

# Before, During and After your Cataract Surgery

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A guide for adults having cataract surgery at the Royal Jubilee Hospital.

**Please:**

- Read this booklet the day you get it.
- Keep it beside your phone to write down any further instructions.
- Bring it to **all** your appointments before and after your surgery and to the hospital the day of your surgery.

Your name: \_\_\_\_\_

## Introduction

This booklet was written for people having surgery to remove cataracts from their eye(s).

People who are prepared for surgery and who take part in their care can recover in less time and with fewer complications. This booklet will give you the information you need to get yourself, your family and your home ready for surgery.

If you have any questions regarding your surgery, please contact your **surgeon's office**. You can learn more about preparing for your eye surgery at [www.viha.ca/eye\\_health](http://www.viha.ca/eye_health).

**\*IMPORTANT:** The information in this booklet is intended solely for the person to whom it was given by the health care team. It does not replace the advice or directions provided to you by your surgeon.

**Approved by:** Division of Ophthalmology, VIHA South Island

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## About Cataract Surgery

### What is a cataract?

A cataract is a painless, cloudy area in the lens of the eye. The lens is located behind the iris and is normally clear. Light passes through the pupil, the dark area in the centre of the iris, to the lens.

Because cataracts block this light, they can cause vision problems.

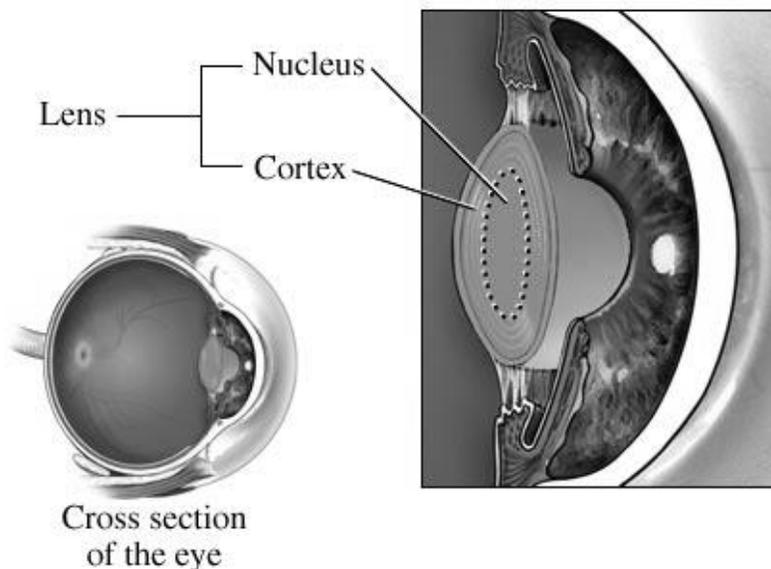


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### What causes cataracts?

There is no way to prevent cataracts, but they can be caused by:

- Natural changes to the eye due to the aging process
- Trauma to the eye
- Some medications or toxic chemicals
- Birth defects

## Why are cataract removed?

The purpose of cataract surgery is to remove the clouded lens of the eye (the cataract) to improve sight. The lens can be replaced with an artificial lens called an intraocular lens implant (IOL). Or, if an IOL cannot be used, it will be left out and contact lenses or, rarely, strong eyeglasses can make up for it. Most patients will get an IOL during surgery.

Most cataract surgery is done as day surgery using a topical anesthetic (eyedrops). Some patients will also need a sedative to help them relax. Patients with extreme anxiety, certain medical conditions and children usually need a general anesthetic.

## Types of cataract surgery

There are two types of cataract surgery with lens implantation. The decision about which surgery to have depends on you and your surgeon. You may also choose to not have surgery and continue with your present state of vision.

1. **Phacoemulsification:** In this type of surgery, the incisions are small and sound waves (ultrasound) are used to break up the lens into small pieces. This is the most common way to do cataract surgery. You can see a slide show on this type of surgery at [www.healthlinkbc.ca](http://www.healthlinkbc.ca) and search “cataract surgery”.
2. **Extracapsular surgery:** In this type of surgery, the lens and the front part of the lens capsule is opened. The lens is then removed in one piece. Sometimes a small incision is used and

the lens is broken into small pieces. Extracapsular surgery is also called extracapsular cataract extraction, or ECCE. ECCE is rarely done these days.

