

Cataracts:

What Every Patient Needs to Know



Dr. Jaheed Khan FRCOphth

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The authors are both qualified surgeons and Mr. Jaheed Khan has particular expertise in eye and cataract surgery.

Nevertheless this eBook is not intended to replace the need for a one-on-one consultation with and examination by a qualified and experienced ophthalmologist. All advice given is intended for general guidance only.

If you have any disturbance in your vision or eyesight you are advised to seek medically qualified advice without delay.

Emergency medical care can be obtained through your GP or local Accident and Emergency Department.

Mr Jaheed Khan can is also very happy to see patients both NHS and Privately.

His contact details for patients who wish to consult him privately are overleaf.

NHS patients will need to see their GP to be referred to him at Moorfields Hospital.

How to Contact Mr. Jaheed Khan

Privately I practice at both Moorfields and at Harley Street – either telephone or send my secretary an email. A GP referral is not necessary for Private Patients.

Moorfields Eye Hospital



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Forward



Mr. Jaheed Kahn,
Consultant Eye Surgeon.

My name is Jaheed Khan, and I am an eye surgeon at the world-famous Moorfields Eye Hospital in London.

I have almost twenty years' experience as a doctor and fifteen years' experience as an eye surgeon. In that time if there's one thing I've learned it's how vulnerable we all feel when we are unwell.

And we feel no more vulnerable when the problem we have is with our eyes.

Hospitals can be frightening places, and talking to doctors is not always easy.

Which is why I've written this eBook. It is the culmination of all those years of experience in looking after patients and their eye problems.

In it I cover all the basics: what cataracts are, how they cause problems with your vision, and how they are treated. There's no jargon, only straightforward, simple, clear explanation and advice,

and I also answer the questions I get most commonly asked in my clinics and wards in the hospital where I work every day.

If you have any feedback or want to ask any questions about anything in this eBook, simply drop me an email via my secretary at

secretary@clinicalondon.co.uk

I would be delighted to hear from you and will personally answer your query.

With Best Wishes,

Jaheed Khan
Consultant Ophthalmologist.

Moorfields Eye Hospital,
London.

May 2014.

What Patients and Staff Say About Mr. Jaheed Khan

“Mr Khan is not only an outstanding surgeon but more importantly a great communicator and caring Doctor. As a GP and commissioner I have total faith when referring my patients to Mr Khan, that they will receive the best care available from a surgeon who constantly strives for excellence and treats them as individuals. I would not hesitate to recommend him to both my private and NHS patients. He is a real asset to both Moorfields and Hinchingsbrook Hospitals.”

“Mr Khan is a brilliant doctor and was a pleasure to work with.”

“Jaheed Khan is a very competent Ophthalmologist with great patient care skills and the unique ability to explain complex condition in a manner comprehensible to the patient.”

“Just keep up the good work Dr Khan. My wife, who accompanied me, and I were both very impressed by the care and consideration shown by the whole team when I had surgery. I just hope they haven't lost the knack by the time I get my other eye fixed. Joking apart the care of this team has made it a wonderful experience for me.”

“A knowledgeable and trustworthy colleague with extensive experience in the diagnosis and treatment of retinal diseases. Up to date with the latest research and best practice, he is able to integrate this knowledge into the care of patients with ophthalmic conditions. I would have no hesitation in recommending him to friends and family.”

“Mr Jaheed Khan is a thorough, compassionate and conscientious doctor. He listens to his patients and treats them with respect and care. He provides excellent medical care, both in clinic and in the operating theatre. I would highly recommend him.”

“Mr Khan is an excellent colleague to work with. He is always approachable and willing to help. He has an outstanding level of knowledge concerning eye disease and he is more than happy to offer his opinion whenever needed. He is trustworthy and respects both patients and colleagues. I have no hesitation to state that he is one of the best colleagues I worked with.”

“I always enjoy working with Mr Khan, he is friendly, confident and approachable. He always maintains a high standard of professionalism

in sometimes testing situations. Mr Khan is always willing to answer questions related to Ophthalmology that i may have and explains things in a manner in which myself and other colleagues understand. He is a team player within our department, many of his patients comment on his fantastic abilities.”

What Exactly ARE Cataracts?

