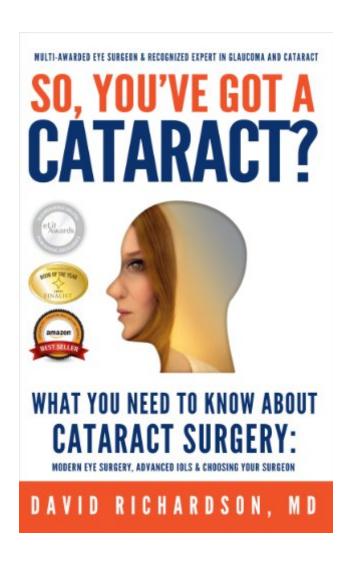
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So You've Got A Cataract?: What You Need To Know About Cataract Surgery: A Patient's Guide To Modern Eye Surgery, Advanced Intraocular Lenses & Choosing Your Surgeon





Synopsis

A BOOK ABOUT CATARACTS FOR PEOPLE WITH CATARACTS. NO MEDICAL JARGON! NO PROCEDURAL TERMINOLOGY! - from one of America's Most Compassionate Doctor, Dr. David RichardsonWhy YOU NEED This Cataract Surgery Booklt's a curious thing. People with cataracts often have very poor vision, making it difficult for them to read. And yet, their physicians typically ask them to sift through stacks of educational pamphlets and paperwork on cataracts. The documents are often single-spaced with small print and thin margins - in short, a nightmare for someone with cataracts. What's more, the information is oozing with hard-to-understand medical jargon and procedural terminology. Needless to say, it's a frustrating experience. I really want my cataract patients to have an entirely different experience. That's why I went to work on "So, You've Got a Cataract?" This is a book about cataracts for people with cataracts. My goal is to provide the information you need to learn about your eye's condition and to make good, safe decisions about treatment. The book covers, in a language that anyone can understand, basic information about how the eye works and what is useful to know about a cataract. If you are considering modern cataract surgery, you'll find most of what you need to know within the pages of this book. It will also help you prepare for surgery. You'll learn what happens during the actual procedure and what to expect afterwards. The larger page size and Kindle eBook format were specifically chosen for this project as they allow for enlarging the text size making it easier for those with poor vision to read. Buy a Book. CHANGE A LIFE!Proceeds from the sale of this book will be donated to a non-profit organization devoted to preventing blindness. When you buy the book, you are not only educating yourself, but helping change lives as well. What You Will Learn... About Cataracts How the Eye Works What Is a Cataract?Cataract SymptomsWhen to Consider TreatmentMyths about Cataract TreatmentWhat You Need To Know About Cataract SurgeryModern Cataract SurgeryA word about no-stitch surgeryPreparing For Cataract SurgeryThe Weeks Before SurgeryThe Night Before SurgeryWhat To Expect The Day of SurgeryAt the Surgery CenterAfter the ProcedureThe Days After SurgeryActivitiesWhy You Might Still Need GlassesIntraocular LensesWhy You Need An ImplantYour OptionsThe Decision PointsRisks of Cataract SurgeryPossible Complications Cataract Surgery and Glaucomalf You Have Early or Well-Controlled Glaucomalf You Have Moderate or Glaucoma Requiring the use of Multiple DropsIf You Have Advanced or Poorly-Controlled GlaucomaCataract Surgery with Other DiseasesDiabetic RetinopathyMacular DegenerationProstate Medications A Word About Laser Cataract Surgery Enter the Femto Laser Appendices How To Choose A Cataract SurgeonSample Document "INFORMED CONSENT"

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Customer Reviews

As other reviewers have written, this is a good book for people with cataracts who are unfamiliar with the surgery which is the only proven treatment for the condition. It is written clearly, and while the author minimizes the use of medical jargon, he is not condescending. I do have some reservations, however. The first is typical of materials on this subject. For some reason, doctors and others involved in cataract surgery boast of its 90% success rate. Well, last year there were some 4 million cataract surgeries in the U.S. A 90% success rate means that some 400,000 of those surgeries failed. All those people went through the trauma and expense of this procedure and could see no better afterwards than before (the doctorsâ ™ definition of failure); some were much worse off. If this is a fact, it should surely be disclosed; but itâ ™s hardly something to be proud of, or something which should allay a prospective patientâ ™s fears. The second is more subtle. While the author mentions some complications which may arise during and after cataract surgery, his descriptions of them can be too brief and anodyne. For example, he mentions the risks of intraoperative floppy iris syndrome (IFIS) in the eyes of men who are taking (or have ever taken) an alpha blocker for an enlarged prostate. It turns out that this drug not only relaxes the muscles around the prostate and bladder to facilitate urination, it also weakens the iris dilator muscles in the

eyes raising the risk that the pupil could become un-dilated during surgery with potentially disastrous consequences. Dr. Richardson concludes (p. 55) that your surgeon will â ceneed to take extra precautions prior to or during your surgery to minimize the risks of IFIS.â •Well, yes ... but. First, my description is much stronger than Dr.

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