Facts & Myths About Cataract

**MYTH: Only older Americans develop cataract**

**FACT:** While cataract affects more than 24 million Americans age 40 and older, cataract can occur among young adults or children. Risk factors that may lead to getting cataract at a younger age include:

- Eye infections
- Some medicines (such as long-term steroid use, cancer medication)
- Eye injuries
- Exposure to intense heat or radiation
- Too much exposure to non-visible sunlight (called UV or ultraviolet light)
- Various diseases, such as diabetes, arthritis, or metabolic disorders
- Smoking
- Family history of cataract
- Nearsightedness (also called myopia)
- Infection or inflammation during pregnancy (such as measles or rubella)

**MYTH: The best time to have cataract surgery done is when it is first diagnosed**

**FACT:** Cataract removal is elective surgery, which means it is the patient’s choice when to undergo the procedure. Most people need surgery when the cataract causes enough vision loss to interfere with work, play or other day-to-day tasks, such as driving. Cataract surgery may also be done if the cataract is preventing treatment for another eye disease. You and your eye doctor should decide together when and if surgery is needed.

**MYTH: Taking aspirin can prevent cataract**

**FACT:** There are not enough facts or evidence to say whether aspirin prevents cataract. Aspirin in large doses can be harmful. Unless your doctor prescribes aspirin for an ailment, it’s best to avoid taking this medication on a regular basis.

**MYTH: Lasers are used to remove cataract**

**FACT:** In cataract treatment, the clouded lens is removed by a trained surgeon and then replaced with an artificial lens implant. The most common procedure, phacoemulsification (feihkuhuhmuhsuhsuhrkeishn), requires a smaller incision in the cornea or, less commonly, the sclera. The surgeon uses sound waves (an ultrasonic device) to break the lens into small pieces, and then suctions the tiny pieces out through the same incision. Next, the doctor will
insert the lens into the capsular bag, which is the original location of the lens. Cataract surgery is usually conducted as an outpatient procedure.

Sometimes after the phacoemulsification procedure, the capsular bag that remains in your eye can become cloudy. This is called an after cataract or posterior capsular opacification. If this happens, your doctor may suggest laser surgery to make a small hole through the cloudy capsule. This hole will let you see clearly again.

**MYTH: Cataract can be treated with eye drops**

**FACT:** Surgery is the only proven treatment for cataract. Cataract cannot be treated with medicines. At this time, there is no FDA-approved medicine for cataract, although this is an active area of research.

**MYTH: Cataract surgery is dangerous**

**FACT:** Cataract surgery is a delicate operation. Yet, it is one of the safest operations done today.

More than 98% of surgeries are successful. Fewer than 2% of cases have complications such as inflammation, bleeding, infection and retinal detachment.

**MYTH: It can take months to recover from cataract surgery**

**FACT:** In many cases, patients often can see well enough to begin normal activities a few days after having cataract surgery. Your vision will continue to improve over the following weeks and months. However, if you have additional eye problems, such as glaucoma, your recovery time may take longer.

**MYTH: Taking Vitamin E or Vitamin C can prevent cataract**

**FACT:** Some research centers are studying the link between these vitamins and cataract prevention. However, there has not been proven evidence for the link. It may be possible a diet high in fruit and vegetables containing Vitamin C, E, A and multivitamin-mineral supplements could be protective against cataracts.