BMJ Open Royal College of Ophthalmologists' National Ophthalmology Database study of cataract surgery: report 8, cohort analysis of the relationship between intraoperative complications of cataract surgery and axial length

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ARSTRACT

Objectives To describe the relationships between axial length and intraoperative complications in patients undergoing cataract surgery.

Design Cohort analysis of the Royal College of Ophthalmologists' National Ophthalmology Database (RICOphth NOO).

Setting 110 National Health Service Trusts in England, Health Boards in Wales, Independent Sector Treatment. Centres and Guernsey.

Participants 820354 patients, aged 18 years or older, undergoing cataract surgery. Eligible operations were those from centres with at least 50 operations with a recorded axial length measurement and age at surgery between 1 April 2010. and 31 August 2019.

Interventions Phacoemulsification where the primary intention was cataract surgery alone.

Outcome measures. Posterior capsule rupture (PCR) and other recorded intraoperative complications.

Results 1211520 eligible operations were performed by 3210 surgeons. The baseline axial length was <21 mm (short. eyes) for 17 170 (1.4%) eyes, 21-28 mm (medium eyes) for 1 182:513 (97.6%) eyes and >28 mm dong eyes) for 11.837 (1.0%) eyes. The median age at surgery was younger for patients with long eyes than those with short or medium eyes. The rate of any intraoperative complication was higher for short eyes than medium or long with complication rates of 4.5%, 2.9% and 3.3%, respectively (p<0.001). PCR occurred in 1.40% surgeries overall, and in 1.53%, 1.40% and 1.61% of short, medium and long eyes, respectively (p=0.043, not significant at the 1% levels.

Conclusions Overall PCR rates for cataract surgery in RCOphth NOD contributing centres are lower than previously reported and there is little change in PCR rates by axial length. Short eyes were more likely to have an intraoperative complication than medium or long eyes.

INTRODUCTION

Cataract surgery is one of the most commonly performed operations with almost half a

STRENGTHS AND LIMITATIONS OF THIS STUDY

- -- This analysis is from the largest Royal College of Ophthalmologists' National Ophthalmology Database dataset to date and the findings are representative of those anticipated in English, Welsh and Guernsey ophthalmic departments with data from traditional National Health Service hospitals and the independent sector.
- -- The results for each intraoperative complication including the subdivision of posterior capsule rupture are influenced by small event rates in a large
- Almost half of patients had cataract surgery on both. eyes, which introduces patient-level correlation that impacts on the statistical comparisons.
- There may also be reporting bias as clinicians are required to select the presence of ocular copathologies and also report the occurrence of surgical complications.

million surgeries performed by the National Health Service (NHS) in England in 2019-2020.1 Both first and second eye cataract surgery are cost-effective, and have significant indirect societal and healtheconomic advantages including greater social inclusion and participation, improvements in mental health, reducing falls and incidence of road truffic accidents.

The Royal College of Ophthalmologists' National Ophthalmology Database (RCOphth NOD) was established over a decade ago in the UK to provide a national audit service allowing comparisons of surgery outcomes and complication rates between units and surgeons, and also for research. A number of RCOphth NOD analyses have been published for cataract surgery including



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