

Nurses' Role Regarding Postoperative Patients with Cataract Needs and Problems

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Abstract:

Background: Cataract is considered as a significant global health problem and represents the most important cause of visual impairment worldwide. Extraction of cataract is a highly effective surgical procedure to improve quality of life. The nurse plays a major role through identifying health needs and assessing care given after surgery. **Aim:** The present study aimed to assess nurses' role regarding problems and needs encountered among postoperative cataract patients. **Research design:** Descriptive exploratory design was utilized. **Setting:** The present study conducted in Ophthalmology Department and Out Patient ophthalmology Clinics at Zagazig University Hospitals. **Sample:** The study subject includes 100 patients with cataract surgery from both sexes and with age ranging between 30-80 years. 36 nurses dealing with postoperative cataract patients. **Tools:** Two tools used for data collection. First tool, Patient interviewing sheet to assess patients' problems and needs after cataract surgery, the second tool was Nurse Questionnaire sheet to assess nurses' performance for post operative cataract patients. **Results:** The result of the present study showed that, Most of the studied patients had serious problems after the surgery, while postoperative needs for the majority of them weren't achieved. In addition, the majority of the studied nurses had unsatisfactory level of practices, and about three quarters had satisfactory level of knowledge. **Conclusion:** The study findings concluded that, No statistical significant difference between total patients' needs and serious problems encountered studied patients. In addition, there was statistical significant between total level of nurses' knowledge and their practices. **Recommendations:** The main study recommendation included that, Pre-service and in-service training program for the purpose of refreshing and updating the knowledge and practice of the nurses working with ophthalmic surgical patients, and the proposed protocol of patients' needs management that's evidence – based should be implemented and evaluated in relation to visual problems post cataract surgery.

Key words: Cataract Surgery, Patients' Needs, Nurses' Role

Introduction:

Cataract is opacity of the lens that interferes with vision, and is the most frequent cause of visual impairment worldwide, especially for the elderly because the incidence of cataracts increases with increasing age.⁽¹⁾ The World Health Organization (WHO) estimates that the current global prevalence of blindness is 57.0% with more than 82.0% of all blindness occurring in individuals aged 50 and older. Cataract accounts for 47.8% of the worlds roughly 37 million blind individuals of note, approximately 90.0% of the contribution of cataract to

blindness.⁽²⁾ In Egypt, the prevalence of low vision for all ages is 47.9% of the population aged 65 years. Major causes in Egypt for blindness are cataract (54.8%), corneal opacity other than trachoma (18.8%), refractive error (7%), glaucoma (4.6%), and others (7.2%). While there are no effective medical interventions for cataract, surgical treatment is highly effective.⁽³⁾ Cataract surgery can be used as treatment when activities Daily living (ADL), and quality of life are affected.⁽⁴⁾ Patient with cataract is closely associated with fair or poor

health status, restricted activity, impair driving ability, experience significant emotional distress, and reduced quality of life. loss vision can be a significant psychological loss, and also produces stresses for the family members of affected patients.⁽⁵⁾The nurses assess basic need status and intervene to assist patients to meet their basic need requirements. So that recognizing the needs of patients with cataract surgery and understanding the physiological, psychological, and spiritual needs they experience are essential skills for ophthalmic nurse who incorporates of these changes in the form of nursing intervention.⁽⁶⁾ The nurses are involved in all aspects of patients' care, which include: first, care during acute episode (assess the pain, medication administration, and learn about activities restrictions), second, educate patient and care givers about the aspects of ophthalmic management and self care practices. Inadequate postoperative nursing care may lead to serious complications for patient with cataract surgery.⁽⁷⁾

Significance of the study:

Patients' needs assessment has a positive effect by improving staff nurses perception toward care, helping to collect subjective data, building a trusting relationship with patient and coordinate the work with other health team members⁽⁸⁾. According to Statistical Department Report at Zagazig University Hospital revealed that the number of patients undergoing cataract surgery were about 3000:3500 (57.0%) in 2010. Nurses play an important role in all aspects of cataract surgery care because it may affect patients' independence in self care , perform activity of daily living and check quality of life. For this reason the study will be carried out in an attempt to help in assessing nurses' role regarding problems and needs

encountered postoperative cataract patients.

