

General Commissioning Policy

Treatment	Elective Eye Surgery
For the treatment of	Cataracts
Background	This commissioning policy is needed in order to clarify the position for NHS Hull Clinical Commissioning Group (CCG), against a background of increasing geographical variability in patient access to this surgical procedure. (See Ref 1&2)
Commissioning position	<p>NHS Hull CCG commissions elective cataract surgery in line with national guidelines from the Royal College of Ophthalmologists (See Ref 3) and Clinical Knowledge Summaries (See Ref 4)</p> <p>Patients with the following symptoms should be referred to their optometrist for clinical diagnosis.</p> <ul style="list-style-type: none"> • A dimming/blurring of vision • Lights may appear too bright • Glare from lamps or the sun • Poor night vision • Double vision or multiple images in one eye • Dulled colour vision <p>Cataracts usually develop gradually, and are not generally associated with pain, eye redness or other acute symptoms unless they are extremely advanced. Rapid and/or painful changes in vision are suspicious for other eye diseases and should be referred for specialist opinion.</p> <p>A GP or optometrist may refer patients to a Consultant Ophthalmologist for an assessment for cataract surgery. The hospital ophthalmologist will ensure the patient meets the following criteria:</p> <ul style="list-style-type: none"> • Recent sight test results (corrected by spectacles/contact lenses as appropriate) demonstrate reduced visual acuity. Normal visual acuity on the Snellen Scale is 6/6. (See Ref 5) • The cataract accounts for the visual symptoms • There is clinical evidence which demonstrates that the visual symptoms severely impair their ability to carry out daily living tasks (eg. reading, working, driving, living independently, caring for others etc.)

Notes

1. This Policy will be reviewed in the light of new evidence, or guidance from NICE.
2. General Commissioning Policies are agreed by the Planning and Commissioning Committee on behalf of NHS Hull CCG.

	NHS Hull CCG supports those patients who meet the above criteria. Patients not meeting these criteria should be referred via the Individual Funding Request panel (IFR).
Effective from	January 2015
Summary of Evidence/Rationale-	<p>A cataract describes a condition where the naturally clear lens of the eye gradually turns opaque with increasing age. It usually develops over a period of time, causing a gradual deterioration in eyesight, and may eventually lead to blindness. As the condition affects over a third of people aged over 65, cataract surgery continues to be the commonest elective procedure in day surgery performed in the UK. During cataract surgery the clouded natural Lens of the eye is removed and clear vision is most commonly obtained with an implanted artificial lens. In the vast majority of cases the surgery involves local or topical anaesthesia which markedly reduces operative and recovery time.</p> <p>80-90% of patients report a benefit from surgery (see Ref 4), which include improved clarity of vision and improved colour vision. This in turn has implications for a positive impact on other health and social care needs including a reduction in slips, trips and falls amongst the elderly.</p> <p>Cataracts can develop in one or both eyes, and one eye can often be more affected than the other. Second eye surgery confers significant additional gains in visual function in everyday activities and quality of life above and beyond those achieved after surgery to the first eye, including ability to meet the DVLA driving standard. (See Ref 6)</p> <p>There are risks associated with cataract surgery, some common and many very rare; however complications are usually treatable and reasonably good outcomes can be expected. (See Ref 5)</p>
Date	June 2017
Policy to be reviewed by	June 2018
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References:

1. NHS Atlas of Variation, (cataract spend, cataract admissions) available at: www.sepho.org.uk/extras/maps/NHSAtlas/atlas.html
2. Royal College of Ophthalmologists (2011). Don't turn back the clock: Cataract surgery – the need for patient-centred care. http://www.rnib.org.uk/getinvolved/campaign/yoursight/Documents/Cataract_report.pdf
3. The Royal College of Ophthalmologists (RCOphth). Cataract surgery guidelines. 2010 http://www.rcophth.ac.uk/core/core_picker/download.asp?id=544&filetitle=Cataract+Surgery+Guidelines+2010
4. Clinical Knowledge Summaries Cataracts (2010) <http://cks.nice.org.uk/cataracts>
5. Royal National Institute for the Blind – The Criteria for Certification <http://www.rnib.org.uk/eye-health-registering-your-sight-loss/criteria-certification>
6. NHS UK <http://www.nhs.uk/conditions/Cataracts-age-related/Pages/Introduction.aspx>

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