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## Cataract

Your eye works a lot like a camera. Light rays focus through your lens onto the retina, a layer of light-sensitive cells at the back of the eye. Similar to photographic film, the retina allows the image to be "seen" by the brain.

Over time, the lens of our eye can become cloudy, preventing light rays from passing clearly through the lens. The loss of transparency may be so mild that vision is barely affected, or it can be so severe that no shapes or movements are seen--only light and dark. When the lens becomes cloudy enough to obstruct vision to any significant degree, it is called a **cataract**. Eyeglasses or contact lenses can usually correct slight refractive errors caused by early cataracts, but they cannot sharpen your vision if a severe cataract is present.

The most common cause of cataract is aging. Other causes include trauma, medications such as steroids, systemic diseases such as diabetes, and prolonged exposure to ultraviolet light. Occasionally, babies are born with a cataract.

Cataracts typically develop slowly and progressively, causing a gradual and painless decrease in distance or near vision. Other changes you might experience include blurry vision; glare, particularly at night; frequent changes in your eyeglass prescription; a decrease in color intensity; a yellowing of images; and in rare cases, double vision. There is no cure for cataracts except to have them surgically removed.

With a routine, outpatient surgical procedure, an ophthalmologist (Eye M.D.) can remove the cataract, making either a small incision (phacoemulsification) or a larger incision (extracapsular extraction). Usually, a synthetic intraocular lens (IOL) is inserted at the time of cataract extraction to replace the focusing power of the natural lens. IOLs can be monovision (fixed-focus for a preset distance) or multifocal, which allows focused vision at many distances. The time to have cataract surgery is when the cataract is affecting your vision enough to interfere with your normal lifestyle.

Cataract surgery is a very successful operation. One and a half million people have this procedure every year in the United States, and 95% have a successful result. As with any surgical procedure, complications can occur during or after surgery, and some are severe enough to limit vision. But in most cases, vision, as well as quality of life, improves.

A posterior capsulotomy is a laser procedure that sometimes is necessary after cataract surgery.

During cataract surgery, part of the front (anterior) capsule of the eye's natural lens is removed to gain access to and remove the lens. The clear, back (posterior) capsule remains intact and supports an intraocular lens (IOL), a plastic or silicone disc that is implanted in the eye and replaces the natural lens. As long as that capsule stays clear, you will experience good vision. But in 10% to 30% of cases, the posterior capsule loses its clarity. When this happens, the ophthalmologist (Eye M.D.) can create an opening in the capsule using a laser in order to restore normal vision. This procedure is called a posterior capsulotomy.

The posterior capsulotomy is painless and takes approximately five minutes.

Potential but very rare complications following laser posterior capsulotomy are increased intraocular pressure and retinal detachment.