Aim of the study:

The aim of this study was to:

Assess nurses' role regarding post-operative patients with cataract needs and problems.

Objectives:

1. To assess post-operative patients with cataract needs and problems.
2. To assess nurses' knowledge and practice regarding post-operative patients with cataract needs and problems.
3. To develop nurses' guidelines role based on post-operative patients with cataract needs and problems

Research questions:

- What are the needs and problems of post-operative patients with cataract?
- Is nurses' knowledge and practice regarding post-operative patients with cataract needs and problems sufficient or not?

Subjects and Methods:

Research design:

A descriptive exploratory design was used in this study.

Setting:

The study was conducted in Ophthalmology Department and Out Patient ophthalmology Clinics at Zagazig University Hospitals.

Subjects:

The Subjects of this study included: A convenience sample of 100 adult patients with cataract surgery, (38 males and 62 females) present during at the study time (from January 2012 to June 2012). A convenience sample of 36 nurses, at different age, years of experience, and qualifications.

Tools for data collection:

Two tools were used for data collection

1. **Questionnaire Sheet:** It was of three parts:

- **Part I:** Personal characteristics data of the studied patients including (Age, Sex, marital Status, level of education.....etc).
- **Part II:** questionnaire of problems patients encountered after cataract surgery such as (bright sunlight, seeing distant object, performing activity daily living....etc).
- **Part III:** Patients' needs assessment sheet regarding postoperative periods, includes: physical needs, psychological needs, and pre discharge instructions needs.

The Scoring system:

The total scores of postoperative needs were 37, each positively achieved toward needs after surgery was scored from (1-0). A score of 1 assigned to the item response choice achieved, zero for not achieved, while the total high score was assigned to the patient who achieved his needs after surgery. Achieved for needs $\geq 60\%$ Not achieved for needs $< 60\%$.

2. *An interview questionnaire sheet for nurses:*

It was designed in Arabic form to avoid misunderstanding. It was designed by the researcher based on literature review and opinions of experts for content of validity. It included the following parts:

- **Part I:** Personal characteristics data of studied nurses including (Age, Marital Status, Qualification, Years of experience,....etc),
- **Part II:** questions to assess nurses' knowledge about cataract surgery regarding anatomy and physiology of the eye, cataract disease, nursing care of patients after cataract surgery, and knowledge about pre discharge instruction for patients after cataract surgery. The total score of the knowledge was 94 grades, (100%). Each complete correct answer scored two grades, one grade for incomplete correct

answer and zero for incorrect answer or did not know. The total knowledge score was classified as follows: Satisfied level of knowledge ≥ 60 , unsatisfied level of knowledge < 60 .

- **Part III** was concerned with a structured observational checklist for nurses' care provided to patients after cataract surgery which includes: Instilling eye drops, Ointment application, changing eye dressing, Performing eye care, Practice regarding measure for relieving postoperative cataract pain. The total score of all practices were 51 grades. The step done correctly takes score one while not done takes score zero. The total score of all practices is classified as the following: - Satisfactory $\geq 60\%$, Unsatisfactory $< 60\%$.

Content validity:

It was established by a panel of 5 experts in nursing and medical staff including:

assistant professor and two lecturers of Medical Surgical Nursing, assistant professor of Community Health Nursing, and professor of ophthalmology who reviewed the instruments for clarity, relevance comprehensiveness, understanding, applicability, and easiness for administration. Minor modifications were required.

Pilot study:

A pilot study was conducted on ten patients and five nurses selected randomly to check and ensure the clarity, applicability, relevance and feasibility of the tools, to identify the difficulties that may be faced during the application, and to estimate the time needed to fill in the sheet. Patients who shared in the pilot study were excluded from the sample.

