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Service (sector) Cataract N° CEP

Cataract surgery outcomes in an elderly low-income population of Sao Paulo city

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Purpose: Cataract is considered the main cause of blindness in developing countries. The purpose of this study is to investigate cataract surgery outcomes in an elderly low-income population from Sao Miguel Paulista district in Sao Paulo city, Brazil.

Methods: A total of 801 residents of a low-income neighborhood in Sao Paulo city (Sao Miguel Paulista district), aging 60 years and older (range: 60-90 yrs; mean: 69±6.1yrs; 25.84%-N=207 males and 75.16%-N=594 females) underwent a complete ophthalmologic exam as part of a previous epidemiological survey. Previous cataract surgery was self-reported and confirmed by biomicroscopy. Refractometry and visual acuity with best correction were performed. Visual status was classified according to the following: near normal - >20/60 in both eyes; unilateral/bilateral visual impairment – VA<20/60 to 20/200 in the worst eye and ≥20/200 in the better eye; unilateral blindness – VA <20/200 in the worst eye and VA ≥20/200 in the better eye; moderate blindness – VA<20/200 in the worst eye and <20/200 to 20/400 in the better eye; severe blindness – VA<20/400 in both eyes.

Results: A total of 54 participants (6.74%) had previous cataract surgery with 81 eyes operated (27 unilateral and 27 bilateral). Out of these, 13 eyes (16.0%) were blind. Considering presenting visual acuity of those previously operated, 27.8% were classified with normal or near normal VA, 5.6% with moderated blindness and 3.7% with severe blindness. With best correction, the corresponding percentages were 35.2%, 0.0% and 3.7%. Intra-capsular cataract extraction was performed in only 5 eyes (6.2% of operated cases). Surgical complications were a major cause of blindness in these eyes.

Conclusions: Blindness, particularly related to cataract, is a significant problem in this low-income elderly population. Emphasis on the quality of cataract services and post-operative follow-up should be pursued to provide better outcomes. These findings provide basis for future planning of eyecare policies towards prevention of blindness due to cataract.