

*Letter to editor*

**Patient reported evaluation of functional symptoms (PREFS): a simple method of ascertaining patient satisfaction post cataract surgery**

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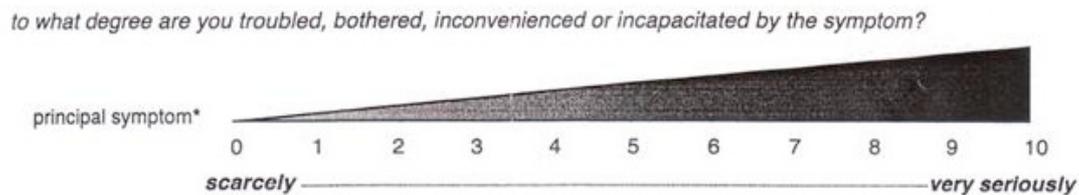
Dear Editor,

Cataract surgery remains the most commonly performed procedure within the NHS (HES online, 2009). Technical advances continue to influence indications for surgery such that now other measures of visual function (e.g. contrast sensitivity, glare) are being considered alongside visual acuity in making recommendations for surgery and for evaluating outcomes. Monocular visual acuity alone provides an incomplete assessment of surgical success. Thus various patient centred tools have been developed which aim to obtain self reported information relevant to a patient's every day visual experience in the context of their own environment (Lundstrom & Pesudovs, 2009; Frost et al, 1998). However, these questionnaires can often be complicated to use and to date no cataract specific UK relevant instrument has been identified which would be suitable for routine use in the NHS (Royal College of Ophthalmologists, 2010).

We propose a simple method to ascertain patient satisfaction (PREFS). We asked patients undergoing cataract surgery between October 2010 and April 2011 (n= 136) to grade their primary symptom on a visual analogue scale preoperatively (Figure 1). A score of zero indicated they were scarcely bothered and ten they were very seriously bothered by the specific symptom. They then graded the same symptom on a similar scale four months postoperatively via a phone call. The average PREFS score improved from 6.3 pre to 1.3 post operatively. All patients individually also showed score improvement irrespective of the listing clinician (Staff grade n=42, Nurse practitioner n= 7, ST1 n=1, ST3 and above n= 39, Associate specialist n= 42, Consultant n=11, n denotes the number of patients listed by each grade of clinician). PREFS can be used for any operative procedure and also to audit listing practices within a department. Clinicians whose patients do not regularly show improvement in scores despite uncomplicated surgery may need to re-evaluate their listing practice. One caveat is that patients might feel obliged to report an improvement. However we feel that those who have not benefitted will certainly mention this.

**Key-words:** Cataract surgery, patient satisfaction, visual analogue scale

**PREFS visual analogue scale**



Received on: 21.05.2012 Accepted on: 23.05.2012  
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**Source of support: nil. Conflict of interest: none**