Field work:

Data collection of this study was

carried out through six months in the period from the beginning of January, 2012 to end of June, 2012, and the following was done:-It was necessary for the researcher to introduce herself to patients or patients' relatives and informing them about the purpose of the study. Data were collected by the researcher using a simplified Arabic language to be suitable for the patient. Each patient was interviewed individually and each interview took approximately from 30 to 45 minutes. Each patient was interviewed twice, first in ophthalmic department to fulfill the questions concerned with postoperative assessment sheet and patient's needs, while second time in outpatient clinic to fulfill the questions concerned with post operative problems encountered cataract patients.

The nurses were interviewed by the researcher at the above mentioned setting; the nurses met the researcher at the end of morning shift for nurses working at morning shift, and at the afternoon before starting their work. Each nurse was individually interviewed to fulfill the sheet questions. Each interview lasted for about 30 to 45 minutes to complete the tool. Each nurse was observed for 2 shifts three times then she was asked to fulfill the questionnaire sheet. The researcher was available 4 days weekly. As the researcher was observing nurses practical skills about studied procedures. The time needed to complete the checklist ranged between 30-45 minutes. The time needed to complete the checklist depended upon the time of the procedure and filled by the researcher during nurse's performance inside the department.

Administrative and ethical considerations:

An official permission for data collection in Zagazig University Hospitals was obtained from the

hospital administrative personnel by the submission of a formal letter from the Dean of the faculty of Nursing.

At the interview, each potential subject was informed about the purpose, benefits of the study, and informed that their participation is voluntary and they have right to withdraw from the study at any time without giving any reason. In addition, confidentiality, and anonymity of the subjects were assured through coding of all data.

Statistical Design:

After the collection of data, it was revised, coded and fed to statistical software SPSS version 14. The statistical analysis used considered all tests to be T test with alpha error = 0.05. Microsoft office Excel software was used to construct the needed graphs. P value equals to or less than 0.05 was considered to be significant.

Results:

Table (1) :Shows that (84.0%) of the studied patients were at the age group of 50 years and more, ranged between 30-80 years with Mean \pm SD 58.65 ± 10.48 , (62.0%) of the studied patients were females and (66%) were married. In relation to the level of education about (65.0%) were illiterate, (84.0%) of the studied patients were unemployed and non smoker (81.0%), while the majority of the studied patients (91.0%) had insufficient income.

Table (2): Reveals problems encountered postoperative patients with cataract. (99%) had difficulty in bright sunlight, (85%) had difficulty in seeing distant objects and (69%) of studied patients had difficulty in performing activity daily living after cataract surgery, while (85.0%) of them were not applicable.

Figure (1): Indicates that, postoperative needs for the majority (93.0%) of studied patients weren't

achieved. As regard total physical needs the majority (94.0%) of studied patients weren't achieved. While pre-discharge instruction needs weren't achieved for all patients. On other hand, total psychological needs for (53%) of the studied patients were achieved after the surgery.

Table (3): Shows personal characteristics of the studied nurses. (50%) their age more than 30 years ranged between 24-45 years with Mean \pm SD 31.94 ± 6.38 . (91.7%) were married, and (86.1%) had diploma degree in nursing. (44.5%) of the studied nurses had less than or equal 10 years of experience in general nursing with Mean \pm SD 13.89 ± 5.87 , ranged between 6-27years. Also (72.2%) of them had less than 10 years of experience in ophthalmic department with Mean \pm SD 9.61 ± 6.025 , ranged between 1-27 years. (88.9%) of studied nurses didn't have any previous training course related to cataract surgery.

Figure (2): Presents comparison between total knowledge and total practice score. It was found that, about three quarters (72.2%) of the studied nurses had satisfactory level of total knowledge score compared to the majority (91.7%) who had unsatisfactory level of total practice score.

Table (4): Shows that there was no statistically significant difference between total score of needs and personal characteristic data of studied patients.

