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Vitreoretinal Fellowship

- Sankara Nethralaya Madras • National Nagoya Hospital Japan
- Professor - K J Somaiya Hospital & Medical College

CONSULTING EYE SURGEON

VITREORETINAL SURGERY & LASER SPECIALIST

BOMBAY HOSPITAL & RESEARCH CENTRE

MUMBAI RETINA CENTRE

CONSULTING ROOM

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Time 4 30 pm to 8 30 pm Mon-Sat

OPERATION COMPLEX

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Cataract Surgery

Phacoemulsification with IOL

CATARACT SURGERY - PATIENT INFORMATION

DR. AJAY DUDANI

Mumbai Retina Centre

[REDACTED]

Cataract is not unusual : Cataract formation is frequently a part of the eye's aging process. But, in most cases, vision can be restored modern, one-day surgery.

Today vision is restored to more than 6 million patients around the world each year through a safe microsurgical procedure to remove the cataract. The procedure is usually performed with a minimum of discomfort and inconvenience, and in most cases the patient returns home very soon after the surgery.

WHAT IS CATARACT ?

Inside your eye is a lens, a lens much like the lens of a camera, located behind the iris. The lens focuses incoming light rays through the pupil and onto the retina at the back of the eye. This lens must remain clear for light to pass through and reach the retina. With age, the lens of the eye may become cloudy or opaque, light is unable to pass through and the vision becomes blurred. This cloudy lens is called as Cataract. Contrary to popular belief, cataract is not a growth or a film over the eye. It is a cloudiness of the natural lens inside the eye.

WHY DOES CATARACT FORM ?

By far, the most common cause of cataract is the deterioration of the normal structure within the lens of the eye of an aging person. Other possible causes are injuries or disease such as diabetes, kidney diseases, metabolic disorders and birth defect.

HOW DOES IT PROGRESS ?

Depending on the nature of the cataract, it may develop rapidly over a few months or slowly over several years. In many cases, the other eye will also develop a cataract. As the cataract progresses, you will notice some deterioration in your ability to see things clearly from a distance then you may have difficulty with glare or reading. In the early stage glasses usually improve your vision, however once the cataract advances, changing glasses will not improve your vision. There are no medications, eye drops or diets that can cure or prevent cataracts in reality.

WHEN DO I GO FOR CATARACT SURGERY?

When your vision decreases such that you can no longer perform your daily activities, the cloudy lens can be easily removed and replaced with a new clear, artificial lens to help restore your vision.

The best time to remove your cataract is when the impairment of your vision handicaps your lifestyle. If you depend heavily on your eyes for your day to day activities, you may need your cataract removed much earlier than someone with less need for sharp vision. In most cases, delay will have no adverse effects on general health. However, much your cataract affects your lifestyle, the right person to advise you, with regard to surgery is your doctor, Dr. Ajay Dudani.

BEFORE SURGERY

Prior surgery some routine tests will be performed to determine your general health. **Dr. Ajay Dudani**

will decide exact nature of your pre-operative schedule. The most important tests that should be done pertaining to your eyes are:

1. A-SCAN -IOL MASTER

Ultrasonography procedure to determine the power of artificial lens to be inserted in your eye by Laser Technique.

Shortly before your surgery, you will probably receive medication to help you relax and some drops will be put into your eyes

AT TIME OF SURGERY

Once you are in the operating room, the areas around your eye will be thoroughly cleaned to achieve disinfection. Then sterile drapes will be placed around your head and face, exposing only the eye to be operated upon. In most cases only local anaesthetic is necessary.

With the aid of a special microscope designed for eye surgery, a small incision is made on the cornea itself. A second incision is made on the surface of the capsular bag that holds lens with the cataract or cataractous lens in place. The cataractous lens is removed from this bag and is replaced with a plastic artificial lens.

WHY IOL ?

IOL or intra ocular lens - It is a method of compensating for the loss of the lens due to cataract surgery. The IOL is implanted in the eye at the time of surgery. Magnification is the closest to normal that can be obtained and IOL gives full peripheral vision and good depth perception may be retained. This lens is left there permanently and does not require to be removed or placed.

WHICH IOL ?

Intra Ocular Lenses can be placed anterior or posteriorly in the eye. Posteriorly placed lenses are the safest. They can be either hard or soft lenses. Soft lenses can be either injectable or foldable. IOLs can be unifocal, multifocal or accommodative

The type of lens to be used for you shall be the one, which seems the best for your particular situation, to be discussed with doctor prior to Surgery.

SURGICAL TECHNIQUES

There are several techniques generally used for removing cataracts, DR. Ajay Daduni will choose the one that is right for you.

WHAT IS PHACOEMULSIFICATION ? IS IT A LASER SURGERY ?