## **Intraocular lenses (IOLs)**

There are different types of intraocular lenses (IOLs) that are placed inside the eye during cataract surgeries: the soft foldable lens or the specialty vision correction lens.

The **foldable intraocular lens** is the standard and most commonly used type. By folding the lens, it is possible to insert it through a small incision. Once inside the eye, the foldable lens unfolds right away and gives excellent vision. The major benefit of a foldable lens is in the smaller incision, which heals quickly. Also, clouding of the clear membrane behind the lens happens less often. The foldable lens is covered by the Medical Services Plan of BC.

**Specialty vision correction lens** must be ordered by your surgeon and paid for on the day of surgery. Ask your surgeon for payment information. If you have extended health insurance, you will need to arrange repayment with them after surgery.

## **How well does cataract surgery work?**

Cataract surgery has an 85% to 92% success rate in adults with few complications and little to no discomfort.

## **Risks**

Less than 5% of people have complications from cataract surgery that could threaten their sight or require more surgery. The rate of complications increases in people who have other eye diseases as well as the cataract.

Although the risk is low, surgery for cataracts does involve the risk of partial to total vision loss. Some complications can be treated and vision loss reversed, but others cannot.

### **Potential complications that may occur with cataract surgery include:**

- Infection in the eye (endophthalmitis)
- Swelling and fluid in the centre of the nerve layer (cystoid macular edema)
- Swelling of the clear covering of the eye (corneal edema)
- Bleeding in the front of the eye (hyphema)
- Bursting (rupture) of the capsule and loss of fluid (vitreous gel) in the eye
- Detachment of the nerve layer at the back of the eye (retinal detachment)

### **Complications that may occur sometime after surgery include:**

- Problems with glare
- Dislocated intraocular lens

- Clouding of the portion of the lens covering (capsule) that remains after surgery, often called **after cataract**. This is can be treated with laser surgery, if needed. The type of IOL may affect how likely it is to have clouding after surgery.
- Retinal detachment
- Glaucoma
- Astigmatism or strabismus
- Sagging of the upper eyelid (ptosis)

People usually need reading glasses after cataract surgery no matter which type of surgery is performed. Many will still need glasses for distance vision. Usually, vision is retested about 6 weeks after surgery and new glasses are prescribed. Your surgeon will give you instructions after your surgery.

## **Making a decision about cataract surgery**

**Cataracts: Should I Have Surgery?** is a decision tool, that along with your surgeon, can help you make a decision about having cataract surgery. The decision tool can be found on the HealthLinkBC website at: [www.healthlinkbc.ca](http://www.healthlinkbc.ca) .

## **Getting Ready For Surgery**

### **Preoperative History and Physical Exam**

You must have a Preoperative Physical with your family doctor between 3 weeks and 6 months of your surgery. If you do not have a family doctor, go to a walk-in clinic to have this done.

### **Cancellations**

Please let your surgeon's office know if you need to cancel. If you cancel 3 times, the hospital will return your request for surgery and we will need to start the process from the beginning.

### **What to do if you are not feeling well**

If you are not feeling well in the week before your surgery, please contact your surgeon's office at once if you:

- Are not feeling well
- Have a cough, cold or fever
- Develop unusual redness or discharge from your eye
- Have been in contact with someone who has an infectious disease e.g. measles, chicken pox, tuberculosis, antibiotic resistant organism (ARO)

### **Preadmission Clinic (PAC)**

PAC phones all patients within the week before surgery. They will tell you if you need any tests and how to get them done.

## **Arrange for a ride**

Before coming to hospital, please arrange to have a responsible person to:

- Bring you to and from the hospital (by car or taxi). You will not be allowed to drive yourself or take a bus.
- Stay at the clinic during your stay and for at least 24 hours after surgery, if possible.
- Help you with daily activities as needed and to follow post-op instructions.
- If you do not arrange to have a responsible person to take you home and stay with you overnight, your surgery may be postponed until you are able to make these plans.

## **Eating and drinking before surgery**

You are encouraged to eat your regular meals and fluids before coming to hospital. Please do not fast!