Table (5): Show A statistical significant difference between patient age and problem of ADL and seeing distant object ($p=0.032$, 0.006 respectively). Also this table reveals that there was a statistical significant difference between patient sex and problem with seeing distant object ($P=0.002$). At the same table it was found that there was statistical significant

difference in relation to patient marital status and problems of ADL and seeing distant object ($P=0.038$, 0.015 respectively), while there was statistical significant difference between patient occupation and problem of seeing distant object ($p = 0.000$). As regard to level of education it was found that there was statistical significant difference between patient educational level and problem of ADL and seeing of distant object ($p = 0.050$, 0.004 respectively).

Table (6): Reveals that, there was a statistical significant difference between total nurse's level of knowledge and their practice (P value 0.000^*).

Discussion:

Cataract is the most common age related eye disease and is also the most treatable cause of vision loss in older adults. Age- related eye disease can threaten the ability of older adults to live independently, thus profoundly affecting their life style. There exists an association between loss of vision and loss of overall function ⁽⁹⁾. The nurse plays a major role in educating patients about cataract and proper management to prevent the advancement of complications after surgery. ⁽¹⁰⁾

The current study revealed that more than three fifths were female. This may be due to that females had significantly higher risk of being cataract than male mostly because of their longer life expectancy, their lack of access to service, and also female may give priorities to their family needs over their own need eye care.

This finding is congruent with that of Lewallen and Coutright,⁽¹¹⁾ who reported that females are affected more than males. This finding was contradicted to a study conducted by Belal, ⁽¹²⁾ who found that, three

quarters of the studied sample were male.

Regarding marital status, the present study revealed that, two thirds of the studied patients were married and were illiterate. This result may be due to that lower educational level associated to higher prevalence of age related cataract, and low education is confounded by several variables including exposure to sun light, hygiene, and nutrition factors which play important role in the development of cataract. In the same line, Nitkamp, et al, ⁽¹³⁾ stated in their study that the majority of patients with cataract were illiterate and minority was highly educated.

The finding of present study showed that more than four fifths were unemployed. This could be due to that the majority of studied patients were females and housewives, in addition to age factor, and cataract patients were much more likely to be disabled, much more likely to have difficulties with daily activities such as daily working, reading, seeing distant object, and even driving. This finding was in accordance with Nirmalan, et al.,⁽¹⁴⁾ who stated that the higher score of patients with visual impairment were without occupation.

The current results showed that, more than four fifths of the studied patients were non smoker. While smoking is considered a risk factor in the development of cataract, these differences may be due to small sample size. This finding matched with Hegazy, et al., ⁽³⁾ who found that the majority of patients were non smoker. While this finding disagreement with National Eye Institute ⁽¹⁵⁾, which found that the highest percentage of cataract patients was smoker.

The result of the present study portrayed that, the majority of studied patients had insufficient income. This finding may be due to that patient's

decrease in work ability after cataract formation, and facing the increased of management. In addition, most of studied patients were unemployed and retired. This goes on line with Ali, ⁽¹⁶⁾ who said that nearly three quarters of patients had income of less than Rs2000 as total monthly family income at Navodaya College of Nursing.

The current study result showed that, more than half of patients had problems with vision after surgery. This may be due to that lack patient's level of knowledge and awareness of common problems and their treatment after the surgery, such awareness and knowledge can play important role in encouraging patient to seek timely eye care and can therefore help in reducing burden problems associated with visual impairment. This finding agrees with Lioyd, ⁽¹⁷⁾ who showed that the minority of studied patients' cataract surgery makes vision better.

The present study revealed that the majority of the studied patients didn't achieve their physical needs. This finding was disagreeing with Black, et al.,⁽¹⁸⁾ whose were emphasized that adequate diet and good nutrition are important to conservation of sight. It may be that the nurse didn't stress on the importance of physical preparation for patient with cataract surgery, and didn't provide major effective form of care with a high quality services to meet this need for post operative cataract patients.