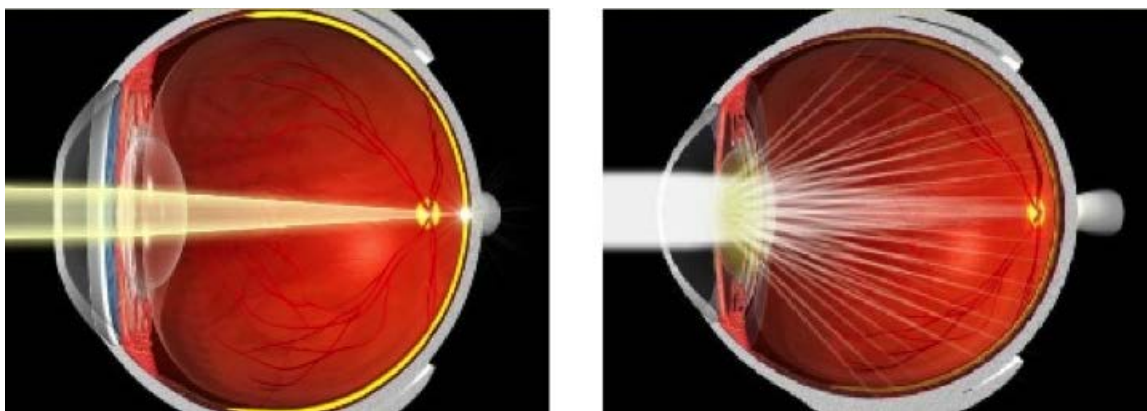
I guess a sensible starting point is to assume that if you are reading this eBook you either have been told you have cataracts already, or you know someone close to you who has cataracts and want to know more; or perhaps you know a little about the condition and think you may have them yourself?

As you probably have heard before the eye is similar in many ways to a camera.

Light comes in the front, passes through a lens where it is focused to a sharp image on the light sensitive layer at the back. In the camera this layer is either a piece of film or an electronic sensor in a modern digital camera. In the eye this layer is called the "Retina".

As you might imagine, the lens has to be perfectly clear to allow light to pass through it. But when people have cataracts, the lens is no longer perfectly clear but gradually becomes milky white in colour.

This means that the light is no longer focused to a sharp image on the back of the eye but become blurred as some of the light is scattered.



The diagrams above show what happens to the light coming into the eye when the lens becomes cloudy.

A cataract is simply a cloudy lens in the eye.



The pictures above compare the images someone without a cataract might see on the left with the image a person with cataracts would see on the right.

What are the Symptoms of Cataracts?

From the above explanation you can see now why cataracts cause some of the symptoms that they do:

In my clinics, patients with cataracts often complain of the following problems with their vision:

- Difficulty in seeing – particularly when driving at night
- “Halos” around bright lights such as street lights
- A “washed out” look to colours
- Getting dazzled by the lights of oncoming traffic
- Eyes getting tired more easily
- Constantly feeling as if you need new glasses

It is important to remember though that not all people with cataracts have these symptoms. And not all people with these symptoms have cataracts, as other conditions of the eye can cause similar problems. Some of these other conditions can be serious, which is why it is so important to see a specialist if you have noticed any problems with your eyes.

The other thing is that cataracts do not simply appear overnight. All cataracts, however they are caused, grow slowly and so the symptoms they cause appear only slowly too. In fact people often don't realise they have cataracts at all. They only find out when they get their eyes checked at an optician because they think that they need new glasses.

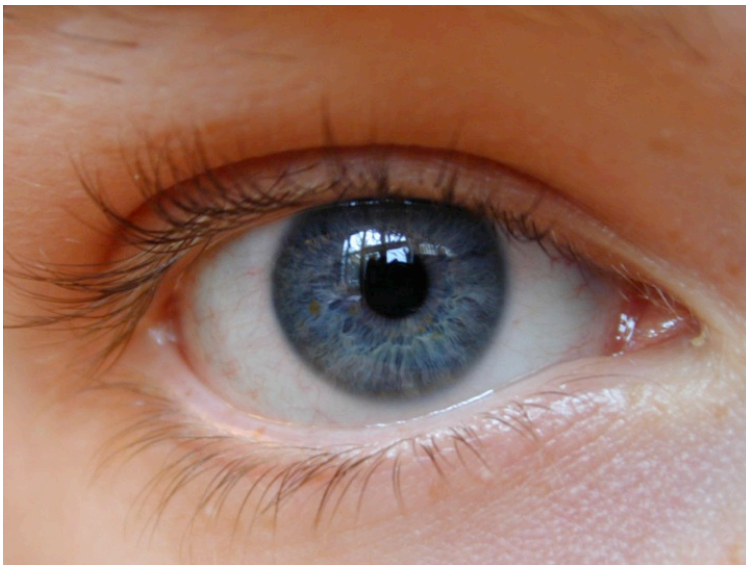
Finally, remember that because cataracts grow slowly, so the problems with your eyesight that they cause “creep up” on you slowly too – often so slowly that you may not even notice them. I have seen many patients who have not realised they had cataracts at all and it has only been after I have treated them by taking out the old cloudy lens that they notice how dramatically their vision improves.