## **Medications**

Take all your regular medications, including diabetic medication, on the day of your surgery unless told otherwise by your surgeon.

**If you are currently using eye drops, ask your surgeon for specific directions about stopping these before surgery.**

## Supplies and eye drops

- Buy a roll of 1/2 inch wide, non allergenic medical tape to tape your eye shield in place after surgery.
- Make sure you have some plain acetaminophen (Tylenol®) at home to take if you have any discomfort after surgery.
- Make sure you have some 70% isopropyl alcohol to clean your eye shield after surgery.
- Before surgery, your surgeon will give you a prescription for preoperative eye drops. Please fill this prescription at a Pharmacy of your choice at least 4 days before surgery. Start the preoperative eye drops in the **surgical eye only** as directed by your surgeon.

## How to instill eye drops

1. Wash your hands.
2. Tilt your head back and look at the ceiling. This can be done from a sitting or lying position.
3. Using one or two fingers, gently pull down your lower eyelid to form a pocket.
4. Keeping both eyes open, gently squeeze 1 drop into the eye pocket. Do not let the bottle top touch your eye, eye lashes, fingers, or any other surface.
5. Close the eye for 30 to 60 seconds after each drop to let the drops absorb.
6. **Do not rub your eyes** after putting in the drops. Instead, gently blot the eye area with a tissue to reduce contact of the eye drop with the sensitive skin around your eyes.
7. When using 2 or more eye drops, wait about 3 minutes after instilling the first medication before instilling the next.



## **What to bring to hospital**

- BC Care Card or proof of substitute Medical Insurance Plan. If you do not have these, bring another form of ID.
- Payment and consent form if you are prescribed an uninsured specialty lens.
- A translator if you do not understand English.
- Wear comfortable clothing e.g. loose pants or skirt (no pantyhose) and a button-front top with short or loose sleeves. Wear low heeled, non-slip shoes.
- Sunglasses (wrap-around style is best) to wear home in case your eyes are sensitive to light.

## **What NOT to bring or wear**

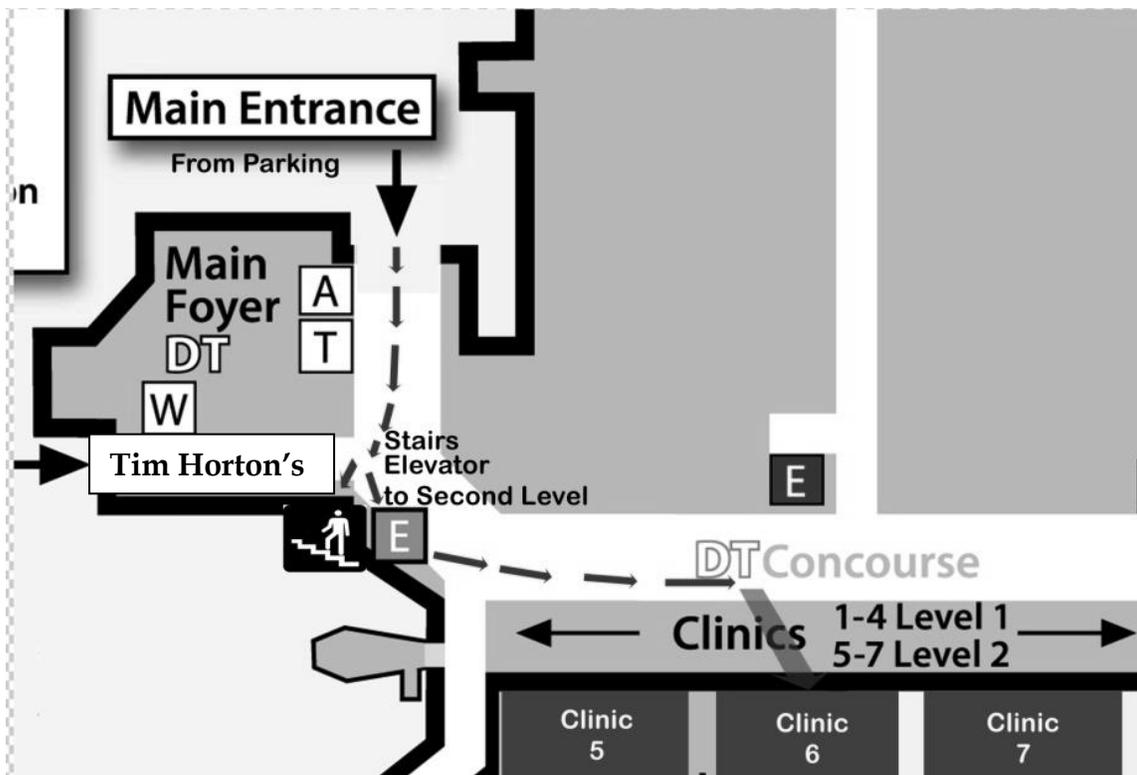
- Any jewelry or cash in excess of \$20.00.
- Personal items such as credit cards, cell phones, MP3 players.
- Wear no make-up or false eyelashes. It is okay to wear face cream.
- Acrylic nails and nail polish is okay, although it is best to avoid dark colored or metallic polish.
- Do not wear perfume, aftershave or other scented products.