Lansingh and Carter, ⁽¹⁹⁾ listed that, psychological preparation play a vital role in the successful outcome of the surgery, and psychological assessment should be made to assist in alleviating any worries the patient may have. In the same line, Sach, et al., ⁽²⁰⁾ stated that, building up relations with patients will allow discussing the problems confidentially. This explained that the majority of studied patient achieved their needs about

properly dealing from health team, and also about three quarters of them were achieved to nurses' response to their request. This may be due to studied patient were elderly who often need more emotional support and good relation with care team so that health team must deal with patient properly and nurses must response to patient request because she is most often the primary educator for the patients.

The present study revealed that, predischarge instruction needs for all of studied patients weren't achieved. These findings may be due that the nurse dependence on the ophthalmologist to give surgical instructions. The previous finding was supported by Belal,⁽¹²⁾ who reported that patients' families are now responsible for almost all post operative care, so written and verbal instructions before discharge are imperative.

The present study revealed that half of the studied nurses were at the age group of (24-45) years, majority of them were married. In addition more than four fifths of them had diploma degree with less than 10 years of experience in ophthalmic department. This finding agrees with Mohamed,⁽²¹⁾ who found in her study that most of the nurses were at the age group of (21-41) years and their qualifications were secondary diploma, while more than half of them with years of experience between 6-10 years.

Belal,⁽¹²⁾ found in her study that most of the nurses reported that they did not receive training courses about caring patients under going intra-ocular surgery and nurses who reported that they were receive training course were very few. This finding was in agreement with the present study which reported that the majority of the studied nurses indicated that they did not receive any special education or training in the work regarding cataract

surgery. This result may be due to that there are no special hospital policies that regulate the continuous training for nurses who worked at Ophthalmic Department which lead to lack nurses' knowledge and complex assessment required for post operative cataract patients.

Concerning nurses' knowledge about nursing care for post operative cataract patients, the present study revealed that two thirds of studied nurses had satisfactory level of total knowledge regarding nursing care of postoperative cataract patients. This finding disagreement with Belal,⁽¹²⁾ who found in her study that, most of the nurses had poor information about postoperative care for patient with intraocular surgery. This could be explained that continuous education in nursing is needed to promote development of knowledge, skills and attitudes of nurses and to improve the quality of care given for patients, and the formed training course play important role in enhancing and updating nurse's knowledge and performance.

The present study revealed that there was statistical significant difference between personal characteristic data of studied patients and problems of vision especially problems related performing ADL and seeing distant objects. This may be due to that when the ages increase it means presence of multiple vision problems which contribute to these difficulties in performing ADL and seeing distant objects. While no statistical significant difference was found between smoking habit and income for the patient and problems following cataract surgery, so that these weren't considered most important risk factor for cataract development in elderly patients.

The present study found that there was highly significance between nurses' knowledge and their practice

regarding postoperative cataract patients. In the same line, Ahmed, ⁽²²⁾ found highly significant relation between nurses' level of knowledge and level of practice. On the contrary, this finding disagrees with Chan ⁽²³⁾ who found that no significant relation between nurses' knowledge and their practice. This result may be due to that absence of in-service training program required for update nurses' knowledge, lack of guidance and supervision from the head nurse, and absence of booklet being able to affect their practices.

disease, management, post operative care, cataract surgery complications and ways to alleviate them. A further study is necessary to identify effects on educational program on nurses' performance and expected patients outcomes in ophthalmic department.

Conclusion:

According to the results and discussion of the present study, it can be concluded that, Postoperative needs for the majority of the studied patients weren't achieved. There was no statistical significant difference between postoperative needs and serious problems encountered the studied postoperative cataract patients. Regarding the study results, the majority of studied nurses had unsatisfactory level of total practice score compared to about three quarters who had satisfactory level of their knowledge regarding post operative cataract patients. In addition, there was a statistical significant difference between total nurses' knowledge and total practice score.

