

Surgical Management of Cataract

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Types Of Cataract

Two Types of cataracts are mainly encountered amongst leprosy sufferers -



Senile



Complicated

Types Of Cataract Operation

There are also Two Types of operations practiced for cataract operation-

- Intra-Capsular Cataract Extraction (ICCE)
- Extra-Capsular Cataract Extraction (ECCE With PCIOL) with Intra-Ocular Lens Implantation .

Operation of choice : ECCE with PCIOL

- It does not require extra-spectacles.
- Occurrence of Immediate Post-operative Complications are less .
- Long term complications are more in ICCE.
- Patient's acceptance, satisfaction with quality of life is more with ECCE with PCIOL than ICCE.



•ECCE with PCIOL can only be done in a base hospital approach but ICCE can be done in Camp approach (though the practice of ICCE is banned in India since 2002)

•The Post-operative visual outcome and the complications are not related with the quality of lens (Heparin coated or not)



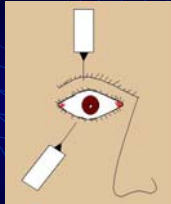
Surgical Procedure Pre-operative check up

- Skin smear examination – insignificant
- General Examination- Specially search for other septic focus in the body – insignificant
- Blood Sugar and Urine examination- Must
- Blood Pressure and General Check up – Must
- Local Ocular Examination – Tear Drainage System, Intra-Ocular Pressure, Associated eye diseases- very much essential.
- History of reaction, relapse and treatment – Helpful
- Biometry



Anaesthesia

- Local Anaesthesia:— 2% Xylocaine with Adrenaline (4 c.c.) + Inj. Bupivocaine (Sensorcaine) (3c.c.) :: Peri bulbar Infiltration
- Installation of 2% Paracaine
- Pre-operative antebiotic & Flurbiprofen to our live
- Tropicamide Mydriasis by Tropicamide



Operative Technique

- ECCE by can opener technique
- Removal of Cortex by Biway Simogi's Canula
- PCIOL
- PBHI/Multiple Sphincterotomy
- Closer of the wound by 4 to 5 interrupted 8-0 VIRGINSILK
- Formation of A.C. by balanced salt solution
- Sub-Conjunctival Injection of Inj. Genticyn + Inj. Dexamethasone



Post Operative Care

- Dressing after 24 hours with Tropicamide, Dexamethasone, Antibiotic
- Continue the medication for two months
- No role of systemic antibiotic or steroid for routine cases
- Patients can go home after 72 hrs.
- Check up at fortnight interval.
- Removal of stitch after two months



Post-operative complications and Poor visual outcome

These are the result of -HIGH RISK EYES WHICH ARE STILL OUT OF OUR REACH TO CONTROL PROPERLY.

- Hyposthetic Cornea
- Lagophthalmos with exposed Cornea
- Relapse
- Reaction
- Causes unknown



The five years follow up study of cataract surgery with IOL amongst people affected by MB Leprosy in Eastern India

The Aim of this longitudinal study: Review the post operative outcome of Intra Ocular Lens Implantation with cataract surgery amongst the Leprosy sufferers.



Study Group

Total	Male	Female	No. of Eyes	Type of Leprosy	Age Group		
					=>40 Yrs.	>40 Yrs. <=<60 Yrs.	>60 Yrs.
140	82	58	180	MB	15	90	35

Same Surgeon, Uniform Setup, Uniform Brand of Single Piece Intra-Ocular Lens, Checkup at Fortnight Interval, 90% of the Patients are staying in the same leprosorium for the past 5 years which allows constant monitoring.

Observation

(At the beginning of 5th year)

Total	3 Months	6 Months	1 Year	2 Years	3 Years	4 Years+
180	20	45	40	20	15	40

Observation

(At the beginning of 5th year)

Visual Outcome

Total	NPL	PL	HM	Upto 360	Upto 636	More 636
180	2	4	3	20	16	135

Complications

Total	Fulminating Corneal Ulceration	Total Retinal Detachment	Endophthalmitis	Posterior Capsular Opacification
180	3 (7%)	2 (7%)	1 (7%)	32 (20%)

Small Constricted Pupil	Dilated Pupil	Exposure Keratitis With Corneal Opacity
1 (4%)	3 (4%)	3 (7%)



Cataract Surgery offered good visual outcome. Inflammatory conditions responded satisfactorily with local and systemic steroid and Non Steroidal Anti Inflammatory therapy.



Still 2% cases turned into irreversible blindness following Corneal Opacity, Oclusio Pupillae.

Brandt Ocular Leprosy Clinic

A special eye clinic devoted for the Leprosy sufferers in a general Eye Hospital (Haldia Lions Eye Hospital in Eastern India). The Leprosy patients enjoy to share the same facilities like a healthy patient in the same ward and operation theatre of the hospital possibly first ever in the world.

Conclusion

*Cataract Surgery with IOL
Implantation amongst
people affected by MB
Leprosy offers good Visual
outcome.*

