Presbyopia and the Femtosecond Laser

Video highlights from the ACOS meeting.

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he first European meeting of the American-European Congress of Ophthalmic Surgery (ACOS) was recently held in Cannes, France.
Chaired by Stephen G. Slade, MD, and Jean-Jacques Chaubard, MD, the Femto & Presby Ophthalmic Solutions in Cataract and Refractive Surgery (OSCARS) meeting brought together an impressive faculty of internationally renowned ophthalmologists. This installment of *Inside Eyetube.net* shines a spotlight on interviews conducted with ACOS faculty members during the meeting. To view these and other interviews with faculty members, visit Eyetube.net/series/daily-coverage-cannes-2012/lemut.

PRESBYOPIA TREATMENTS

Laser techniques. Erik L. Mertens, MD, FEBOphth, Chief Medical Editor of *CRST Europe* and Director of the Antwerp Eye Center in Belgium, discussed two



corneal approaches to treating presbyopia, Intracor and Supracor. Intracor, an intrastromal treatment for presbyopia performed with the Technolas Femtosecond Workstation 520F (Technolas Perfect Vision GmbH), is a noninvasive technique currently suitable for use in patients with emmetropia or low hyperopia. The benefit of Intracor, Dr. Mertens explained, is that it can increase patients' power for near vision by 2.00 to 3.00 D. Disadvantages of the procedure, he said, are that patients sometimes lose lines of distance vision and may experience glare and halos. Additionally, the procedure can induce some myopic shift, and it has a small indication range, working best in individuals with a distance correction of 0.05 to 1.25 D. Also, retreatments are difficult to perform.

Supracor, Dr. Mertens' preferred corneal treatment for presbyopia, is an aberration-optimized presbyopic algorithm designed for application in myopic, hyperopic, emmetropic eyes, or post-LASIK eyes. Supracor, which is performed using the Technolas Excimer Workstation 217P, can be performed bilaterally; can correct myopia up to -6.00 to -7.00 D and hyperopia up to 3.00 to 4.00 D; and provides good binocular distance, intermediate, and near vision, Dr. Mertens explained. Retreatments are easy to perform, he said. In patients with poor tear film quality, however, Dr. Mertens said he prefers to perform refractive lens exchange instead of Supracor.

Presbyopia-correcting IOLs. William J. Lahners, MD, FACS, of Sarasota, Florida, shared tips on how to successfully integrate presbyopia-correcting IOLs into one's practice. Although the options for these lenses are limited



in the United States, Dr. Lahners said his philosophy is to customize treatments to each patient's lifestyle. Dr. Lahners emphasized the need to educate patients about presbyopia. At his practice in Florida, patients first meet with a counselor to discuss presbyopia and what it means for their lifestyle. This conversation is the starting point for determining what type of IOL (multifocal or accommodating) to recommend for the patient. Next, Dr. Lahners meets with the patient, and if he or she is a candidate, the surgeon recommends a lens based on activities and lifestyle. This approach improves communication with patients, he said.

FEMTOSECOND LASERS FOR CATARACT SURGERY

Consistent results. Lucio Buratto, MD, of Milan, Italy, a keynote speaker at the ACOS meeting and one of the founders of the organization, shared



his experience with laser cataract surgery. Dr. Buratto, the first European to use a femtosecond laser with the Conformité Européenne (CE) Mark for cataract surgery, discussed the early learning curve for the procedure. Although he experienced some problems initially, Dr. Buratto said,

now the procedure is consistent and exact. Because the femtosecond laser can create a consistently well-centered, round capsulorrhexis, Dr. Buratto explained that he can achieve better results with perfectly centered IOLs. He can also fragment the nucleus more consistently, which results in reduced phaco time and energy. Although creating incisions to address astigmatism was challenging in early cases, Dr. Buratto said he is now able to position them precisely.

Future innovations. Frieder H. Loesel, MD, PhD, of Munich, Germany, Cofounder and Chief Strategy Officer of Technolas Perfect Vision, provided an indepth comparison of the imaging and docking systems associated



with each of the available femtosecond laser platforms for cataract surgery. Dr. Loesel also discussed how, in his view, imaging technology for femtosecond lasers will evolve in the future. Dr. Loesel said he anticipates that imaging for femtosecond lasers will be similar to global positioning system (GPS) technologies.

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