Recommendations

Based on the results of the present study the following recommendations are suggested: Pre-service and in-service training program for the purpose of refreshing and updating the knowledge and practice of the nurses working with ophthalmic surgical patients, who should be followed by continuous evaluation. Health educational program should be prepared for postoperative cataract patients and their families about

Table (1): Characteristics of Studied Patients (N=100)

Characteristics of studied patients	No. (100)	%
Age (years):		
▪ 30-	7	7.0
▪ 40-	9	9.0
▪ 50 and more	84	84.0
Mean ± SD (Range)		58.65± 10.48 30-80
Sex		
▪ Male	38	38.0
▪ Female	62	62.0
Marital status		
▪ Married	66	66.0
▪ Widowed	34	34.0
Occupation		
▪ Employed	16	16.0
▪ Unemployed	84	84.0
Education		
▪ Illiterate	65	65.0
▪ Write & Read	18	18.0
▪ Primary	7	7.0
▪ Secondary	8	8.0
▪ University	2	2.0
Smoking		
▪ Smoker	19	19.0
▪ Non smoker	81	81.0
Income		
▪ Sufficient	9	9.0
▪ In sufficient	91	91.0

Table (2): Frequency Distribution of Studied Patients regarding problems post operative cataract N=100 (Out Patients Clinics)

Problems post operative cataract	Yes		No		Not applicable	
	No.	%	No.	%	No.	%
▪ Bright sunlight	99	99.0	1	1.0	-	-
▪ Seeing distant objects	85	85.0	15	15.0	-	-
▪ Performing activity daily living	69	69.0	31	31.0	-	-
▪ Vision Problem	58	58.0	42	42.0	-	-
▪ Watching TV	56	56.0	44	44.0	-	-
▪ Recognizing faces	38	38.0	62	62.0	-	-
▪ Providing food alone	23	23.0	77	77.0	-	-
▪ Walking unaided	21	21.0	79	79.0	-	-
▪ Driving at night	13	13.0	2	2.0	85	85.0
▪ Driving during the day	12	12.0	3	3.0	85	85.0

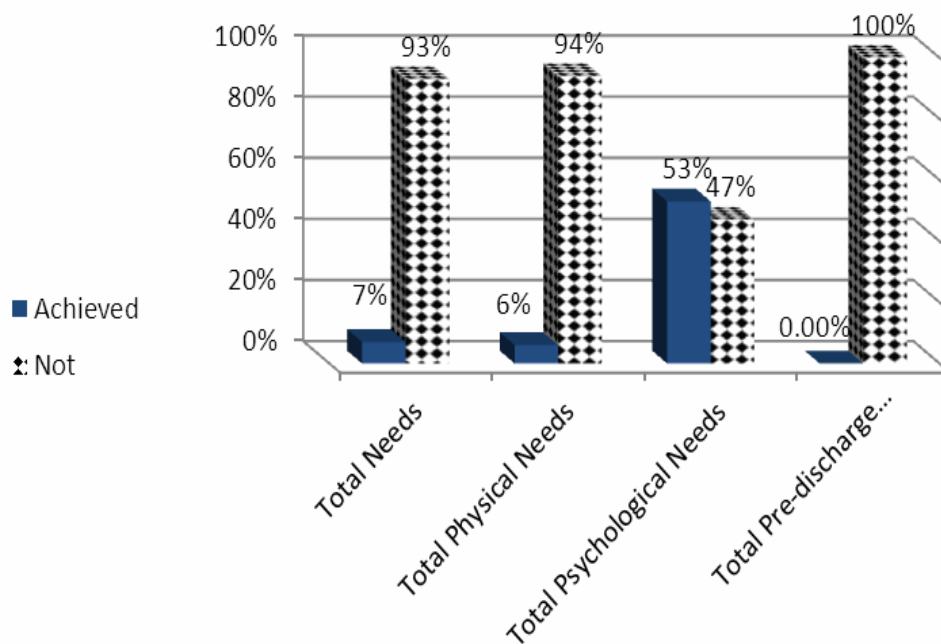


Figure (1): Frequency Distribution of Studied Patients in relation to Need achievement post cataract surgery

