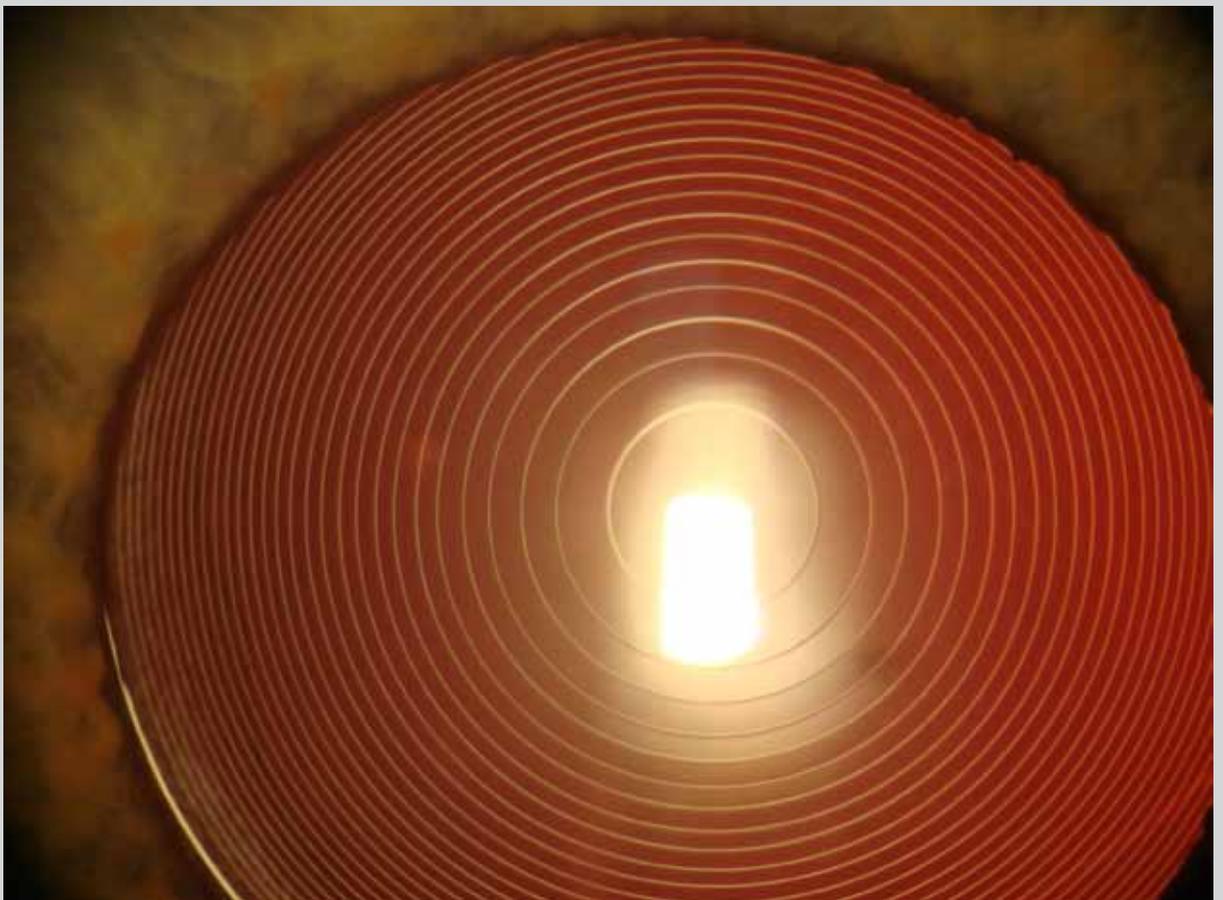


# CATARACT SURGERY: A Patient Perspective

When the practice manager of Brisbane's Eye Health Centre was diagnosed with cataracts, she suddenly found herself under the knife of her own boss. In the lead up to surgery, none of the advice and reassurance she'd offered the practice's patients could calm her nerves. Now that she's 'been there, done that', she's thrilled with the results and understands exactly why those who've undergone cataract surgery are so grateful to the surgeons who restore their sight and quality of life. **Margaret Cordery** writes for mivision about her experience.



Implanted lens taken through the slip lamp. The eye is fully dilated. The photo was taken through the slip lamp ocular.

**Cataract surgery? “Ah!”** you may think. “That’s bread-and-butter for an experienced ophthalmologist. What can be different about it?” Well, probably nothing from the surgeon’s point of view, but put a practice manager into the mix as the patient, and the expectations and experience are quite different.

I have been wearing glasses since my early 40s, gradually increasing their strength as my sight deteriorated. Wearing glasses never bothered me. Vanity is not one of my vices and glasses became a fashion accessory. Single vision changed to multifocal lenses as time progressed, mainly at the instigation of the optometrists who work in our practice as they got sick of watching me looking over the top of my readers when chatting to patients.

