# What should I do after surgery?

The eye needs time to heal after any surgery and your vision and any eye swelling may take a few days to improve. Immediately after your operation, you will be given eye drops. It is extremely important to follow the instructions and complete the course of drops. You can usually go back to your everyday activities as soon as you feel able. There are no dietary restrictions. You can read and watch TV as normal. Here are some precautions to take for the first 1 to 2 weeks:

### **DO NOT**

- rub your eye. Wear an eye shield whilst sleeping to avoid accidentally rubbing your eye.
- go swimming to avoid contact with dirty water.
- play contact sports, strain or lift heavy objects.
- wear eye make-up.
- wash your hair and get soapy water in your eyes. Pamper yourself in this time and get a hairdresser to do it for you instead!

Take extra care outdoors by wearing a pair of wrap-around sunglasses for protection.



# When should I get new spectacles?

The lens that is implanted in your eye (IOL) is usually designed to give you clear distance vision without needing glasses. Sometimes you will need a pair of distance glasses to fine-tune your focus for sharp vision. The IOL is not always able to provide in-focus near vision, therefore, some people will require reading glasses after surgery. This is usually a different pair to what you had before the operation. In most cases, an eye test called a refraction, will be done 4 to 6 weeks post-operatively to assess your vision. If you had a multifocal IOL implanted, you may not require glasses as this can provide clear vision in the distance and upclose most of the time.

## **Contact us**

## **OasisEye Specialists**



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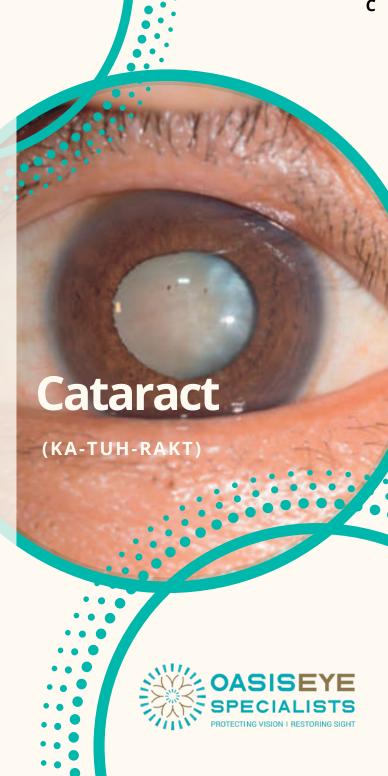


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## What is a cataract?

Cataracts are common and occur naturally as we get older. It forms when the lens inside our eye changes with age and becomes less transparent and more cloudy, much like how old glass gets cloudy. Over time, a cataract will progressively get worse, gradually making your vision more blurred.

### What causes a cataract?

- Age
- Diabetes
- Trauma (impact to the eye or head)
- Certain medications (such as steroids)
- Eye surgery for other conditions
- Other possible causes: UV exposure, smoking & vitamin malnutrition

# What are the signs and symptoms?

- Cloudy, fuzzy, foggy or filmy vision
- Alteration in appearance of colours
- Difficulty driving at night
- Severe glare from lights or the sun
- Frequent changes in your spectacle prescription
- Seeing double (even with one eye closed)
- Better near vision for a while

### What treatments are available?

Presently, the only way to treat a cataract is with surgery. This usually takes 10 to 20 minutes and involves 2 main steps.

Step 1: The surgeon uses a tiny ultrasonic probe to soften the lens and remove the cataract, leaving behind the lens capsule (the thin outer bag).

Step 2: A new, clear artificial lens is inserted into your eye immediately after Step 1. This artificial lens, called an intraocular lens (IOL), is usually placed within the lens capsule inside your eye. Your doctor will explain the selection of which IOL would best suit your needs and wants.



Contact your doctor **urgently** if you experience any of the following after surgery:

- Severe pain
- Increasing redness, discharge or blurring of vision in the days or weeks after surgery
- Worsening vision especially if you find that your vision initially improves after surgery, but then starts to decline.



No surgery is ever risk-free. If you have cataracts in both eyes, most surgeons would remove one at a time to allow the first eye to heal before operating on the second eye, except in special circumstances. If the eye that has a cataract is your only working eye, you and your doctor should weigh the risks and benefits of surgery carefully. Some of the risks of cataract surgery include (but are not limited to) the following:

### **Common**

- Posterior capsular opacification (PCO) In some people, the lens capsule will become cloudy within 2 years after surgery, which can be corrected by a simple procedure.
- Glaucoma (high pressure in the eye; ± 5%)
- Macular oedema

#### Rare

- Bleeding inside the eye (± 1%)
- Drooping eyelid (± 1%)
- Swelling or clouding of the cornea (± 1%)
- Artificial lens damage or dislocation (± 1%)
- Retinal detachment (± 1%)

### **Very Rare but Severe**

- Severe infection (±0.1%)
- Blindness (< 0.1%)
- Loss of either eye (< 0.01%)