This is the most recent and most commonly used technique in the western world. In this method a tiny ultrasonic instrument is inserted through a very small incision made on or just outside the cornea. This instrument uses ultrasound vibrations to break the cataractous lens into fine particles that are gently sucked out of the eye. The thin capsular bag of the original lens remains for protection and to anchor the new lens implant permanently. Commonly people call it a "Laser Surgery".

WHICH ANAESTHESIA ?

Most cataract surgeries are performed either under surface anaesthesia, sometimes under local and rarely under GA all over the world. We have devised a combination of surface and local anaesthesia so that your surgery is very comfortable and painless at the same time a high safety level is achieved. Whatever may be your anaesthesia there will always be an attending stand by anaesthetist for your safety and comfort.

IS IT OUT PATIENT OR INDOOR HOSPITAL SURGERY?

Out-Patient "Walk-Away" Surgery.

This is usually performed at 7th hour, surgical centre 7th is scientifically planned and designed, equipped for this type of surgery and the staff has been trained to follow a strict protocol for your safety and to achieve excellent results.

ARE THERE ANY SUTURES IN MY EYE ?

In most cases no sutures are placed as placed as self sealing micro wound is created with special diamond blades.

HOW LONG MY OPERATION WILL TAKE ?

Operating time varies from surgeon to surgeon and also from patient but our average operating time is 5 to 15 minutes.

IS MY CATARACT BEING REMOVED WITH LASER ?

Most people commonly call it a laser surgery, but actually it is ultrasound called

ARE ALL PHACOEMULSIFICATION MACHINES THE SAME ?

No, as like cars it can be Maruti or a Mercedes technically most advanced in the world and the most Rolls of Phaco machines. Naturally there is a difference in Rolls though both achieve the same goal.

WILL I GET PAIN DURING SURGERY?

NO, there will not be any pain during or after sensation. During surgery you will be wide awake and Dr. explaining to you the operation as it progress. You will hear the in your eye during surgery. Postoperative period is normally v little TV or even read for some time.

You will have to keep looking at light without blinking or keep changing during the surgery.

WHEN CAN I GO TO WORK?

You can start working within 1 -3 days, if it is not strenuous and outdoor work. But it is safe to resume work after about a week. You can start your morning walks within 2-3 days avoid strenuous exercise.

WILL MY EYE BE COVERED AFTER OPERATION?

It is not absolutely necessary to cover your eye after operation, you can wear a pair of dark glasses immediately after the surgery but it is more safe to cover your operated eye for few hours a day after surgery taking into consideration the pollution in our city/ region and to avoid accidental injuries.

WHAT POSTOPERATIVE CARE SHOULD I TAKE?

You will be sent home with medication and Instructions. Use a plastic shield over your operated eye (to be worn during sleep for a four-week period). Keep it in place by using micropore tape. When you are not using the plastic shield, wear your regular glasses or an inexpensive pair of sunglasses. These glasses are worn for protection of your eye, not to help you see better.

A six-week recuperation period is normally adequate. After having one of the most delicate microsurgical operations in modern medicine you enter a short period of convalescence. Advanced techniques are used during your operation so that you will be spared the ordeal that cataract patients, once had to endure. However, some care is necessary to ensure proper healing. It is sometimes difficult to persuade a healthy active person that he or she is a postoperative patient with physical limitations. You must accept this fact so that complications can be avoided.

Complications are usually much easier to avoid than to treat. You must never forget that you are dealing the most delicate organ of the body.

