Comparison of patients systemic and ocular characteristics between NHS & Independent sector in the trainee involved high-volume cataract surgery

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Introduction

- Independent sector (IS) are privately owned treatment centres providing NHS and private care.
- NHS England plans to utilise more IS centres to reduce waiting times with high-quality care in non-urgent elective surgical cases.
- Since the introduction of IS, there has been a debate about whether referrals are cherry-picked by the IS, which could have an impact on ophthalmic surgical training.
- We aimed to compare the cataract referrals received in the NHS and IS and evaluate the patient complexities at both sites involving a trainee cataract surgeon.

Methodology

- We used the cataract risk stratification tool published by RCOphth to screen patients for risk factors (RF) and assign a complexity grading to each patient.
- Data was collected from theatre lists across 4 weeks involving a trainee cataract surgeon in the NHS and in the IS on an NHS list. The Consultant supervisor was the same in both cohorts.
- Grade 4 was deemed not to be fit for high volume lists.

Complexity Grading	Description/Risk Factors
1	Routine, no risk factors
2	2 risk factors: • Difficult access /Deep-set eye/Difficulty lying flat • Anxious / jumpy patient • Communication issues (language, deafness, dementia) • Multiple intravitreal injections • Poor pupil dilation (no hooks/ring required) • Tamsulosin (alpha blockers) • Dense, mature or brunescent cataract • Shallow anterior chamber • Vitrectomised eye • High myopia/hypermetropia • >85yrs • Corneal guttata or early Fuchs • Previous complications with first eye cataract surgery.
3	3 of the above, or any of: • Pseudoexfoliation • Small pupil (requires hooks / ring) • Very difficult access • Severe positional or mobility issues • Nystagmus • Corneal graft or previous trabeculectomy
4	Phacodonesis 'Black cataract' Nanophthalmia Posterior polar cataract, Previous significant trauma

Results

- There were 37 patients in each cohort with 9-12 patients per list.
- No significant statistical difference was found in the complexity grading between both sites (p=0.92).

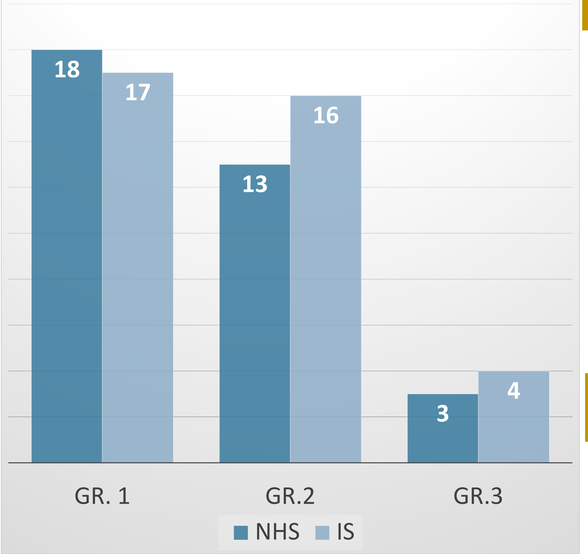
Systemic Risk Factors

	Diabetes	Anxiety	Tremor	Positioning difficulties	Age > 85
IS	5	10	3	4	1
NHS	20	1	1	6	2

Ocular Risk Factors

	Floppy Iris	High refractive error	Dense cataract	Small Pupil	Deep set eye
IS	3	3	3	2	3
NHS	2	2	5	4	0

Complexity grading of patients



Conclusions

- There were similar numbers of low and medium-risk cataracts in both the NHS and the IS.
- Trainees can expect to face a range of complex cases whether training in the NHS or the IS. The training was not compromised in either sector.
- The NHS patients were more likely to have multiple risk factors.
- Our study was limited by a small sample size which can limit the conclusions.

References

https://www.rcophth.ac.uk/wp-content/uploads/2022/02/High-Flow-Cataract-Surgery_V2.pdf