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Topography Guided PRK and Crosslinking in Eyes With Keratokonus and Post-LASIK Ectasia

Alex P. Lange

KLINIK



The author has no financial interest to disclose

Introduction and Purpose

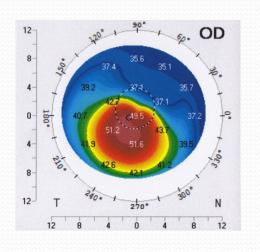
- Corneal collagen crosslinking (CXL) has been shown to halt progression of keratokonus¹
- Current excimer laser platforms are able to deliver topography guided treatment in order to regularize irregular corneas
- Combining these two procedures can potentially improve the topography and stabilize progression
- The aim of this study is to report 1 year results of topography guided PRK and crosslinking in eyes with Keratokonus and Postlasik-Ectasia

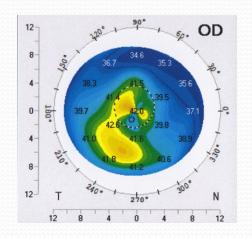
1. Raiskup-Wolf F, et al. Collagen crosslinking with riboflavin and ultraviolet-A light in keratoconus. J Cataract Refract Surg, 34 (2008), pp. 796–801

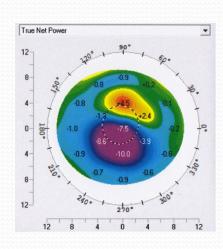
Methods

- The Schwind Amaris Excimer platform with the ORK-CAM software was used to calculate treatment profiles
- The TransPRK protocol was used to deliver the treatment
- A standard crosslinking protocol was used immediately after the Excimer treatment
- Retrospective case analysis of pre- and postoperative data were performed
- Parameters recorded were: Kmax, Kmean, simK's, Pachymetrie,
 Sphere, Cylinder, HOA RMS, Coma and Spherical aberration, UCVA and BCVA
- Pre- and Postoperative data were collected at 3, 6 and 12 months

Results nice Topo and Refraction (1 year, Pentacam-Comparison)







	
Dro_	Iraatman
115	Treatmen

UCVA

BCVA

Refraction

0.3p

0.3p

-2.0=-2.25/70°

Post-Treatment

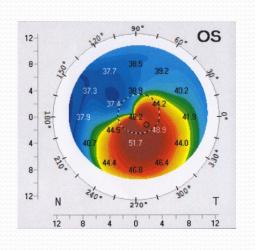
0.9

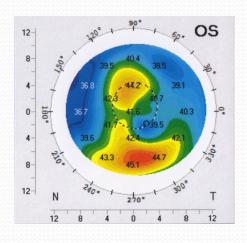
1.25

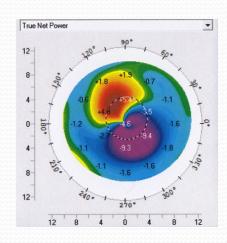
-0.75

Difference Map

Results nice Topo, res. Refraction (1 year, Pentacam-Comparison)







Dro	Γreatmen
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0.3

BCVA 0.6

UCVA

Refraction +3.25=-6.0/152°

Post-Treatment

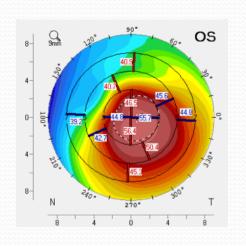
0.4

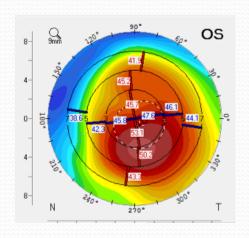
8.0

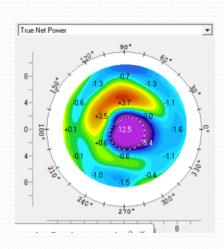
 $-3.0 = -1.0/176^{\circ}$

Difference Map

Results Undercorrection (1 year, Pentacam-Comparison)







UCVA

BCVA

Refraction

Pre-Treatment

0.05

0.16

-4.50=-1.5/6°

Post-Treatment

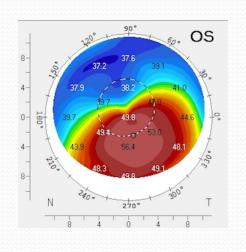
0.2

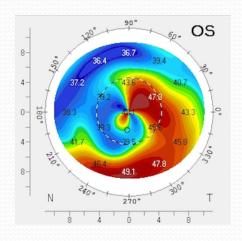
8.0

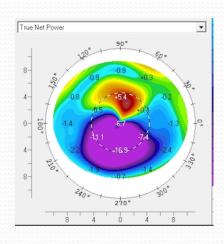
-1.5=-2.25/15°

Difference Map

Results Overcorrection (1 year, Pentacam-Comparison)







UCVA BCVA

Refraction

Pre-Treatment

0.05

0.5

-4.75=-1.75/103°

Post-Treatment

0.16

0.5

 $-6.0 = -0.75/86^{\circ}$

Difference Map

Results

- 9 eyes of 9 patients with keratokonus and post-LASIK ectasia were included
- 8 of 9 eyes showed improved topography at 3, 6 and 12 months after the procedure (mean reduction in Kmax 6.01 diopters, range 1.5 to 12.5 diopters)
- 7 of 9 eyes showed improved UCVA (mean decimal 0.19, range 0.06 to 0.6) and 7 of 9 eyes improved BCVA (mean 0.37, range 0.1 to 0.95)
- Total HOA were reduced in all eyes (mean 1.56, range 0.49 to 2.27)
- Vertical Coma was reduced significantly in all eyes (mean 1.71, range 0.62 to 4.02)
- All treated eyes showed stable topography in the first 12 months after treatment

Results

- Mean Cylinder was reduced by 2.58 diopters (range 0.75 to 6.75 diopters)
- Mean spherical equivalent was reduced by 0.3 diopters (range +2.6 to -3.75)
- 2 eyes showed delayed epithelialization

Conclusions

- Topography-guided PRK can regularize and stabilize corneas with keratoconus and postlasik-ectasia
- Most of the corneas improved in topography, HOA, UCVA and BCVA
- Despite these results, regularizing topography and refraction at the same time remains a challenge