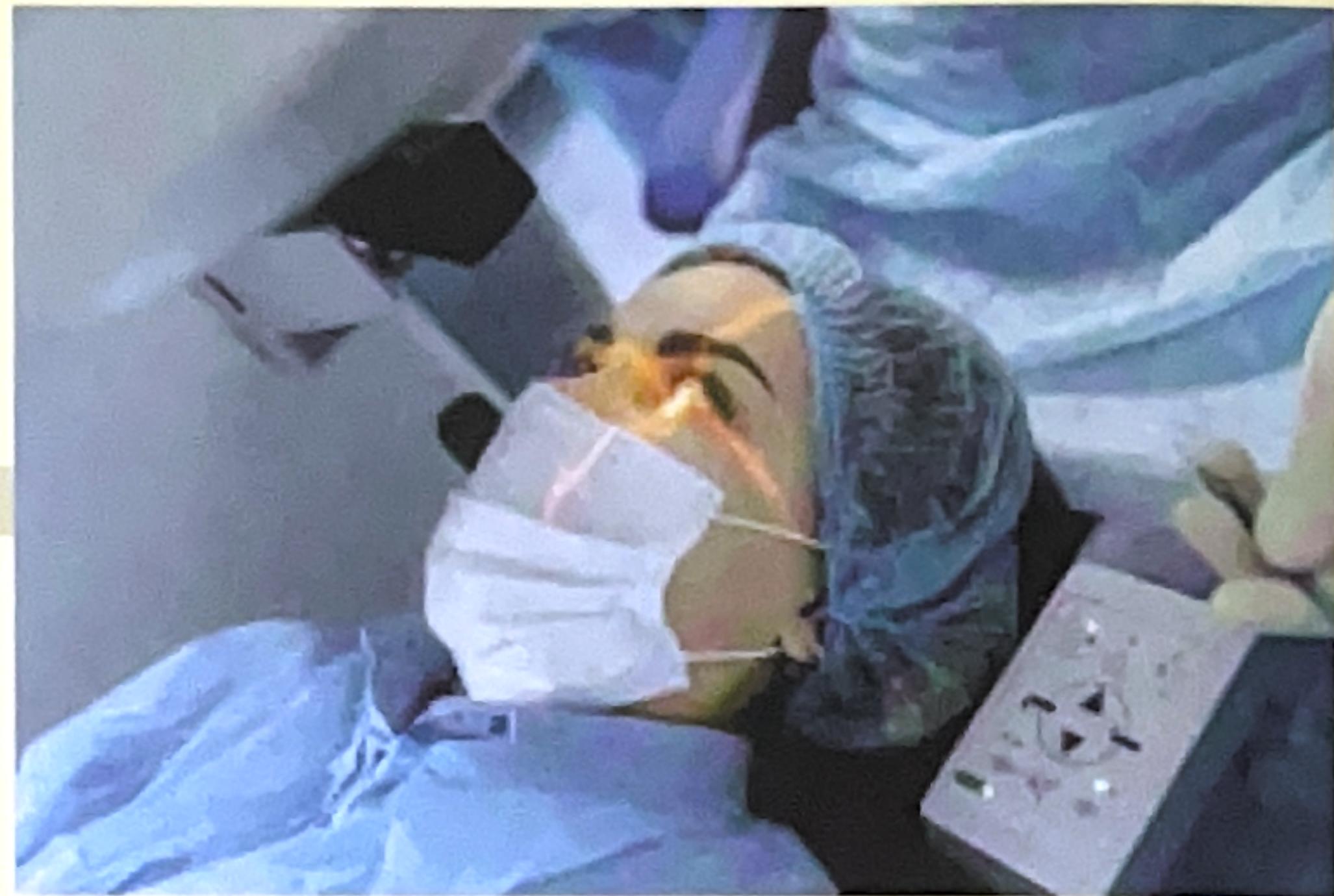
After surgery, you should be able to resume most activities almost immediately. Avoid lifting heavy weights and strenuous exercises or violent activities. You will be given an eye shield to wear at night for the first few weeks and eye drops to use daily, according to instructions. Vision usually improves within a few hours to days but complete healing of the eye takes several months. Vision continues to improve as the eye heals. Final outcome of the surgery varies from person to person and depends on several factors.

If you have any questions about the medications and how they are to be used, be sure to get a clear understanding before you leave the hospital. The medication routine is most important. You must faithfully use the drops exactly as directed. Medical follow up is very important during the first few weeks after your surgery. regardless of the shortness of your hospitalisation, the comfort of your eye or the promptness of visual restoration For this reason, you will be given appointment for a series of post operative examinations.

It usually requires approximately six to eight weeks for the eye to heal sufficiently to prescribe the first pair of glasses. It is not unusual for corrective lenses to need a power change sometime during the post-operative year as the eye completes its healing. You may refer to the do and don't list below for the four-six week period following surgery:

YOU MAY

- Do light house work
- Watch TV Read
- Get plenty of rest
- Drive when vision permits
- Ride in automobiles, buses, planes
- Wash your hair in one week with care
- Return to light work in one week



YOU MAY NOT

- Lift over 10-25 lbs.
- Lean your head way down below your waist
- Rub or poke your eye
- Do vigorous exercise
- Swim

ARE THERE ANY COMPLICATIONS ?

Regardless of the procedure used, there always exists the possibility of complications. These are relatively rare and when they do occur, the condition can usually be corrected. However unexpected serious complications such as infection or haemorrhage can occur and cause a permanent decrease in vision. Fortunately, these serious complications are rare, but it is necessary that you know the possibilities. At some time prior to the scheduled surgery, you will be asked to sign a medical informed consent document for your operation indicating that you understand your diagnosis, the surgical procedures which you are about to undergo and the possibility of complications. If you do not understand, please ask your doctor to explain further anything which you might have questions.

IN CONCLUSION

Cataract surgery has become a relatively routine and safe operation performed on hundreds of thousands of people each year. Recent advances in microsurgical techniques and new developments in intraocular lenses offer encouraging options to the cataract sufferer and favour a successful operation for you and restoration of your vision.

SPECIAL NOTE

If you experience a sudden decrease in vision instead of gradual improvement, or if you experience extreme pain in the operated eye, or anything unusual please contact this office.

