

# GOING GREEN



## Integrating Sustainability Into Cataract Surgery Decision-Making

The importance of sustainability in our practices is growing. Environmental concerns are becoming a significant consideration in how we ophthalmologists perform cataract surgery and manage our clinics. Our specialty, known for its considerable use of disposable instruments and single-use supplies, is under increasing pressure to reduce its carbon footprint and medical waste.

One point of consideration is immediate sequential bilateral cataract surgery (ISBCS). Historically, debate over the implementation of ISBCS has focused primarily on patient safety. However, numerous studies have demonstrated the safety and efficacy of ISBCS.<sup>1,2</sup> This research also highlighted the potential benefits of ISBCS—for patients, medical waste reduction, and greater sustainability.

Patient safety remains our paramount concern. Offering ISBCS requires the implementation of stringent safety measures. Surgeries performed in two separate ORs with fresh, sterile instruments for each eye minimize the risk of infection. Although this might not reduce medical waste significantly, there are other sustainability gains. For instance, ISBCS eliminates the need for a second IV set, nasal cannula, and other disposables associated with each visit to the outpatient surgery center. Moreover, patients require fewer postoperative visits to the clinic, which lessens the safety risk and carbon footprint associated with patient travel in vehicles. ISBCS also creates a more efficient process for staff and surgeons, allowing greater throughput and the ability to open visit slots to care for more patients in need.

An obstacle to overcome is the overly stringent regulatory requirements that mandate single-use items for each

patient and were initially designed to ensure safety. For example, preoperative drops, intraoperative medications, and bottles of balanced salt solution are required to be single use. Revisiting outdated regulations to balance safety with sustainability is crucial.

Financial considerations also come into play. Currently, US payment models penalize surgeons and surgery centers performing ISBCS by reducing reimbursement. Ongoing discussions with the payors aim to develop a financially viable pathway for ISBCS. If successful, this model would benefit patients by reducing the time, travel, and recovery required while also making it financially feasible for surgeons and surgery centers, thus aligning economic incentives with sustainable practices.

Patient safety and outcomes remains our top priority. We can continue to prioritize patient care, however, while contributing to a more sustainable future. After all, the environment affects both our and our patients' health. ■

1. Friling E, Johansson B, Lundström M, Montan P. Postoperative endophthalmitis in immediate sequential bilateral cataract surgery: a nationwide registry study. *Ophthalmology*. 2022;129(1):26-34.

2. Chen MY, Qi SR, Arshinoff SA. Bilateral simultaneous postoperative endophthalmitis: review of cases reported over the past 50 years. *J Cataract Refract Surg*. 2022;48(7):850-854.

A handwritten signature in black ink, appearing to read 'R. Weinstock'.

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