#### **ARTICLE**

## Cataract surgery practices in the United States Veterans Health Administration



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Purpose: To describe current cataract surgery practices within the United States Veterans Health Administration (VHA).

Setting: Veterans Health Administration hospitals in the U.S.

Design: Retrospective data analysis.

Methods: An initial e-mail containing a link to an anonymous 32-question survey of cataract surgery practices was sent to participants in May 2016. Two reminder e-mails were sent to nonresponders 1 week and 2 weeks after the initial survey was sent; the remaining nonresponders were called twice over a 2-week period. The data were analyzed using descriptive statistics.

Results: The response rate was 75% (67/89). Cataract surgeons routinely ordered preoperative testing in 29 (45%) of 65 sections and preoperative consultations in 26 (39%) of 66 sections. In 22 (33%) of 66 sections, cataract surgeons administered intracameral

antibiotics. In 61 (92%) of 66 sections, cataract surgeons used toric intraocular lenses (IOLs). In 20 (30%) of 66 sections, cataract surgeons used multifocal IOLs. Cataract surgeons in 6 (9%) of 66 sections performed femtosecond laser–assisted cataract surgery. In 6 (9%) of 66 sections, cataract surgeons performed immediate sequential bilateral cataract surgery. Forty-nine (74%) ophthalmology chiefs reported a high level of satisfaction with Veterans Affairs ophthalmology.

Conclusions: The survey results indicate that in cataract surgery in the VHA, routine preoperative testing is commonly performed and emerging practices, such as femtosecond laser—assisted cataract surgery and immediate sequential bilateral cataract surgery, have limited roles. The results of this survey could benchmark future trends in U.S. cataract surgery practices, especially in teaching hospital settings.

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ataract extraction is among the most frequently performed surgical procedures in the United States and can lead to significant improvements in quality of life.<sup>1</sup> However, few cataract surgery guidelines are backed by high-quality evidence, which might contribute to considerable variation in practice patterns at both the individual and hospital levels.<sup>2</sup> In addition, there is a dearth of information about cataract surgery practice patterns in the U.S. at present, with the most recent comprehensive surveys published in 2006<sup>3</sup> and 2012.<sup>4</sup> This gap is important because of the rapidly changing nature of cataract surgery practice, which is driven by cost, efficiency, and more patient-centered care.<sup>5–7</sup>

The Veterans Health Administration (VHA) is the largest integrated provider of healthcare and healthcare training in the U.S. and hence plays a significant role in shaping the current and future direction of cataract surgery. Herein, we surveyed all chiefs of ophthalmology to create a comprehensive picture of current cataract surgery practices in the VHA.

#### **MATERIALS AND METHODS**

Contact information for the VHA ophthalmology chiefs was obtained from the National Ophthalmology Program Office. An anonymous 32-question survey of cataract surgery practices (Table 1) was formulated through an online survey program. Most questions could be answered independently, which resulted in a varying denominator of respondents for each question.

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