## Your Hospital Stay

### Check-in procedure

Please check-in at Clinic 6 on the 2nd floor of the D&T Centre at the Royal Jubilee Hospital (RJH) **one hour before** your surgery time. Your surgeon's office will tell you what time to check-in. Please be on time!

Enter through the Main Entrance. You **do not** need to stop at the Patient Information and Admitting Desk first. Take the elevators beside Tim Horton's to the second floor and then follow the signs to Clinic 6.



## What to expect

- The surgery takes about 20 minutes, but expect to be at the hospital for 1 ½ to 2 hours in total. Sometimes the surgery may be a bit later than planned, at other times earlier.
- You will sit in a recliner chair. The nurse will ask you some questions and put eye drops in your eye. If you are nervous, you will be given medication to help you relax.
- If you are able, you will walk into and out of the operating room.
- Once in the operating room, your face will be covered with a sterile drape with a hole for your eye. You may see some unusual shapes, movements and or very brilliant colors.
- The eye lid is kept open by a small spring. This is not uncomfortable. There is no pain during the procedure.
- After surgery, you will be moved to the waiting area where the nurses will check on you.
- You are ready for discharged when you are alert and stable.
- Before you go home, your surgeon or nurse will review discharge instructions and ensure you have received a prescription for eye drops.

## Going Home

If you received IV sedation during your surgery, you may be considered impaired for up to 24 hours afterwards and therefore should plan not to:

- Make important decisions or sign documents
- Drive a car or work with machinery
- Do any dangerous activities like bike riding, swimming, or climbing ladders
- Travel alone by public transportation e.g. bus, taxi

## What to expect after cataract surgery

- Recovery varies with each patient, but most are back to normal within 24 hours.
- You may have some discomfort or a slight headache for a day or two after surgery. Taking plain acetaminophen (Tylenol®) can help.
- Occasional tearing and a slight scratchy, gritty feeling in the eye can occur in the days after surgery. This will pass.
- The eye may appear red or the eyelid swollen for a few days.
- Vision may be blurry and will improve over the next few days.
- Your eyes may be sensitive to light for weeks, or months, after surgery. Sunglasses may be worn if you find them helpful.
- Your eye wound is healing, but it will not be firm enough to stand much pressure for 6 weeks.

- Stitches are generally not used. However, if you have stitches, they will be removed in the office by your surgeon at one of your postop visits.
- It can take up to 3 weeks for the eye to fully recover and reach your best vision.
- Some patients will need some amount of correction with glasses. You will be retested after surgery and a new prescription will be given if needed, usually 6-8 weeks after surgery.

## Care at home

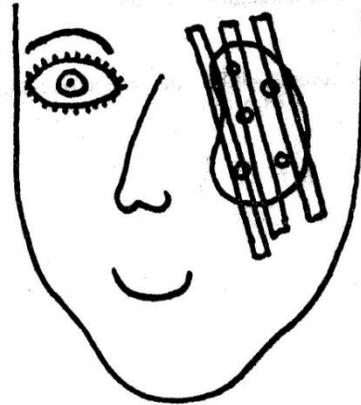
### Bathing

- Clean your eyelid edges at least twice a day with a moist, clean face cloth while avoiding pressure on the upper eye lid.
- You may shower/tub bath and wash your hair the day after surgery. Make sure you do not get soap or water in the eye for **at least 1 week**.
- Do not wear eye make-up for at least 1 week.
- Do not use any fibrous materials e.g. cotton balls or make-up remover pads near your eye or under the eye shield.

