) If stitch(es) was/were placed due to operational needs, such may not be removed unless it/they is/are loosened, broken, causing excess astigmatism, infection or irritation etc.

4. Complications

The following complications may occur during and after cataract surgery, some of which if occurring within 6 months of your cataract surgery, may be treated by your Private Ophthalmologist or he/she may refer you back to HA hospitals for treatment:

- (a) Complications to be treated by Private Ophthalmologist occurring within 6 months of the Cataract Surgery
 - (i) Wound gaping / dehiscence / removal of eroding sutures
 - (ii) Lens posterior capsule tear and exudation of vitreous body
 - (iii) High pressure in the eye

(b) Complications that may be treated by Private Ophthalmologist or for referral back to HA hospitals for treatment

- (i) Intra-ocular lens non-implantation, damage or dislocation
- (ii) Swelling and clouding of the cornea
- (iii) Drooping of eyelid
- (iv) Retained cataract fragments
- (v) Clouding of lens capsule
- (vi) Pupil distortion
- (vii) Macular edema
- (viii) Complications of anesthesia

5. Severe Complications that may be treated by the Private Ophthalmologist or for referral back to HA hospitals for treatment

- (i) Blindness VA<3/60
- (ii) Severe bleeding inside the eye
- (iii) Infection inside the eye
- (iv) Retinal detachment
- (v) Sympathetic endophthalmitis affecting the opposite eye
- (vi) Decentration or fogging of intraocular lens that may need its centering, removal or exchange
- (vii) Dislocation of the intraocular lens
- (viii) Endophthalmitis

6. Consent

The doctor has fully explained the above to me (the undersigned) and in so doing has also explained:

- (i) the nature of my medical condition;
- (ii) the consequences if the condition is not treated;
- (iii) any uncertainties of the doctor in his/her diagnosis; and
- (iv) the options that are available (including the option not to treat and the likely outcome).

The doctor has also answered the questions that I have asked.

I hereby confirm by my signature below that I fully understand all of the above.

Patient's Name

Patient's Signature

Date