

Countering cataract risk



By Dr Nick Mantell, ophthalmic surgeon and cataract specialist, MBChB, FRANZCO.

I regularly see patients with diabetes-related eye diseases, some not knowing their loss of vision was indirectly caused by their diabetes.

Those with diabetes are at a higher risk of developing vision-robbing eye conditions. Some conditions, such as diabetic retinopathy, are related to diabetes. Others, such as cataracts, are not. Cataracts are not exclusive to a particular group – but risks are higher for those with diabetes.

What are cataracts?

Cataracts are a cloudiness that develops in the lens of your eye, which, like the glass or plastic lens in eyeglasses, focuses light onto the retina to form sharp images. This cloudiness blocks light, causing the sufferer to lose their vision.

Cataracts are usually associated with older people because our lens naturally gets cloudy and more opaque as we age; if we live long enough we will all get cataracts.

Many people without diabetes get cataracts, but those with diabetes are at least twice as likely to develop them. Those with diabetes tend to get cataracts at a younger age and when cataracts do develop, they usually worsen faster.

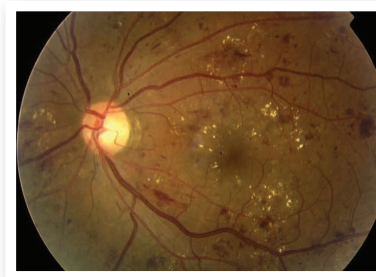
How to treat cataracts?

I often see patients who have diabetic-related cataracts, who have left it a little too late, either from ignoring symptoms or not looking into financial help for treatment. For some New Zealanders that has meant permanent vision loss or detrimental blindness.

Treatment by surgery in New Zealand is accessible through the public or private health system. The surgery is among the most common, safest and most successful surgical procedures performed in the Western world.

Unlike diabetic retinopathy, cataracts are not treated by a laser. Cataract surgery involves a simple operation where the surgeon removes the original, clouded lens and replaces it with an artificial, clear intraocular lens (IOL).

The IOL acts like the original lens to focus light on the retina, allowing the patient to see clearly again. If required, IOLs can be customised for patients who have long or short-sightedness or even astigmatism, reducing the need for glasses. The operation is usually performed in an outpatient setting within half an hour. Chances of success with no complications are very high.



Advanced vision-threatening diabetic maculopathy (diabetic eye diseases)

Not all cataracts need to be operated on. In less severe cases, sufferers can get by with replacing lights around the house with brighter ones, getting proper sunglasses that reduce glare, or by wearing hats or visors in bright sunlight. However, not treating cataracts can affect your lifestyle, such as preventing you from driving or enjoying a movie in a theatre.

Guarding against cataracts

While it may seem fine to have a modern cutting-edge lens implant in your eye which can be customised to accommodate your vision, there is no substitute for your natural lens. Prevention is the best cure.

There is no sure-fire way of preventing cataracts, but if you have diabetes or are at a high risk of developing the condition there are ways to reduce your risk of developing cataracts:

1. Keep blood sugar level under tight control
2. Eat healthily – antioxidants and vitamins from fresh vegetables and fruits slow the development of cataracts – and stay away from processed, fried and fatty foods
3. Don't smoke – smoking increases the risks of cataracts
4. Maintain a healthy blood pressure
5. Protect your eyes from the sun because ultraviolet rays increase the risk of cataracts; wear good sunglasses and a hat or cap when outdoors.

Genetics, lifestyle, diet, environmental factors and diabetes are all potential risks for developing cataracts; reducing each of these risks will stop them stacking up.

Don't wait until your eyesight worsens. Get your eyes checked regularly and your optometrist or ophthalmologist will advise you if you do need help or surgery.

<http://floridaeyecenter.com/SavingYourSight/A13.htm>
http://www.diabetes.org.nz/about_diabetes/complications_of_diabetes/eyes •