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## HEALTH

# I can finally read without glasses – why cataract surgery was the best money I ever spent

Most cataracts are caused by ageing, but surgery to replace the natural lens is quick and incredibly effective. Here's what to expect

By Sharon Walker

Today I sat outside in the bright glaring sun, reading the papers. Sunglasses on, but without reading glasses perched precariously over the top. If you're under 50, this might not seem like a great achievement, but as someone who has spent the last 10 years looking for their glasses, it is, if not life-changing, then certainly much more convenient. Reader, I have a new eye and it's bloody marvellous.

I am at the age where bits and pieces start crumbling and packing up and my right eye was the first to go, (my right knee is also on its way out, but that's another story). When I closed my left eye, my right was blurry. Not blind exactly, but like being in a thick London smog circa 1952. I might not have noticed for another six months had I not squirted suncream in it by mistake one hot, sunny day last summer. Washing my eye out with water didn't seem to help; when I closed my left eye, the right one was blurry. I rushed off to Boots for eyewash. Eight eye baths later. Still blurry. Had I done permanent damage? Or perhaps a defect had been lurking unnoticed?



Sharon Walker, who had lens replacement surgery for a cataract in her right eye Credit: Clara Molden

An 'emergency' appointment at an optician the next morning revealed the real culprit. The natural lens in my eye was cloudy, not thanks to a blob of suncream, but as a result of protein build-up. In short, I had a cataract. It's all part of the ageing process, and there's not much you can do to prevent them. Still, I was miffed. Weren't cataracts an older person's

problem? My mother-in-law just had the op last year and she's 83. I was still in my 50s (just).

It's true, the optician told me, that cataracts are more common after 80. "Fifty to 60 per cent of 80-year-olds have some level of cataracts. But after 50, 10 per cent of normal healthy people will have some

## How cataracts affect vision

#### **Cataracts**



#### **Normal**



lens opacity." I was one of the lucky 10 per cent to be affected in their 50s. I say 'lucky', because this now meant I could now buy a new fully functioning lens, thanks to miracles of modern science and potentially restore my 20/20 vision.x

Six months later I found myself choosing my new eye from a range of options at Moorfields Private Eye Hospital, on New Cavendish Street. It had still taken me a while to pluck up the courage because, obviously, getting a new lens would mean cutting out the old one. Cataract surgery is pretty safe, but there are none-the-less risks, about one in a 1,000 will suffer permanent vision loss if the retina becomes loose and detaches from the back of the eye. A serious eye infection, endophthalmitis, can also lead to blindness, if not treated promptly.

To say I was anxious is something of an understatement, hence I was pretty careful when it came to choosing a surgeon.

### The consultation

I'd found my way to Dr Vincenzo Maurino, through both personal recommendation and forensic examination of his Trust Pilot reviews, which revealed plenty of happy customers. He had trained at Moorfields Eye Hospital, a world-leading teaching hospital, in 1998 and now taught other surgeons there himself. He had performed around 25,000 cataract ops, both privately and for the NHS. So he was extremely experienced. He was also a wonderfully calming presence.



Dr Vincenzo Maurino, senior consultant eye surgeon and Director of Cataracts at Moorfields Private Eye Hospital Credit: Clara Molden

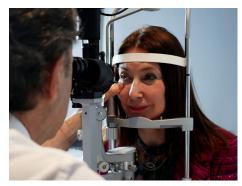
"The surgery is over in a few minutes and results almost invariably are very, very good. You will experience gentle touching and lots of light from the operating light, but no pain whatsoever," Mr Maurino said.

The cataract is removed using ultrasound energy, which liquifies the lens. "The cataract is emulsified and removed through a machine that resembles a little pen." I wished I hadn't asked, but Mr Maurino tells me it is the most common procedure performed on humans, with a low complication rate.

Four million cataract operations are performed a year in the US, while half a million are performed in the UK. Some people even have the op when they don't strictly need it to simply ditch their reading glasses, as was the case with 10 per cent of his patients. In my case, there wasn't a choice.

## Choosing my new lens

Now I just had to decide on a lens. You can choose between the standard monofocal lens you'd get on the NHS, and which was covered by Bupa, but that would mean while I'd have good distance vision I'd still need glasses.



