



OPHTHALMOLOGY REFERRALS

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Your pet has a Cataract

What is a cataract?

A cataract is a clouding of the lens in the eye such that the passage of light is reduced or blocked. In the early stages this causes a blurring of vision but can progress to total blindness as light is prevented from reaching the retina at the back of the eye. Some cataracts do not progress however and do not seriously affect vision.

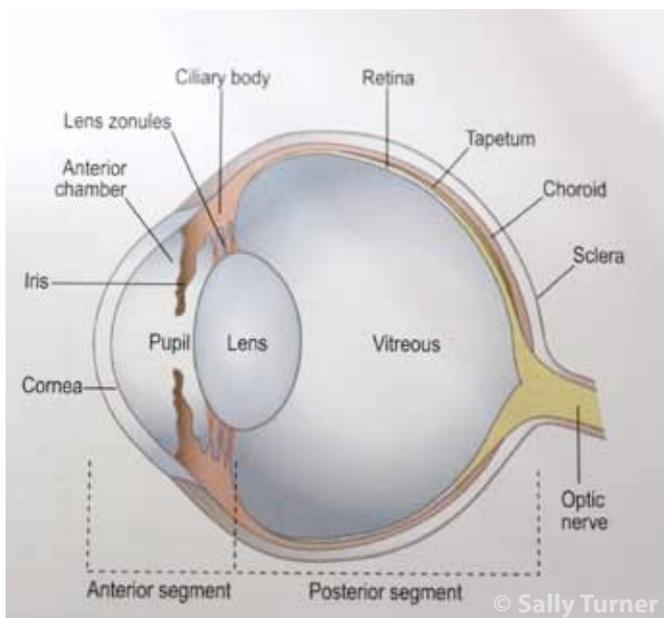
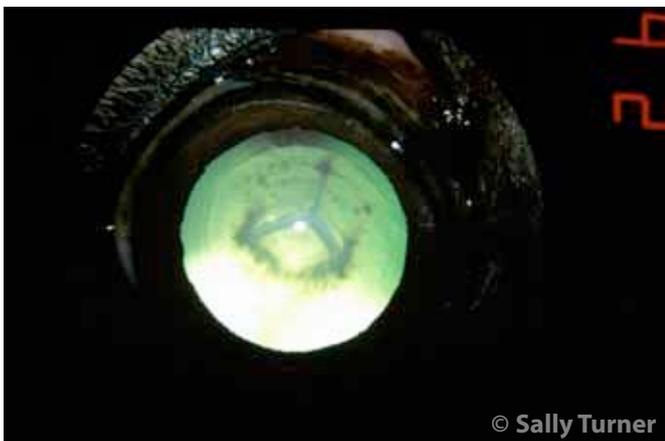


Diagram showing cross section of the eye with the position of the lens

What has caused the cataract?

There are many causes of cataracts in animals, particularly dogs. They can be born with cloudy lenses (congenital) or develop them later in life from trauma, inflammation, or metabolic problems such as diabetes mellitus. They can also be age related. However the most common cause in dogs is inherited cataracts – certain pedigree dogs are at a high risk – Golden and Labrador retrievers, Staffordshire bull terriers, miniature schnauzers, and various spaniel breeds for example.



Immature cataract in a Labrador – inherited type



Blinding cataract due to diabetes mellitus

Is there any treatment?

Surgical removal is the only treatment for cataracts. Sometimes patients are not suitable for this – for example due to underlying retinal disease – or because their temperament makes medication and examinations difficult. In addition to a thorough ophthalmic examination further tests (such as ultrasound and electroretinography (electrical tests of the retina)) might be required before deciding if your pet is suitable. If the cataract is only partial and not affecting vision significantly your pet might be monitored and surgery only advised should the cataract progress.

The aim of cataract surgery is to remove the opaque lens and thus restore vision. Specialist general anaesthesia is required for the procedure. An incision is made into the eye and the cataract is removed, either whole (extracapsular extraction) or more commonly using special ultrasound equipment to break-up the lens prior to removal (phacoemulsification). This has the advantage of a smaller wound and can be performed on less dense cataracts. Each cataract must be assessed individually to determine the best method for the patient. Many patients benefit from the placement of an artificial lens in the eye (intraocular lens) to enhance close vision – distant vision and movement detection are good regardless of whether the cataract has been replaced by a clear intraocular lens or the eye has been left with no lens (aphakic).



Appearance 3 weeks after surgery showing intraocular lens

How good is sight after surgery?

Cataract surgery aims to restore vision or prevent total blindness from developing. Animals gain guidance vision - this means that they can lead virtually normal lives, but may have difficulty with close or clear objects (especially those in which intraocular lenses have not been placed). Some patients seem to see immediately after surgery, but in some it can take several days before an improvement in vision is noted in others. It is unlikely that vision will be quite as good as it was before the cataracts developed but most patients do very well.

Do you operate on both eyes at once?

It depends on the individual. In many circumstances both eyes can undergo surgery at the same time and this reduces the amount of aftercare and rechecks required compared to doing one eye followed by the second eye at a later date. It is also only one anaesthetic for the patient. Some patients only require surgery on one eye, or only one eye might be suitable for operating on.

What is the success rate of surgery?

Good guidance vision is achieved in approximately 85% - 90% patients. The success rate is highest in immature types of cataract and declines in advanced or hypermature cataracts. Long term the success rate can lower further as complications develop months to years after the surgery.

Are there any complications?

Yes – there can be. If they occur they are usually mild and treatable but some patients do not see following surgery. This can be due to various things including retinal disease which was undetected prior to surgery, uncontrolled inflammation following surgery, infections, retinal detachments or glaucoma. Some of these complications can be treated but some result in permanent blindness. The risk of retinal detachments is highest in patients with advanced (hypermature) cataracts. The risk of glaucoma is present for several years after the surgery – initially things can go very well but the patient could then develop problems 2 -3 year later. Very severe complications such as infections within the eye can even result in the eye requiring removal.

How long will my pet stay in the surgery?

Patients spend the night before surgery in the hospital since they have to have several different types of drops to get the eye ready for surgery. Sometimes the patient is sent home on the same day of surgery, while some remain hospitalised for a day or two. Again it depends on the individual.

Is there any post-operative care?

Yes – the eye is very delicate after surgery and it is vital that the patient does not rub the eye, and is kept as quiet as possible. For dogs this means lead exercise only for several weeks following surgery. Cats must be kept indoors with a litter tray. A lot of medication is required. Usually this entails several different types of drops or ointment together with tablets. The drops require frequent application for the first few weeks before being gradually reduced. This is very time consuming initially and owners must be able to follow the treatment regime to provide the best chance of success following surgery. The pet is normally on but some form of medication for 3-4 months after the operation. Several check ups will be required with the ophthalmologist to monitor the progress of the patient after the surgery.