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YAG Posterior Capsulotomy

The modern technique of cataract surgery involves removing the cloudy contents of the eye's natural lens, while leaving the clear outer membrane (called the capsule) to hold the new intraocular lens in place. This capsule has cells on it which will, in some cases, continue to produce lens fibers. These fibers will form little beads or "pearls" on the lens capsule, forming a secondary membrane or posterior capsule fibrosis (PCF). When these cells accumulate they cause a blurring of vision similar to that which one experiences with a cataract.

Although the blurred vision produced by this membrane can be quite significant, fortunately, there is a very easy way of clearing cloudy capsule. During the procedure, called YAG Laser Capsulotomy, a special laser (**Y**ttrium **A**luminum **G**arnet) is used which utilizes a narrow wavelength of light to disrupt the opacification on the posterior lens capsule. The energy emitted from the laser forms a hole in the lens capsule, removing a central area of the opacification. There is absolutely no pain involved in this procedure and patients can resume their normal activities immediately. The patient will usually notice an improvement as soon as the pupil, which is dilated, goes back to its normal size.

Approximately 20% of patients who undergo cataract extraction with placement of an intraocular lens into the posterior lens capsule will eventually undergo a laser capsulotomy, although a PCF may appear in up to 50% of patients who have undergone cataract surgery. The average time after cataract extraction for this procedure to be performed is two years, but it may be performed as early as three months after cataract removal, or as late as ten years afterward, depending on the extent that the opacification interferes with one's quality of vision.

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