



JUNE IS
C A T A R A C T
A W A R E N E S S M O N T H

ARTICLE WRITTEN BY STEPHANIE MARCHACK

June is Cataract Awareness Month, and in honor of this, we would like to answer some of the most frequently asked questions about cataracts, and also clear up some misconceptions about this common eye condition.

First of all, what is a cataract?

Cataracts are a painless clouding of the natural lens inside the eye, which results in prescription changes, blurry vision, and glare.

It cannot be seen by the naked eye, only on examination by an eye care professional during a routine eye test.

Cataracts are mainly caused by the natural ageing process, which unfortunately means that it's unavoidable! However, there are other causes that can contribute to the acceleration of this condition - UV exposure, diabetes, smoking, steroid medication, and trauma are all risk factors for cataracts.

Cataracts cannot be prevented, but there are some precautions that can be taken to slow down the progress once it is detected.

As one of the main risk factors is UV exposure, UV protection is one of the simplest to do.

Photochromic lenses (ie: Transitions®) or sunglasses are an easy way to incorporate this into your regular eyewear, and you can even add a wide-brimmed hat for extra protection.

Lifestyle changes, such as reducing or stopping smoking, and keeping diabetes well-controlled, are also good measures to take for reducing cataracts progression.

If cataracts cannot be prevented, how is it treated?

At the moment, the only way to treat a cataract is to have it surgically removed, and replaced with an artificial lens, which is chosen for you based on your prescription and the dimensions of your eye.

This may sound drastic, but cataract surgery is one of the most common surgeries done in the developed world, with a 97% success rate.

The entire procedure takes 15-30 minutes, and post-surgery, your vision will begin to improve within a few days.

Typically, you will have a follow-up with your ophthalmologist a day or two after your surgery, then the following week, and then again after about a month to monitor healing, but this may vary among practitioners.

Once your ophthalmologist discharges you from their care, you will need to return to your optometrist for an eye exam to see if any spectacles are needed.

If I have cataracts, when do I need to have surgery?

There are a few factors to be considered when referring a patient for cataracts surgery. This includes the size of cataract, how it is affecting the patient's vision, and how it affects their lifestyle.

For example, the cataract could be small in size, but the patient is experiencing a reduced vision, and their job is affected. In cases like these, removal would be advised to improve their lifestyle.

On the other hand, cataracts may be large in size, but the patient isn't bothered as they are not too active. They can manage their daily tasks, and the vision is acceptable by our standards. In cases like these, monitoring on an annual basis is perfectly safe.

Having said that, it is important to note that the denser a cataract gets, the more difficult the surgery can be, as the cataract itself becomes physically harder.

In short, cataracts will affect everyone as it is a natural part of ageing. However, it is one of the most easily curable eye conditions, with vision being fully restored once the surgery is successful and there is no other ocular pathology present.

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