A few years ago, I was advised that I was beginning to develop cataracts. I didn’t take the diagnosis very seriously. Cataracts are a curse of the ‘aging’ population and as far as I was concerned, I was far too young for them. I thought I would just keep wearing glasses and think about surgery down the track. However, that was not to be the case. The cataracts progressed quickly and, after changing my glasses prescription three times in 12 months and dropping two lines on the chart in three months, cataract surgery was recommended for consideration. “Mmmmm, OK, I’ll think about it.”

Jessica, our practice optometrist, took the measurements. Refraction, IOL Master, OPD, OCT – I had them all. “You’re perfect!” said Jess. Well, that was nice to know but I had the feeling she wasn’t talking about my personality. And she wasn’t. She said I would be perfect to add to the clinical trial of a new multifocal lens. To the lay person, ‘clinical trial’ means ‘guinea pig’. Fortunately, being the practice manager, I knew what trial she was talking about and was aware that patients who had participated were extremely happy with the results. However, that was them, not me. I had a chat with my boss – told him I wanted perfect vision at all distances – and I got ‘the look’.

#### **IN SPITE OF ALL KNOWLEDGE**

I told myself there was nothing to it. After all, Andrew had performed surgery on his parents, our receptionist, and our patients (of course). Why should I be any different?

I talk to patients every day to reassure them about the surgery, the hospital, and the expertise and experience of the surgeon. “You couldn’t be in better hands” is something I hear myself say frequently. Our Zeiss rep for the Multifocal AT Lisa



Dr Apel examining Margaret’s eye at the slit lamp.

tri lenses was quite excited that I satisfied the criteria and would be part of the trial. Good for him! I had seen videos of the procedure umpteen times and I speak confidently about the surgery at regular education evenings for optometrists... I told myself there was nothing to worry about.

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**“I was driven to work, as instructed, because I was still under the influence of anaesthesia and not permitted to drive...”**

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The date was fixed. It was six weeks away, so no need to think about it yet. I soon discovered that six weeks is not very long! The morning of surgery rolled round. I was to be admitted at 3.00pm. I was last on the operating list – after all, I had a full day’s work to complete beforehand. I began that day at 7am with butterflies agitating my stomach. Fortunately, staff pays to organise, surgeries to book and a clinic to

work through before lunchtime kept me busy. Of course, there was no lunch for me. I cleaned my teeth in an (unsuccessful) attempt to quell my hunger. I phoned the hospital to check the admission time and that all the prior surgery was going according to plan. It was.

I left work and wandered up to the hospital – no need to rush. When I arrived at the Queensland Eye Hospital, they were ready for me! Gayle checked my paperwork, which was all there because I had been a good patient. Then through to Admissions where Fiona, the pre-op nurse I know very well, went through the drops regime and preparation for surgery. The pre-op drops were administered at regular intervals, and I was given a theatre gown to put on.

I had read the brochure and was suitably attired to remove only my outer layer on the top. That was a relief since my boss was the one performing the surgery! I was told that my eye was dilating well and would be ‘perfect’ for surgery.

The anaesthetist came along to chat to me. I told her that I really didn’t want to be part of the proceedings and asked if she had some good drugs to sort out that little problem. I am not a hero and thought I should support the progress made by drug companies since my days of childbirth some 30 years ago. She clearly explained what I should expect. In fact, I think she was marvelous and things progressed exactly as she’d said. (That explanation has since been a help to me in my discussions

with patients). I sat in the pre-op room for about 45 minutes and the staff I deal with in the usual day-to-day exchanges between a practice and the hospital came to have a chat. I was pleased they were so excited about the surgery.

**“There I was, one day post-surgery (actually, it wasn’t even 24 hours), and I was able to read small print and the chart”**

**THE BIG EVENT**

Then it was time for the big event. I walked to the operating bed and was made comfortable with a nice warm rug. The anaesthetist inserted the drip, and I reminded her again that I didn’t want to remember any of it. Off we went.

I am happy to say, I really can’t remember too much of the actual surgery. There was certainly no pain at all. I remember seeing a bright light – exactly as described – when the lens was removed and the light traveled straight to the retina. I could hear Andrew and his assistant surgeon, Jon, chatting away, and was able to establish that they weren’t talking about me!

Then I found myself waking up in Recovery. I was given deliciously fresh sandwiches and a hot cup of coffee – just what the doctor ordered! Our surgeon doesn’t put a patch over the eye so, of course, I was anxious to check my vision. There wasn’t much to report at that stage as my eye was still very dilated. I knew that would be the case but I just had to check anyway. I was given instructions for the post-op drops and a time for my post-op consultation the next day. This was to be any time I wished, as I hoped to be back at my desk doing what I do best.