You can choose between three lenses when you have replacement surgery Credit: Clara Molden

Then there was the extended-depth focus (EDOF), which would reduce the need for glasses for close work, though I might still need them for reading. Or I could stump up £1,000 for a trifocal lens, which gives best vision at every distance and would, hopefully, allow me to ditch my reading glasses. The downside of this, other than the cost, was the possibility of glare and halos of lights at night. That didn't sound too bad to me, though it drives some people nuts. The woman next to me in the waiting room told me she thought of the halos "as fairies or angels", which should perhaps have been a red flag, but as someone who is quite vain and finds constant scramble for glasses annoying, did nothing to put me off.

## The operation

The following Saturday I arrived at Moorfields Private Eye Hospital, in Old Street, at 8am (they also operate at the New Cavendish Street centre, but only during the week). The nurse popped a little pellet in my eye to dilate the pupil, along with numbing drops. Mr Maurino put a red dot above it. (I was wonderfully reassured by the sheer number of people checking which eye was due for the op.) And reminded me to keep my eye still during surgery.

The sedative went in through an IV in my hand, followed by a pleasant woozy feeling. They place a sterile drape over your face to keep the operating area clean. Then, as promised, came the most stupendous light show, a kaleidoscope of swirling colours, that looked like the Northern Lights. This is caused by the operating light and the liquid used to keep the eye open. ("We call it Aurora Ocularis, rather than the Aurora Borealis," Mr Maurino later told me at the checkup). Somewhere in the middle distance, I could hear Mr Maurino. "Relax, don't move, everything is cool."

I didn't see a knife or a suction tube or anything remotely frightening. Minutes later I was back in the recovery room. After a quick debrief with the nurse, I was sent home with a bag full of eye drops wearing a jaunty clear plastic eye patch. Mr Maurino's business card was in the bag, with his personal mobile number. Now that's customer service.

Fortunately, I didn't have to call it. I'd been warned my new eye could be blurry for up to a week and I might experience a dull ache. It was nothing that couldn't be dealt with by popping a paracetamol. The next day my vision was pretty much back to normal. But better! In the first week I was quite amazed by just how bright and cheerful the world suddenly looked. Like someone had switched up the brightness dial on the TV.



Sharon at a post-op check-up Credit: Clara Molden

### **Aftercare**

Two days after surgery I was back at work, no problem. It would be a week before I could go to the gym or do any intense exercise (increased pressure in the eye, which could lead to glaucoma), or wash my hair (water in the eye can lead to infection).

Three weeks later I headed back at New Cavendish Street for my post-surgery check up. When I first arrived here I could barely see the eye chart with my bad eye, let alone make out any letters. This time I can read the second smallest row of letters easily. The optometrist explained that I now have better than 20/20 vision, in my new bionic eye.

The only issue now is my old 'good' eye, now feels like a bit of a dud and blurry by comparison – it also has a cataract. But now I'm almost looking forward to the next op.



Sharon now has better than 20/20 vision – and is planning to get her other eye treated Credit: Clara Molden

## What are cataracts?

Cataracts are the result of protein build-up in the eye, which makes the lens cloudy. This prevents rays of light reaching the retina, leading to blurry vision.

#### What causes cataracts?

The chief risk factor is ageing. Typically 50-60 per cent of people in their 80s will have cataracts.

They are also triggered by exposure to sunlight. So if you spend a lot of time on holiday in sunny destinations, or sailing for example, a good pair of UV sunglasses is essential.

Other factors like diabetes, high blood pressure, eye injuries, smoking and certain medications increase the risk.

### Who diagnoses a cataract?

Cataracts are often diagnosed by an optician or GP during a routine eye examination.

## How much does cataract surgery cost?

Private cataract surgery prices from the UK typically range from £1,995 to £4,725.

An initial consultation at Moorfields Private Eye Hospital is £295. Cataract surgery costs £2,920, which includes a standard monofocal lens. (If you wear glasses you will still need them after surgery). Premium lenses incur an additional cost.

## How long will you wait for cataract surgery on the NHS?

NHS cataract surgery waiting times vary, with the target being 18 weeks from referral to treatment, but actual waits can be significantly longer, potentially several months or even over a year, depending on location and hospital.