

CATARACT POLICY

CRITERIA BASED ACCESS

Referral for assessment of surgical treatment for cataracts is only available for patients whose visual impairment is attributable to cataract and who, after correction (eg with glasses or other adjustments), fulfil the following indications.

1. Before a referral is made, the referrer must confirm that:
 - a) The patient wishes to have surgery if it is offered.
 - b) The patient understands that the purpose of referral is for assessment of surgery only.
2. Cataract surgery should not normally be offered to patients with a visual acuity of better than 6/12 in the worst eye. This applies to both first and second eye surgery.
3. Patients with the following symptoms or clinical conditions may benefit from cataract surgery when their visual acuity in the worst eye is better than 6/12.
 - a) Patients experiencing significant glare and dazzle in daylight or difficulties with night vision when these symptoms are due to lens opacities. This indication applies particularly, but not exclusively to driving.
 - b) Patients requiring particularly good vision for employment purposes.
 - c) Difficulty with reading due to lens opacities.
 - d) Significant optical imbalance (anisometropia or anisekonia) following cataract surgery on the first eye.
 - e) Management of co-existing other eye conditions.
 - f) Refractive error primarily due to cataract
 - g) To improve visual acuity to better than 6/10 where activities vital to daily living would otherwise cease.
4. Cataract surgery/lens extraction should not normally be performed solely for the purpose of correcting longstanding pre-existing myopia or hypermetropia.
5. The reasons why the patient's vision and lifestyle are adversely affected by cataract and the likely benefit from surgery must be documented in the clinical records.
6. Providers will audit their indications for and outcomes of cataract surgery and justify them to commissioners.

Patients who are not eligible for treatment under this policy may be considered on an individual basis where their GP or consultant believes exceptional circumstances exist to warrant deviation from the rule of this policy.

Individual cases will be reviewed at the Commissioner's Individual Funding Request Panel upon receipt of a completed application form from the patient's GP, Consultant or Clinician.

Smoking cessation is recommended for all patients considering the possibility of surgery. For help to quit smoking please contact your local Stop Smoking Service or contact your GP Surgery.