What Causes Cataracts?

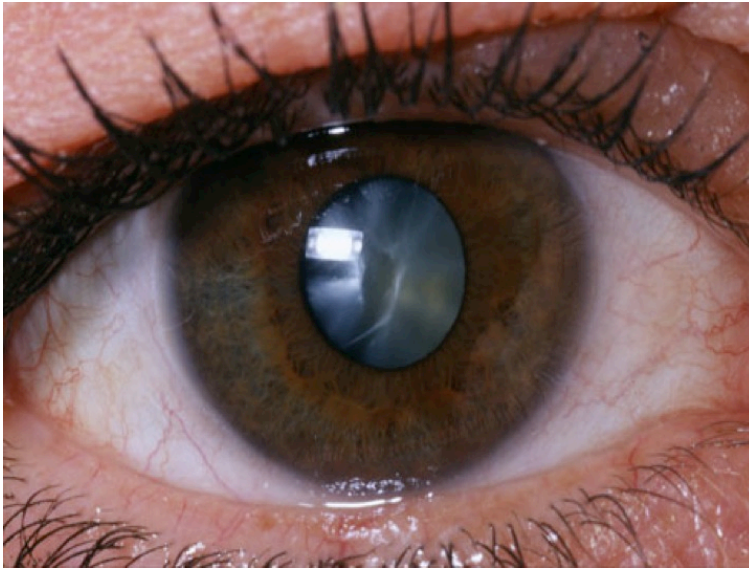
Cataracts are extremely common – in fact we probably all know at least one or two people who have had them treated. But what causes them exactly?

The commonest cause of cataracts I see in patients is age-related degeneration of the lens in the eye. There are three causes of this – Nuclear sclerosis, Cortical cataract and posterior subcapsular opacification. The details of these are not important, but what is important is that with time all these problems will mean patients progressively lose their vision – and that can be very disabling and distressing. Poor vision can mean people lose confidence in getting out and about in unfamiliar places and stay indoors. Poor vision can mean people socialise less and become withdrawn. And poor vision makes us more likely to fall or injure ourselves in other ways.

That is why I find treating cataract so rewarding: because a simple procedure can give people a whole new lease of life, and the magic of seeing someone's face after their cataract operation when they can suddenly see clearly again never fades.



The normal human eye



The eye of a patient with a cataract

There are many risk factors for developing cataract. Just some of these are listed below:

- Diabetes
- Smoking
- Uveitis (inflammation of the middle layer of the eye, the Uvea)
- Excess alcohol intake
- More common in women
- Steroid medication
- Injury to the eye
- Ultraviolet light exposure

These are some of the conditions that pre-dispose to developing a cataract with age – in other words, even if you have diabetes you won't necessarily develop a cataract – but on the other hand, if you are a diabetic, the longer you have been a diabetic, and if the diabetes hasn't been well controlled, then you are more likely to go on to develop a cataract.

Not only can cataracts develop with age and in association with certain medical problems like those above, some people can be born with cataracts ('congenital cataracts') or develop them at a

young age. Causes of cataracts in younger patients include:

- Congenital (genetic problems such as galactosaemia)
- Developmental problems
- Acquired problems (trauma, diabetes, after radiotherapy)
- Infections after birth (such as toxoplasmosis)
- Infections before birth (such as Rubella, Cytomegalovirus, Herpes simplex)

These are just some of the causes of cataracts in both adults and children – there are many more that I haven't mentioned here. The important thing to remember though is that the commonest cause of cataracts is simply changes in the lens of the eye caused by aging – and because there are so many older people in Britain today than before there are an awful lot of people with cataracts that need treating.

How are cataracts treated?

The good news is that cataracts are usually very easily treated.

The bad news is that no change in diet, exercise or pills will make the slightest difference: the only effective treatment for cataracts is surgery.

Yet the operation to treat the cataract, in the hands of an expert is very safe, simple and quick: each eye can take only 20-25 minutes to treat, and the results last a lifetime.

Treatment starts with being assessed by a fully trained eye surgeon.

I always see my patients personally and go through their medical history and the symptoms they have been experiencing.

I will then examine your eyes thoroughly to make sure that your eyes are healthy and to find out exactly where the problem lies.

This is critically important: There are very many causes for changes in vision and to find out exactly what is the cause in each case requires an expert with many years of training behind him to be sure of the diagnosis.

If indeed you do have cataracts we will then decide what to do: you do not have to have them treated, and if your symptoms are mild you might decide to leave them alone for a while.

