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# The Grievance

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## THE CURSE OF CATARACTS

by *Stanford Field*

### THE SITUATION

In 1985, a Kaiser optometrist told me that a tiny cataract was forming in my left eye. By 1990, I had developed cataracts in both eyes, and powerful lenses could not make corrections that would allow me to see clearly. At that time, I searched for an ophthalmologist at Kaiser that could perform the cataract surgery. My inquiry led me to Dr. Scott who specialized in the small incision, one stitch surgery. Most of the others were using three stitches.

After examining my eyes, Dr. Scott decided that I was not a candidate for cataract surgery because the cataracts were not bad enough. My only recourse was to high-powered lenses to make things larger. Anyone who has cataracts knows that the **kaleidoscopic effect** of even small cataracts can severely disrupt vision that cannot be corrected by any lenses. I could not help but feel that the medical decision not to remove the cataracts was based on controlling medical costs.

In 1993, things went from bad to worse. I developed a blockage in a blood vessel in my right eye. That incident resulted in irreparable damage to the retina and a permanent loss of vision in the central portion of the eye. Dr. Scott, said there was no treatment for that condition. He recommended that I take an aspirin every day to thin the blood, and thus minimize any recurrence of the blood vessel blockage. Incidentally, after taking the aspirin for about three years, I developed allergic reactions to almost everything. It took me an additional year to finally discover that the aspirin was causing the allergic reactions by inducing the formation of leukotrienes which are the mediators of allergies. Dr. Scott was apparently unaware of the dark side of aspirin.

The uncorrected vision in my left eye was 20/100. My vision was decidedly better if I squinted over the cataract through the top of my eye. Sometimes that

gave false readings on how good my vision was. When I told that to Dr. Scott, he said that some people could do that. My right eye was decidedly worse at 20/400.

Dr. Scott recommended that I see another doctor whose expertise was using special seeing-devices for people in my condition. That doctor prescribed a pair of glasses with built-in telescopes for distant vision. They cost me \$1000. They did not prove to be useful because the alignment of the telescopes was critical to their use, and most of the time they were not in alignment. I also had numerous pairs of glasses for reading that were so powerful (about 8 power) that I had to hold the reading material about two inches from my eyes. When reading newspapers, that caused me to inhale the ink and then break into a sneezing fit as my body tried to eliminate the poison.

In early 1998, I had my last appointment with Dr. Scott. He said that the retinal damage in my right eye had stabilized over the last year and that there was no need to see him again. I asked whether he could then do the cataract surgery for each eye. His response was that the cataracts were not bad enough (rated at 3-4 on a scale to 10 [they had been constant at 3-4 for eight years]) and that he did not do surgery until they were at 6 or more. Furthermore, he also said that even if cataract surgery were done on my right eye, I still would not be able to see well because of the retinal damage. I had been a long-term patient of Dr. Scott and I valued his analyses.

However, surgery could have been done on my left eye. I wondered whether the decision not to remove that cataract was a medical one or a cost-saving one. Did that mean I was to go through the rest of my life (age 69 in 1998) with such poor vision? The Kaiser experience left me feeling abandoned, hopeless, and condemned to be an eyesight-cripple.

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## **CATARACT SURGERY**

The realistic prospect of living only ten more years or so without being able to read and study (except with great difficulty), without being able to play tennis for the exercise that I needed to stay healthy, and without being able to drive safely, created a great deal of anxiety and anguish in me. And, since the prospects for obtaining cataract surgery at Kaiser were poor, in May 1998, I visited Dr. David F. Chang, a superb cataract surgeon.

The initial examination verified the existence of a cataract in each eye and stabilized retinal damage in the right eye. Uncorrected vision was 20/100 in each eye. However, the right eye was almost blind when confronted with oncoming light (as in the headlights of an automobile). Dr. Chang concluded that cataract surgery would improve the vision in both eyes, but the left eye would respond better than the right eye. His strategy was to operate on the left eye first and get that one "in the bank." Then, any improvement in the right eye would be a bonus.

In June 1998, Dr. Chang performed "no stitch" cataract removal using his special technique of "non-stop phaco chop" to minimize damage to the lens capsule, and he implanted an intraocular lens (with UV light protection). **The next day, at the post-operative examination, the left eye was 20/20.** The operation was painless and so was the rapid (days) recovery. For me, the experience was truly phenomenal. I could read road signs and license plates with one eye! I had a difficult time playing tennis because depth perception was strange with one eye at 20/20 and the other at 20/100. My tennis friends tolerated my poor playing with the hope that it would improve when the other cataract was removed.

In July 1998, Dr. Chang removed the cataract from the right eye and implanted the intraocular lens. **When I was in the recovery room, I knew that the vision in the right eye had improved dramatically and that my depth perception using both eyes was beyond belief. The next day at the post-operative examination, the right eye proved to be 20/30.** I was elated well beyond anything that I had been conditioned to expect based on the Kaiser decision not to do the same surgery. I told Dr. Chang that he had taken me from "zero to Mach one in 30 minutes!"

## **THE GRIEVANCE**

If I had docilely accepted Kaiser's decision not to operate to remove the cataracts, I would probably have remained in that sight-impaired condition for the rest of my life. **Kaiser caused me to lose all hope of ever having my eyesight improved.**

If the subsequent cataract surgery by Dr. Chang had turned out the way that Kaiser had expected, I would have known that at least, I tried. However, since Dr. Chang's surgery was a screaming success, I can only think that I was harmed by being duped into despair by the Kaiser's poor analysis of the probable outcome of cataract surgery and the requirement to get ever-more-powerful lenses and remain eyesight-crippled.

Furthermore, I feel it is an indignation to force me to seek medical care (\$4678 paid by me) from a private physician after I have assigned all of my medical benefits to Kaiser.

## **GRIEVANCE HEARING**

In early September 1998, I attended a grievance hearing at Kaiser to further explain my case. I stated that I thought Kaiser's decision not to operate had an important cost-control component in it and that I had been harmed by that. The Chief of Medicine (the head of all doctors) immediately stated that Kaiser's doctors make medical decisions based on the needs of the patients without regard to the cost. **If that were true, I told him and the others there, that I thought that the decision not to operate on the cataracts was a poor one, medically. I wondered (to myself) whether this was malpractice... My request for reimbursement of my costs was subsequently rejected.**