If your horse is dealing with cataract-associated vision loss, researchers have some good news: Recent study results suggest that more than 25% of horses that undergo a certain type of cataract surgery are still visual two years later.

"Cataract surgery can benefit a diverse group of foals and horses secondary to a congenital defect, trauma, equine recurrent uveitis or ERU, and other unknown causes," said Dennis Brooks, DVM, PhD, Dipl. ACVO, a professor of ophthalmology at the University of Florida College of Veterinary Medicine.

Cataracts are optical opacities, or cloudiness, in the lens of the eye that can range in size from a tiny spot to the entire lens. Typically, vision loss is proportional to the size and location of the opacity within the lens.

"Surgery is the treatment of choice because no known medical therapy for cataracts is known, and surgery is recommended in horses or foals that are unable to perform their regular activities," Brooks explained.

Brooks' surgery of choice is a technique called phacoemulsification, in which the surgeon uses a probe vibrating at ultrasonic frequencies to liquefy and break up the cataract and then vacuums it out of the eye.

Horses generally do well short-term following surgery, but long-term success has not been clearly described. Thus, Brooks retrospectively reviewed the medical records of 95 horses that underwent cataract phacoemulsification to determine their vision status in the two years following surgery.

The team determined that in the immediate postoperative period, almost 95% of horses regained vision. However, just more than a quarter of the horses remained visual for at least two years after surgery.

"These study findings are promising because people ride horses and use them in day-to-day activities," Brooks concluded. "The safety of riding is partly related to horse vision status, and horses with cataracts may not be safe to ride."

The study, "Visual outcomes of phacoemulsification cataracts surgery in horses: 1990-2013," was published in Veterinary Ophthalmology.