In the past we used to leave cataracts until they became 'mature' and your vision was really quite poor, but with modern techniques and advances we no longer do this.

If your cataracts are affecting your vision enough to interfere with your daily living and your ability to do the things you enjoy then you will probably want them to be treated.

What can I expect during cataract surgery?

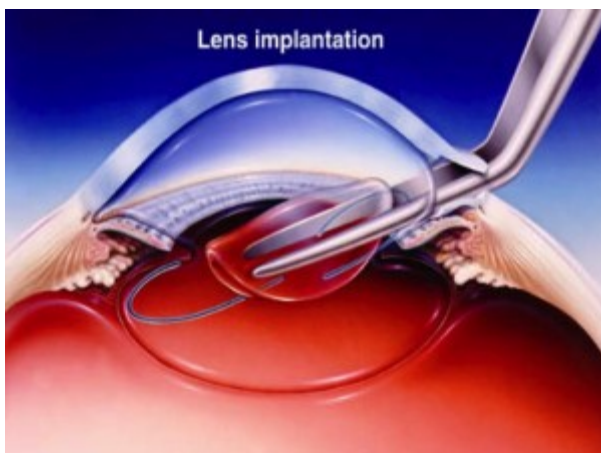
After our initial consultation, if you want your cataracts treated I will arrange a time for you to come in to the hospital at your convenience.

This can usually be done within a week or so of our first consultation, so there is no big delay once you decide you want to be treated.



Putting local anaesthetic drops in the eye

Most patients can have their cataracts treated under a local anaesthetic and do not need to be 'put to sleep' for the operation.



Removing the cataract from the eye

Under the microscope I make a tiny nick in the eye and remove the

old lens before replacing it with a crystal clear silicon lens.

I make the eye numb by putting an anaesthetic drops in the eye or something with an infusion of anaesthetic solution around the eye.

I don't use sharp needles and the operation is quite painless.

If you are very anxious I might give a sedative to help you relax, or I can involve an anaesthetic colleague who will put you to sleep for the procedure if you prefer.

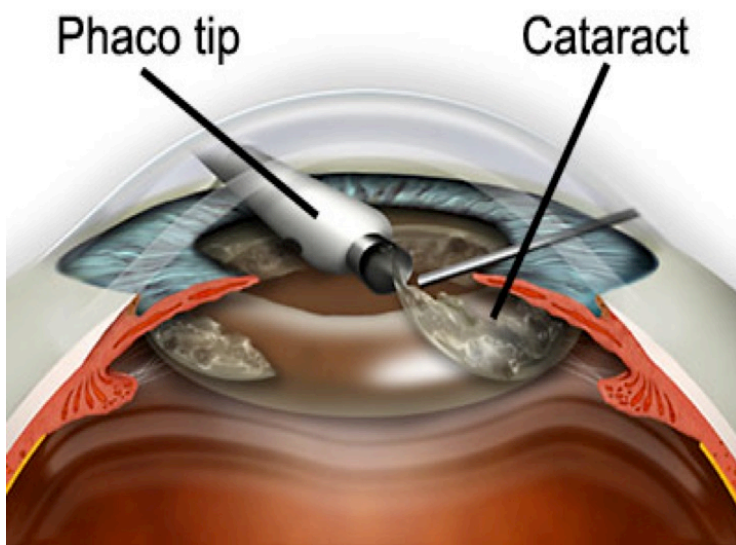
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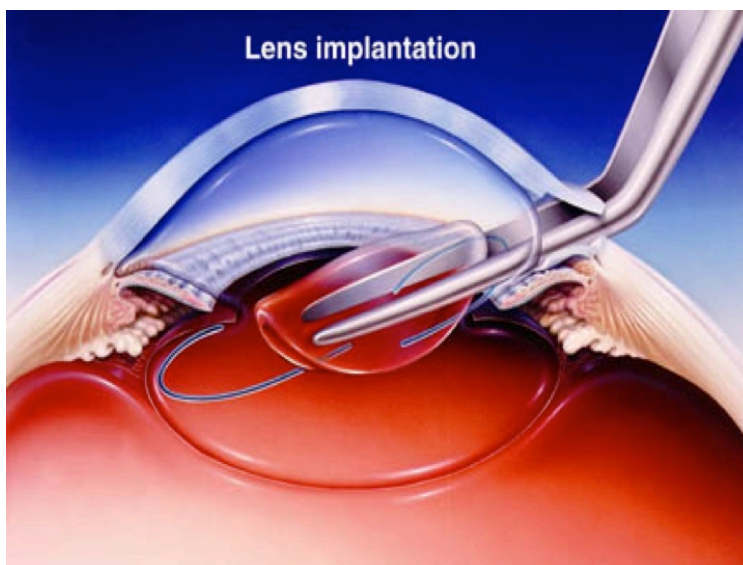
If you are very anxious I might give a sedative to help you relax, or I can involve an anaesthetic colleague who will put you to sleep for the procedure if you prefer.