### Care of your eye

- Wear your protective eye shield when sleeping/lying down for at least 1 week. This will help protect it from accidental bumps or scratches.

- Clean your eye shield once a day with 70% isopropyl alcohol and allow to air dry before putting it back on.
- Wear your old glasses if you need to. You may find vision is better without them in the operated eye.
- Cut 2 or 3 eight inch strips of medical tape. Hold the eye shield over your eye. Attach the tape to your forehead, over the shield and tape it to your cheek (see diagram).



## Activity

- You may watch TV, read or go for walks if you feel up to it.
- Avoid saunas and hot tubs for at least 1 week.
- Avoid sleeping on the operated side for at least 2 weeks.
- Avoid straining or lifting anything over 10 lbs. (4.5 kg) for at least 2 weeks or until your surgeon tells you it is safe to do so.
- Avoid swimming or submerging your head in water for at least 3 weeks.
- Do not participate in very strenuous activities or rough contact sports for **at least 4 weeks** or until your surgeon tells you it is safe to do so.
- Avoid rubbing or bumping your eye for at least 6 weeks.

- Resume sexual activity once you feel comfortable to do so.
- Do not drive until your surgeon tells you it is okay to do so.

## **Healthy eating**

- You may resume your regular diet after surgery.

## **Going to the bathroom**

- Avoid constipation and forceful straining during voiding and bowel movements.
- Increasing fluids, activity, and fibre in the diet will decrease the chance of constipation.
- Sometimes a mild laxative may be needed. Ask your pharmacist or doctor to recommend one.

## **Medications**

- Restart all the regular medications you took before surgery unless your doctor tells you not to.
- Fill your prescription for postoperative eye drops and take them as directed by your surgeon.
- You may use artificial tears e.g. Refresh™, Genteal™ to reduce feelings of scratchiness. Make sure to wait 30 minutes after using your prescription eye drops before using artificial tears.

## **Call your surgeon if you have...**

- Eye sight that is getting worse.
- Increasing pain or ache in the eye
- Increasing redness.
- Swelling around the eye.
- Any discharge from the eye.
- Any new floaters, flashes of light, or changes in your field of vision.

**If you cannot reach your surgeon go to a Medical Clinic or the Emergency Department.**

## **For non-emergency health information and services:**

**HealthLinkBC** -Health advice you can trust 24/7.

Tel: 8.1.1 from anywhere in BC.

Tel: 7.1.1 for deaf and hearing-impaired assistance (TTY)

Web: [www.HealthLinkBC.ca](http://www.HealthLinkBC.ca)

## **Follow-up appointments**

Follow your surgeon's instructions for follow-up appointments.

**Please bring these instructions and all your eye drops to every follow-up appointment.**

## Notes

## Tell us what you think!

After reading **Before, During and After your Cataract Surgery** please respond to the following statements. Your answers and comments will help us improve the information.

*Circle one number for each statement:*                      **strongly disagree**                      **strongly agree**

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**I read all of the information provided.**                      1      2      3      4      5  
Comments

---

**The information is easy to read.**                      1      2      3      4      5  
Comments

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**The information is easy to understand.**                      1      2      3      4      5  
Comments

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**Reading this information helped me  
prepare for and recover from my surgery.**                      1      2      3      4      5  
Comments

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**The information answered my questions.**                      1      2      3      4      5  
Comments

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**I would recommend this information to  
other patients.**                      1      2      3      4      5  
Comments

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**I prefer to have this information in:**

\_\_\_\_\_ A book just like this one

\_\_\_\_\_ Separate handouts on each topic that I need

**I would have liked MORE information about:**

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**I would have liked LESS information about:**

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**What changes would you make in this book to make it better or please add other comments:**

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**I am:**

a patient       a family member

**Thank you!**

**Please mail this evaluation form to:**

Professional Practice  
Peninsula Health Unit  
#162- 2170 Mt. Newton X Rd.  
Victoria, BC, V8M 2B2



