GuidanceResources®



Cataracts

A cataract is a clouding of the lens in the eye that affects vision. Many people associate cataracts with being elderly, but people can have an age-related cataract in their 40s and 50s. However, cataracts that develop during middle age are usually small and do not affect vision. It is after age 60 that most cataracts begin to adversely influence vision. By age 80, more than half of all Americans either have a cataract or have had cataract surgery.

Cause

The lens is a clear part of the eye that works much like a camera lens. It focuses light onto the retina at the back of the eye, where an image is recorded. The lens also adjusts the eye's focus, letting us see things clearly both up close and far away. The lens is made of mostly water and protein. The protein is arranged in a precise way that keeps the lens clear and allows light to pass through it.

As people age, some of the protein may clump together and start to cloud a small area of the lens. This is a cataract. Over time, the cataract may grow larger and cloud more of the lens, making it harder to see.

Researchers suspect that there are several causes of cataracts, such as smoking and diabetes. Or, it may be that the protein in the lens just changes from the wear and tear it takes over the years.

Types of Cataracts

Although most cataracts are related to aging, there are other types of cataract:

- Secondary cataract: Cataracts can form after surgery for other eye problems, such as glaucoma.
 Cataracts also can develop in people who have other health problems, such as diabetes. They are sometimes linked to steroid use.
- Traumatic cataract: Cataracts can develop after an eye injury, sometimes years later.
- Congenital cataract: Some babies are born with cataracts or develop them in childhood, often in both
 eyes. These cataracts may be so small that they do not affect vision. If they do, the lenses may need
 to be removed.
- Radiation cataract: Cataracts can develop after exposure to some types of radiation.

Symptoms

The most common symptoms of a cataract are:

- Cloudy or blurry vision
- Colors seem faded
- Glare. Headlights, lamps or sunlight may appear too bright. A halo may appear around lights

- Poor night vision
- Double vision or multiple images in one eye. This symptom may clear as the cataract gets larger.
- Frequent prescription changes in your eyeglasses or contact lenses

These symptoms also can be a sign of other eye problems. If you have any of these symptoms, check with your eye care professional.

Diagnosis

A cataract is detected through a comprehensive eye exam that includes:

- Visual acuity test: This eye chart test measures how well the patient sees at various distances.
- **Dilated eye exam:** Drops are placed in the eyes to widen (or dilate) the pupils. An eye care professional uses a special magnifying lens to examine the retina and optic nerve for signs of damage and other eye problems. Close-up vision may remain blurred for several hours after the exam.
- **Tonometry:** An instrument measures the pressure inside the eye. Numbing drops may be applied to the eye for this test.

An eye care professional also may do other tests to learn more about the structure and health of the eye.

Treatment

The symptoms of early cataracts may be improved with new eyeglasses, brighter lighting, anti-glare sunglasses or magnifying lenses. If these measures do not help, surgery is the only effective treatment. Surgery involves removing the cloudy lens and replacing it with an artificial lens.

A cataract needs to be removed only when vision loss interferes with everyday activities such as driving, looking at a computer screen, reading or watching TV. The patient and eye care professional can make this decision together. Once the patient understands the benefits and risks of surgery, they can make an informed decision about whether cataract surgery is right for them. In most cases, delaying cataract surgery will not cause long-term damage to the eye or make the surgery more difficult.

Sometimes a cataract should be removed even if it does not cause vision problems. For example, a cataract should be removed if it prevents examination or treatment of another eye problem, such as agerelated macular degeneration or diabetic retinopathy.

If the patient chooses surgery, their eye care professional may refer them to a specialist to remove the cataract.

If the patient has cataracts in both eyes that require surgery, the surgery will be performed on each eye at separate times, usually four to eight weeks apart.

Many people who need cataract surgery also have other eye conditions, such as age-related macular degeneration or glaucoma. Patients who have other eye conditions in addition to cataracts should talk with their doctor to learn about the risks, benefits, alternatives and expected results of cataract surgery.

Resources

Information on this page was gathered from documents found on the website for the National Eye Institute (NEI). The NEI is part of the National Institutes of Health (NIH), an agency of the U.S. Department of Health and Human Services. The NEI website is located at www.nei.nih.gov.

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