On getting home, I was surprised at just how good I felt. No pain whatsoever. I expected there to be some discomfort or to feel ‘spaced out’ from the drugs, but neither happened. It was difficult to reconcile that I had just undergone major eye surgery and there I was, at home, as if I had just completed a day’s work (which, of course I had also done). I was determined to be the ‘perfect’ patient and was diligent about instilling my eye drops. I got up in the

morning and prepared for work. Except that one eye was still dilated, everything was normal. I was driven to work, as instructed, because I was still under the influence of anaesthesia and not permitted to drive.

In fact, I was so nonchalant about the experience, that I happily returned three days later for surgery on my second eye. What had I been worried about? It was a piece of cake, really. After surgery on each eye, I returned to work the following day and contentedly carried out my normal day-to-day activities. I had no after effects, pain or discomfort whatsoever, except that I couldn’t wipe the smile off my face!

**ECSTATIC**

Jessica, our optometrist, was waiting for me the day after each surgery, anxious to check my vision and that I was, indeed, happy with the results. Suffice to say, I was absolutely ecstatic! I couldn’t believe the difference in my vision. There I was, one day post surgery (actually, it wasn’t even 24 hours), and I was able to read small print and the chart. No disappointments there. I constantly checked my vision. I would look up as someone came to my desk, and then look past them out the door – no

accommodation problems. I was warned that I may see haloes around lights at night. In fact, the lights were quite pretty and I commented to my son that it was a pity I was not at the Brisbane Riverfire event, as I am sure it would look amazing! Seriously, the haloes did not present a problem to me.

Two days after my second eye surgery, I drove down Gympie Road at night, quite confident in my ability to drive. I found that the haloes were not evident at about four car lengths (and this is becoming even further now) and, that if I focused on the road and the immediate vicinity, the haloes became part of my peripheral vision and not a problem.

I was surprised that my vision was so good at all distances. Ten days post-op and I was getting 6/6 – pretty happy with that. I know I tell patients every day about the improvement they can expect to their vision but, having experienced it myself, I am even more aware of the gift of good sight. I feel grateful to have been the recipient of Andrew’s wonderful expertise.

**AN IMPROVING LIFESTYLE**

Every day I notice improvements in my lifestyle. No more glasses (or magnifiers)

Dr Apel and Margaret very happy about the results.



in every room of the house and I can tell the difference between the shampoo and conditioner bottles (washing your hair with conditioner is just not the same). I can thread my sewing machine needle easily, even with black thread. This was an absolute blow-away as it was a challenge previously, even with my glasses on and under a bright light. Reading in bed is a nightly ritual for me – now I can lie on my side if I want, which was not the most comfortable position while wearing glasses. Weeds grow at their peril in my garden, as it's easy to spot them, even from quite some distance. As vision deteriorates, a GPS becomes a necessity as street names are not easily read in dim light – I am hoping never to get lost again, or end up in the wrong street!

My experience has added another dimension to my empathy with patients as I can confidently tell them about the changes to expect to their lives. I am also happy I was a “guinea pig”. The results have far exceeded my expectations, something I think every surgeon would be happy to hear. Now I also understand why our patients are so grateful to our surgeon who restores their sight and quality of life. [mi](#)



# THE EYE HEALTH CENTRE

Margaret Cordery, has been Dr. Apel's practice manager, at The Eye Health Centre since 1998.

The Eye Health Centre was conceived out of a realization in the great benefit in combining the skills offered by optometry and ophthalmology. The Centre has five optometrists. Margaret says as a practice they believe in the effectiveness of the patient pathway as “optometry has the ability to diagnose and provide spectacle and contact lens prescriptions, whereas ophthalmology provides the medical aspects of treatment, and more importantly, the aspect of ophthalmic surgery.”

Dr. Apel specialises in the cornea and anterior segment surgery. “The accurate measurement of vision and refraction is very important in this field of surgery, and optometrists are very good at this,” said Margaret.

“Basically, when people present to our Centre, they can be fully assessed in terms of their anterior eye segment needs. When they walk away from our practice they will have a diagnosis, treatment if needed, and a prescription for glasses and/or contact lenses. We are not in the business of competing with other optometrists who prescribe glasses, but see ourselves as offering clinical support for advanced eye care. We have state-of-the-art equipment to assist in the diagnosis of complex corneal conditions, and help the surrounding optometrists to provide better spectacle and contact lens care for their patients, as well as comprehensive anterior segment surgical treatments.

Dr. Apel and The Eye Health Centre optometrists are in high demand for presentations at National and International conferences.