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Cataracts: How do day surgery and overnight hospital stays compare?



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The lens in an eye gets cloudy and blurry in more than 1 out of every 10 people over the age of 40. This condition is called a cataract. The word *cataract* comes from the Greek word meaning “waterfall” because people used to believe that the blurring was caused by a fluid in the eye.

The clouding of the eye lens reduces the clarity of vision, and in particular it gets difficult to see small things properly. At first glasses can help. But when the lens gets too cloudy, an operation to remove it is the only way to get good sight back.

Cataract operations are one of the most common surgical procedures in countries like Germany. Usually the lens can be removed through a very small cut in the cornea of the eye. It will then be broken up and sucked out. This process is called phacoemulsification. The lens is then usually replaced by an artificial lens, but some patients use special glasses or contact lenses which take on the role of the lens.

Because this procedure can be done under local anesthetic, in Germany and similar countries people usually have the choice of a stay in hospital or having day surgery. After day surgery, the person can return home within a few hours of the operation.

To find out whether this early discharge increases the risk of poor outcomes after the surgery, researchers from the Cochrane Collaboration (an international network of researchers) systematically analyzed trials of day surgery for cataracts. They found two trials that included around 1,300 people. The smaller of the two trials was finished more than 20 years ago, so the researchers relied mostly on the results of the second trial. This was done in Spain in 2001, with about 950 participants. A new search by the Cochrane researchers in 2011 did not produce any new trials. Therefore, they did not reach any new conclusions, either.

The outcome: four months after the procedure people had the same clarity of vision whether they had day surgery or were admitted to hospital. Short-term complications were somewhat more common in the day surgery patients, but this had no impact on the ultimate success of the procedure. However, this assessment is based on the results of one study, so it is possible that outcomes might vary between clinics.

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Next planned update: August 2014. You can find out more about how our health information is updated here (URL: <http://www.informedhealthonline.org/our-methods.643.en.html?b>)

Glossary

Cochrane Collaboration

The Cochrane Collaboration is an international network of thousands of researchers and others. They work together in teams called Cochrane Review Groups to answer questions about health care by doing systematic reviews of evidence. To achieve this, the members of the Collaboration have developed systems and methods for systematically finding and analysing the results of trials of health care interventions. The goal of the Cochrane Collaboration is to help patients, health care practitioners and others make more informed decisions about health care. You can read more about the Cochrane Collaboration at their website.

lens

The lens of the eye lies right behind the pupil. It focuses light onto the retina.

cornea

The cornea is the transparent outer surface of the eye. It protects the eye from foreign bodies. Fluid from the tear ducts keeps the cornea moist.

cataract

When the natural lens of the eye becomes cloudy or completely opaque, this is called a cataract. Cataracts interfere with sight, and can eventually cause complete vision loss if left untreated. Cataracts can be surgically removed. The function of the eye lens is then replaced with an artificial lens.

Sources

Fedorowicz Z, Lawrence D, Gutierrez P. Day care versus in-patient surgery for age-related cataract. *Cochrane Database of Systematic Reviews* 2011, Issue 7. CD004242 [Cochrane summary (URL: <http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD004242.pub4/abstract>)]

The German Institute for Quality and Efficiency in Health Care (IQWiG)

The German Institute for Quality and Efficiency in Health Care (IQWiG) was established by legislation to provide evaluations of the effectiveness, quality and efficiency of healthcare services. This includes the assessment of medicines as well as the publication of health information for consumers and patients.

Evidence basis of our health information

Our information is based primarily on systematic reviews of the effects of health care. Systematic reviews are necessary to gain an objective picture of health care. In order to do this, a clear question is formulated. Researchers then find all the relevant studies that could answer this question. They then evaluate those studies.

You can find a list of the evidence and other scientific literature on which this information is based at www.informedhealthonline.org

Disclaimer

This information was prepared and published by the German Institute for Quality and Efficiency in Health Care (IQWiG). It is based on the evidence and other scientific literature available at the time of publication. The information is intended for the use of patients in Germany. It is not intended to for use to diagnose illnesses and the information is not intended to substitute for medical advice.