Cataract surgery



If you have referred an animal for cataract surgery, there are a few important things you should know and do to give the animal the best chance at a positive outcome.

Animal owners: Please give this information sheet to your veterinarian if you have elected for cataract surgery.

Before cataract surgery

- A general physical examination is needed including examination of the skin, teeth and ears. Any infections should be resolved before surgery. If dental disease is present, a dental cleaning should be done at least four weeks before the surgery date.
- Diabetic dogs should be well regulated and clear of urinary tract infections (UTIs). A urinalysis and urine culture should be completed one week before the surgery date. Ketonuria indicates diabetic control is not optimum. Urinary tract infections will require resolution prior to surgery. The surgery will be rescheduled if either of these conditions are detected.
- Two weeks before cataract surgery, please conduct the following tests on your patient:
 - complete blood count (CBC)
 - biochemistry
 - urinalysis
- All dogs with cataracts of immature, mature or hypermature stages should be treated with topical Voltaren (diclofenac) twice daily to control lens-induced uveitis. This should be initiated at the time of diagnosis of the cataracts and must be continued until surgery. Dogs should be on topical antiinflammatory medications for at least two weeks before surgery.

Following cataract surgery

- The most common post-operative complications are elevations in intraocular pressure and corneal ulcerations.
- Our regular recheck schedule is within 24
 hours of the client returning home after
 surgery, then at one week, three weeks, six
 weeks, 12 weeks, six months and yearly after
 surgery. Overall, it is recommended that
 these rechecks be performed by a veterinary
 ophthalmologist. However, if your client is
 not located in the Saskatoon area, you may
 be responsible for the majority of the followup after cataract surgery.
- If you will be performing the majority of the rechecks, we ask that rechecks be performed similar to our schedule detailed above.
- At each recheck, we ask that you perform bilateral Schirmer tear tests, fluorescein stain, and intraocular pressure measurements.
 Although each case may vary some guidelines for treatment are provided below:
 - If the intraocular pressure is 25-35mmHg, please initiate topical Cosopt (dorzolamide/timolol combination) three times daily. Re-evaluate the intraocular pressure within 24 hours.
 - If the intraocular pressure is 35 mmHg or greater, please initiate Travatan or Xalatan (a prostaglandin analogue) twice daily.
 Re-evaluate the intraocular pressure within 24 hours.

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- If a corneal ulceration is present, please temporarily discontinue the topical prednisolone acetate and increase the Voltaren frequency to compensate. If the ulcer is complex in nature, assessment by an ophthalmologist is recommended as many of these ulcers require surgical repair. Re-initiate the topical prednisolone acetate when the ulcer has resolved.
- If the STT is less than 12 mm/min, please initiate topical Optimmune twice daily and continuetopical lubrication.

To aid in the best care and treatment regime of the patient, we ask that you contact us with your recheck findings and any medication changes. Please call the WCVM Veterinary Medical Centre (Small Animal Clinic) at 306-966-7126.

For less immediate advice, please email wcvmeyevet@gmail.com.

For more information, contact:

Small Animal Clinic WCVM Veterinary Medical Centre 306-966-7126 | vmc.usask.ca