



Service Priorities and Programmes
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Submitting author: Dr Janice Jing Chee Cheung

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Optimal timing for postoperative review following uneventful phacoemulsification – a prospective crossover study

Dr. Jennifer Shum^{1,2} Dr. Janice Cheung^{1,2} Ms Monica MN Lee^{1,2,3} Mr. Wing Kan Pang^{2,3} Dr. Kenneth KW Li^{1,2,3,4}

1Department of Ophthalmology, United Christian Hospital, 2Department of Ophthalmology, Tseung Kwan O Hospital, Hong Kong 3Wu Ho Loo Ning Cataract Centre, Hospital Authority 4Department of Ophthalmology, The University of Hong Kong

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Introduction

The current local practice is to review the patient one day after cataract surgery. This is more of a convention rather than supported by evidence-based studies. Previous studies have tried looking into the optimal time for first time follow-up in other countries. It is important to find a safe and efficacious timing for first time follow-up in order to balance safety, patient's satisfaction and effective use of resources.

Objectives

To determine a safe and efficacious timing for first time review after uneventful phacoemulsification comparing both eyes of the same patient.

Methodology

A prospective study of 72 eyes randomized to 2 groups, group 1 received first follow-up after uneventful phacoemulsification on post-operative day 1 (D1) while group 2 received first follow-up on post-operative day 7 (D7). The fellow-eye crossed over to the opposite group following uneventful phacoemulsification. All cases were reviewed by an ophthalmic nurse specialist at 2 hours after surgery and follow-up schedule was protocol driven. Doctors were blinded during first time review after phacoemulsification. Postoperative findings and complications were compared between the 2 groups. All patients underwent a standard satisfaction survey at day 7 post-operatively.

Result

At 2 hours post-operatively, only 7 eyes had IOP > 30mmHg (0.09%), two of which had elevated IOP in both eyes. No serious complications were encountered in both

groups and between patients seen on D1 and D7 after surgery, Two cases had complications on D1 while no new complications were noted on D7 post-operatively. One case had IOP of 14mmHg at postoperative 2 hours but had IOP of 37mmHg on D1. Another case had IOP of 34mmHg with no wound leakage on D0 but was found to have wound leak on D1, which resolved with conservative treatment. Both groups achieved good visual acuity on D7 (logMAR -0.23 vs -0.25) with no significant difference ($p=0.71$). The majority of patients (68.7%) did not show any preference over postoperative schedule, with only 21.9% preferred D7 and 9.4% preferred D1 follow-up. Our study supports that D7 follow-up after uneventful phacoemulsification is safe. This is supported by both clinical outcome and patient satisfaction that are comparable between the two groups.