Table (3): Characteristics of Studied Nurses (36 Nurses)

Characteristics	NO. (36)	%
Age (years):		
▪ ≤ 30	15	41.7
▪ 30-	18	50.0
▪ 40+	3	8.3
Mean ± SD	31.94 ± 6.38	
(Range)	24-45y	
Marital status		
▪ Single	1	2.8
▪ Married	33	91.7
▪ Widow	2	5.6
Qualification		
▪ Nursing diploma	31	86.1
▪ Technical health institute	1	2.8
▪ Bachelor	4	11.1
Years of experience:		
▪ <10 years	16	44.5
▪ 10-	14	38.9
▪ 20+	6	16.6
Mean ± SD	13.89 ± 5.87	
(Range)	6-27y	
Years of experience in ophthalmic department		
▪ <10 years	26	72.2
▪ 10-	8	22.2
▪ 20+	2	5.6
Mean ± SD	9.61 ± 6.025	
(Range)	1-27y	
Training courses:		
▪ Yes	4	11.1
▪ No	32	88.9

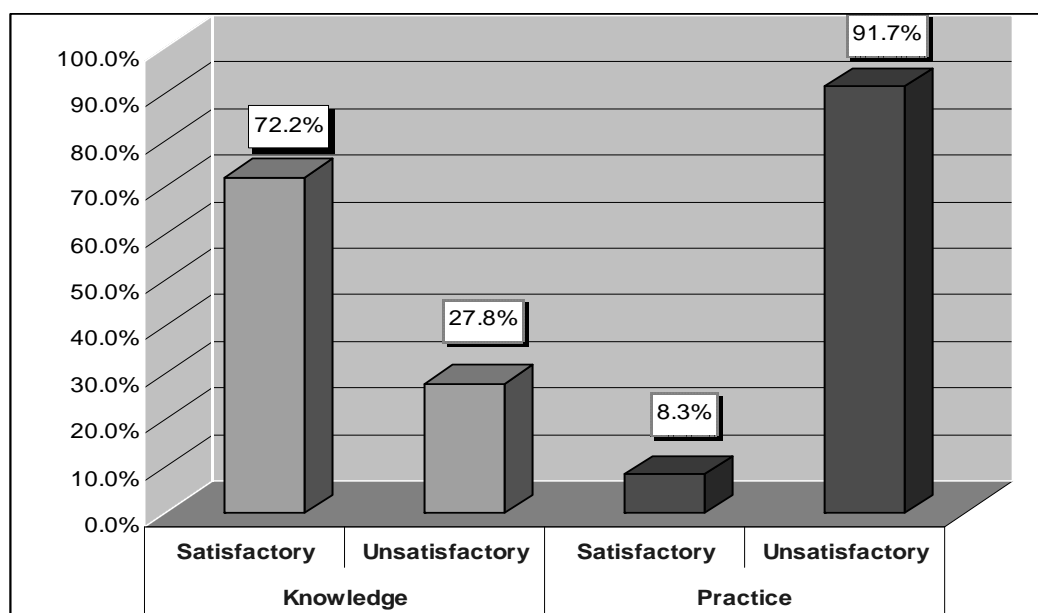


Figure (2): Percentage Distribution of Nurses in relation to Total Knowledge and Practice score

Table (4): Relation between Characteristic data of Studied Patients and Total scores of Needs (N=100)

