Lens & Cataract

Lens :

- Derived from ectoderm, avascular, highly elastic; but it hardens with age.
- Lens Capsule -> Lens Epithelium -> Differentiating Lens Fibers -> Mature Lens Fibers
 - > <u>Lense capsule</u>: thick, homogeneous external lamina (proteoglycans, collagen 4) -> protection & attachment for zonules.
 - > <u>Lens epithelium</u>: cuboid cells, only in the ant. surface
 - > <u>Differentiating Lens Fibers</u>: greatly elongated, cytoplasm filled with crystalline, have nuclei.
 - > Mature Lens Fibers: No nuclei, densely packed -> unique Transparent structure.

Cataract :

- MCC of treatable blindness.
- Opacification of the lens -> cloudy lens -> scatters light -> hazy image.
- Types of cataract:

1) Nuclear Cataract:

- o MC type ... in the central part
- Due to condensation & deposition of brown pigment.
- Present with a shift to near sightedness

2) Cortical cataract:

- In the lens cortex
- Due to changes in the water content of the periphery of the lens causes fissuring.
- Present with glare and light scattering at night.

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3) Posterior subcapsular cataract:

- At back of the lens adjacent to the capsule
- Present with disproportionate symptoms for their size
- Steroid induced



- Others :

- Immature cataract : Has Some transparent protein content.
- Congenital Cataract: lamellar, polar sutural

- Causes:

- Age -> MCC, cumulative exposure of environmental Fx, smoking, UV-B, blood sugar
- Ocular causes -> Trauma, Uveitis, High myopia, Topical medications/ steroid, tumors
- Systemic -> DM, steroid, infx, Myotonic dystrophy, A. dermatitis, Down's, Lowe's, Fabry

Mental-Rebord. wypotonia, Avertexia - yeosomal

PTA, Bhosphaturia, 501 Ghasna disease

- Symptoms:
 - loss vision, Glare, Change in refractive error
 - Amplyopia -> failure of maturation
- Signs:
 - Decreased visual acuity
 - Black spot -> against the red reflex
 - Leukocoria -> R/O other causes .. congenital or Retinoblastoma!! ,
- Treatment: surgical 🐓 if it's reducing the QOL or bilateral, by topical, LA & GA
 - Phacoemulsification -> smaller incision, Sutureless

 2 Corneal Incision -> Capsulorhexis -> Phacoemulsification : break it up by U/S waves then suck it -> Irrigation and Aspiration -> Lens insertion-> salt water to seal the incision.
 - Extra Capsular Cataract Extraction (ECCE)-> remove the lens, but leaving the capsule
 - Manual small incision cataract surgery (MSICS), through a self-sealing scleral tunnel wound in the sclera which, ideally, is watertight and does not require suturing
 - Intra Capsular Cataract Extraction (ICC E) -> lens & capsule are removed, high rate of complications
- Complications :
 - 1. Vitreous loss -> vitrectomy at operation time and delay of IOL
 - 2. Iris prolapse: immediately post-op. -> surgical repair
 - 3. **Endophthalmitis** -> serious but rare infective .. S. Aureus , Pseudomonas sp.
 - → painful red eye, reduced visual acuity, hypopyon
 - → Tx: emergancy; intravitreal broad spectrum Abx
 - 4. Postoperative corneal astigmatism by tight sutures
 - 5. Macular edema -> topical NSAIDs and steroids
 - 6. Retinal detachment
 - 7. Opacification of the posterior capsule / 20% of pt, residual epithelium forms a scar —> Tx: out-pt; ndYAG laser