During surgery you will feel no pain and see no instruments near the eye. You may see bright lights or rainbow colours but that is all.

Under the microscope, I will make a nick in the eye and pass a tiny instrument into the lens to break it up. This is called 'phacoemulsification' and allows me to remove the old cloudy lens.



Removing the old cloudy lens



Implanting the new lens – clear vision again at last!

The whole procedure takes maybe 20 minutes on average.

I give all my patients antibiotic drops and anti-inflammatory medicine for 3 weeks after surgery whilst the eye heals.

Most people go home the same day of surgery

What happens after my operation?

For most people the improvement in eyesight is astonishing and immediate.

Right away you will notice your vision is much brighter and clearer, and your vision will continue to improve over the next week or so.

It is normal to feel some itching or discomfort for 2 or 3 days, after which even that should settle down.

You will be able to carry on with your normal day-to-day activities as usual and I will see you about a week or so after your operation to see how you are getting on.

I will also give you contact details so you can get in touch with me right away if you have any concerns in the meantime.

Are there any risks to cataract surgery?

Cataract surgery has been around for very many years now and with modern surgical techniques is very safe.

It is the commonest eye operation we do and many thousands are done every year.

Yet no operation or procedure is risk free of course, and one of the complications we want to avoid is infection ‘ which is why I always give my patients antibiotic eye drops after surgery.

Another condition to be aware of much later down the line is Posterior Capsule Opacification or PCO. Maybe 20% or a fifth of people get this over time.

This is a condition whereby the little bag the new lens sits in (this is the bag the old lens originally sat in too) thickens, leading to a gradual deterioration in eyesight again.

However with follow-up this condition is easily picked up and can be effectively treated with outpatient laser therapy.

Frequently Asked Questions

“Will I need glasses after cataract surgery?”

The aim of cataract surgery is to restore your vision, but because I carefully choose a lens specific to your eyesight when I replace your old cloudy lens you may find that you do not need glasses at all, or can use less powerful ones. You are likely to still need reading glasses though.

“What if I have cataracts in both eyes? Will you treat them both at the same time?”

It is not a good idea to operate on both eyes at the same time, so what I do is treat the cataract in the worst eye first then maybe 3 weeks later treat the remaining eye.

However, what I do is treat the worst eye first, and then three weeks later after that has fully healed treat the other eye if necessary.

“Is surgery the only treatment for cataracts?”

Yes. No other treatments are effective I’m afraid.

“What will happen if I leave my cataracts?”

By the time you are diagnosed with cataracts you will likely have had the problem for many months, even years before noticing it. If you leave your cataracts untreated your vision will gradually get worse and affect your day-to-day life more.

However you will not harm you if you prefer to wait for longer before getting them treated.

“If you take out my cataract do you put anything in its place?”

Yes, I will replace the old, cloudy lens with a new, water-clear

implant tailor-made for you.

“How long does the new lens last for? Will it need replacing?”

The new lens lasts a lifetime and does not need to be replaced again.

“Is cataract surgery safe?”

Yes, very safe. However, like all operations it does have risks that go with it - nothing is absolutely risk free.

“Will the operation hurt?”

No. The procedure is quite painless.

“I don't like the idea of injections in my eye at all.”

That is perfectly understandable of course. In almost all cases I can perform your surgery quite painlessly using eye drops alone.

“How long does the operation take?”

About 20 - 25 minutes.

Afterword

As you will probably have realized this has been a whistle-stop summary of information about cataracts – what they are, what causes them and how they are treated. I have also summarized what you can expect if you should need treatment for cataracts and the common questions I get asked by patients. I hope it has been useful.

As a consultant ophthalmologist I am fully trained in the management of all conditions affecting the eye, including the treatment of cataracts.

If you have problems with your eyes and would like to see me via the NHS then have a word with your GP and ask to be referred.

If you wish to be seen privately then you do not need a GP referral and can simply contact my secretary directly.

I look forward to seeing you.

Best wishes,



Mr. Jaheed Khan FRCOphth

How to Contact Mr. Jaheed Khan

Privately I practice at both Moorfields and at Harley Street – either telephone or send my secretary an email. A GP referral is not necessary for Private Patients.

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