Personal Characteristic Data	Total score of Needs					X^2	P value
	Minimum	Maximum	Mean	SD	Median		
Age							
▪ 30-	19	20	19.3	0.6	19		
▪ 40-	5	21	13.0	4.7	14		
▪ 50 and more	14	54	35.2	11.7	36.5	8.9	0.065
Sex							
▪ Male	5	20	11.8	4.3	11.5		
▪ Female	4	21	12.3	4.0	13	Z=1.1	0.472
Marital status							
▪ Married	5	21	12.5	4.1	12		
▪ Widow	4	17	11.4	4.1	12	Z=1.2	0.335
Occupation							
▪ Employed	5	20	13.0	4.9	13		
▪ Unemployed	4	21	11.9	4.0	12	Z=1.1	0.451
Level of education							
▪ Illiterate	4	21	11.7	3.9	12		
▪ Write & read	5	17	11.4	3.6	11.5		
▪ Primary	5	20	13.4	4.8	14		
▪ Secondary	5	19	14.5	4.9	15		
▪ University	16	20	18.0	2.8	18	8.2	0.084
Smoking habit							
▪ Smoker	5	16	10.8	3.4	11		
▪ Non smoker	4	21	12.4	4.2	13	Z=1.6	0.114
Income							
▪ Sufficient	10	19	14.1	3.4	13		
▪ Insufficient	4	21	11.9	4.1	12	Z=1.7	0.176

X^2 : Kruskal Wallis test for several independent groups

Z: Mann Whitney test for two independent groups

Table (5): Relation between Characteristic and Problems Encountered post surgery (N =100)

Personal Characteristic Data	Problems									
	Difficult in ADL		Difficult in bright sunlight		Difficult in seeing distant		Problem vision		Watching TV	
	No.	%	No.	%	No.	%	No.	%	No.	%
Age :										
▪ 30-	1	1.4	3	3.0	1	1.2	1	1.7	1	1.8
▪ 40-	6	8.7	13	13.1	8	9.4	7	12.1	6	10.7
▪ 50 and more	62	89.9	83	83.8	76	89.4	50	86.2	49	87.5
P- value	0.032*^		0.998^		0.006*^		0.293		0.123	
Sex :										
▪ Male	26	37.7	38	38.4	27	31.8	23	39.7	23	41.1
▪ Female	43	62.3	61	61.6	58	68.2	35	60.3	33	58.9
P-value	0.922		0.431		0.002*		0.689		0.475	
Marital status										
▪ Married	41	59.4	66	66.7	52	61.2	37	63.8	34	60.7
▪ Widow	28	40.6	33	33.3	33	38.8	21	36.2	22	39.3
P-value	0.038*		0.340		0.015*		0.584		0.208	
Occupation										
▪ Employed	9	13.0	16	16.2	8	9.4	8	13.8	8	14.3
▪ Unemployed	60	87.0	83	83.8	77	90.6	50	86.2	48	85.7
P-value	0.249		0.996		0.000*		0.479		0.598	
Level of education										
▪ Illiterate	49	71.0	64	64.6	60	70.6	41	70.7	39	69.6
▪ Write & read	12	17.4	18	18.2	15	17.6	11	19.0	11	19.6
▪ Primary	5	7.2	7	7.1	5	5.9	4	6.9	4	7.1
▪ Secondary	2	2.9	8	8.1	3	3.5	1	1.7	1	1.8
▪ University	1	1.4	2	2.0	2	2.4	1	1.7	1	1.8
P-value	0.050*		0.977		0.004*		0.082		0.107	
Smoking habit										
▪ Smoker	15	21.7	19	19.2	18	21.2	13	22.4	14	25.0
▪ Non smoker	54	78.3	80	80.8	67	78.8	45	77.6	42	75.0
P-value	0.298		0.988		0.291		0.306		0.084	
Income:										
▪ Sufficient	5	7.2	9	9.1	6	7.1	4	6.9	4	7.1
▪ Insufficient	64	92.8	90	90.9	79	92.9	54	93.1	52	92.9
P- value	0.453		0.989		0.132		0.486		0.501	

P": *P* value of X^2 test

P < 0.05 (significant)

ADL: Activity Daily Living

Table (6): Relation between Total Knowledge of Studied Nurses and Their Total Practice Score (N=36)

Total Knowledge	Total Practice				X ² _{mc}	P- value
	Unsatisfactory		Satisfactory			
	No.	%	No.	%		
▪ Unsatisfactory	9	25.0	1	2.8	24.2	0.000*
▪ Satisfactory	24	66.7	2	5.6		

* $P < 0.001$ (significant)

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