

Keyfacts - Cataract

Eye health workers web resource

What is cataract?

The lens of the eye is normally clear. Light passes through the lens to the light sensitive tissues at the back of the retina, to form an image. A cataract forms when proteins in the lens become damaged. When a cataract develops, the lens becomes cloudy and prevents light from reaching the retina, resulting in blurred vision. In its early stages, a cataract may cause a lessening of vision but eventually it can cause blindness if left untreated. Cataracts usually develop slowly and at different rates in each eye.

What are the risk factors for cataract?

Most cataracts are due to ageing. By the age of 80 years, it is common for people to develop or form some cataract. Other risk factors include:

- smoking cigarettes
- exposure to the sun
- diabetes
- injury to the eye
- a history of severe diarrhoeal infection
- some drugs
- family history

What are the symptoms of cataract?

Symptoms of cataract can include:

- blurred vision
- sensitivity to light (glare)
- reduced night vision
- fading or 'yellowing' of colours
- double vision or multiple images in one eye
- frequent prescription changes in eyeglasses or contact lenses.

How is a cataract detected?

Cataract is detected through a comprehensive eye exam that can include a visual acuity test, dilated eye exam and tonometry. A visual acuity test is an eye chart test which measures how well a person sees at various distances. A dilated eye exam and tonometry need to be carried out by an eye care professional. In a dilated eye exam drops are placed in the eyes to widen, or dilate the pupils and a special magnifying lens is used to examine lens to check for cataract, and the retina and optic nerve for other eye problems. After the exam, close-up vision may remain blurred for several hours. Tonometry is a procedure using a tonometer to measure the pressure inside the eye. Numbing drops may be applied to the eye for this test.

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How is cataract treated?

The early symptoms of cataract may be improved with new eye glasses; however, the usual treatment for cataract is surgery. Cataract surgery involves removing the cloudy tissue from the internal part of the lens, and leaving part of the lens capsule behind to act as a support for an implant called an intraocular lens. In most cases only a local anaesthetic (numbing) is needed and the person can go home the same day. Cataract surgery can quickly restore vision and is considered very cost effective.

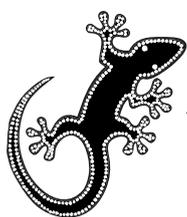
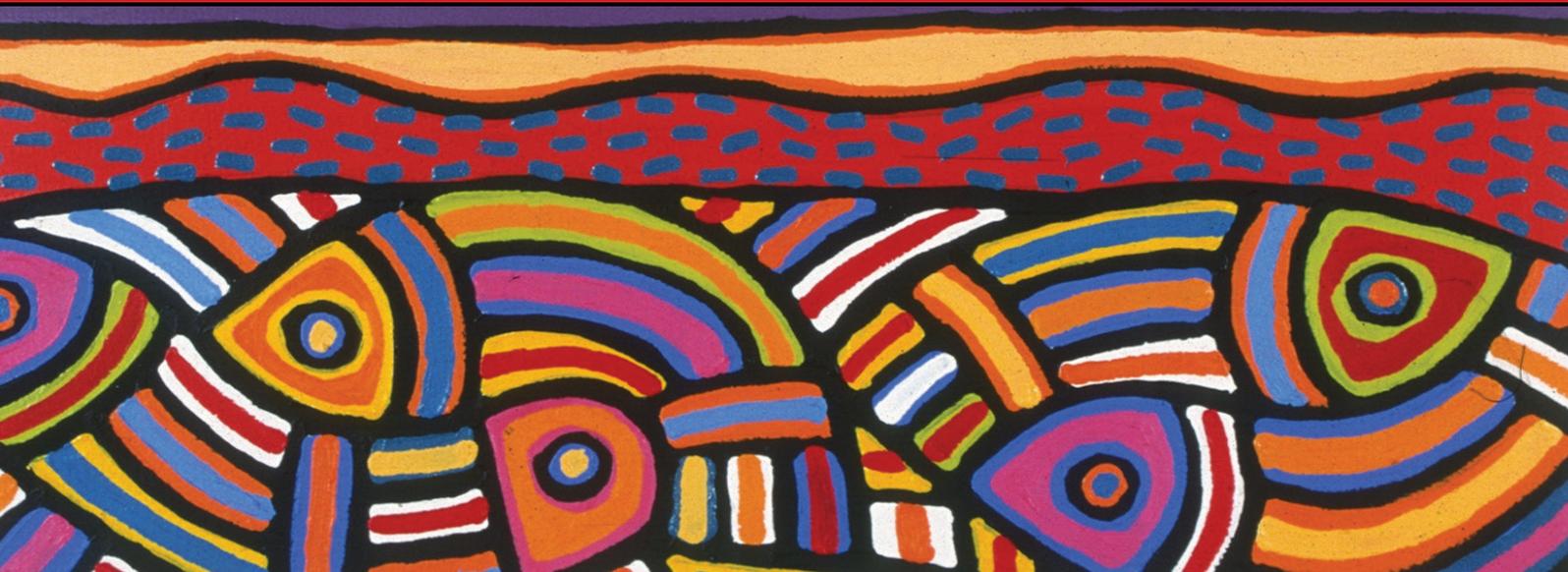
What is known about cataract among Indigenous people?

A national eye survey in 2008 found that cataract was the second-leading cause of low vision for Indigenous Australians. Cataract was the cause of 27% of low vision and 32% of blindness among Indigenous adults, with vision loss from cataract being more common in very remote areas. Only 65% of those with vision loss from cataract had received surgery. Blindness from cataract was 12 times higher for Indigenous adults compared with other Australians. Some of the main issues affecting cataract treatment for Indigenous people, especially in remote areas are:

- longer waiting times
- lack of available eye care services
- lack of access to surgical services
- cost of surgery
- complexity of the steps involved in treatment.

References and further reading

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Australian Indigenous HealthInfoNet

The Australian Indigenous HealthInfoNet is an innovative Internet resource that contributes to 'closing the gap' in health between Indigenous and other Australians by informing practice and policy in Indigenous health.

Two concepts underpin the HealthInfoNet's work. The first is evidence-informed decision-making, whereby practitioners and policy-makers have access to the best available research and other information. This concept is linked with that of translational research (TR), which involves making research and other information available in a form that has immediate, practical utility. Implementation of these two concepts involves synthesis, exchange and ethical application of knowledge through ongoing interaction with key stakeholders.

The HealthInfoNet's work in TR at a population-health level, in which it is at the forefront internationally, addresses the knowledge needs of a wide range of potential users, including policy-makers, health service providers, program managers, clinicians, Indigenous health workers, and other health professionals. The HealthInfoNet also provides easy-to-read and summarised material for students and the general community.

The HealthInfoNet encourages and supports information-sharing among practitioners, policy-makers and others working to improve Indigenous health – its free on line yarning places enable people across the country to share information, knowledge and experience. The HealthInfoNet is funded mainly by the Australian Department of Health and Ageing. Its award-winning web resource (www.healthinfonet.ecu.edu.au) is free and available to everyone.

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FEATURED ARTWORK

Life before the drought

by Julie Weekes

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