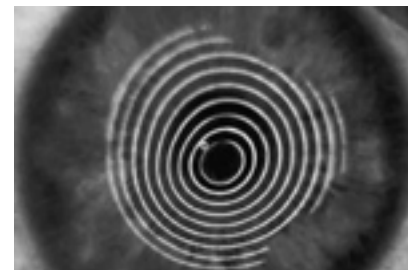


Treatment for keratoconus

At an evening seminar last week, Accuvision Laser Eye Clinics demonstrated to local practitioners the new and enhanced treatment for keratoconus



Assessing corneal distortion

Rapid shifts in refractive error are often perceived as intolerance to spectacles. This is one of the reasons why keratoconus is often first detected by optometrists when a patient presents with such a shift.

Optometrists formed the bulk of the audience (along with a handful of contact lens practitioners) at a recent education evening organised at the Accuvision Laser Eye Clinic in Fulham. They had gathered to watch a demonstration of an exciting new treatment for keratoconus called topography guided ablation with corneal cross linking.

Traditionally, keratoconus is initially monitored and managed by optometrists by regular update of spectacles. Once the cornea has become irregular enough for spectacle lens correction to be inadequate, rigid lenses are then used. The tear film under the lens negates any corneal irregularity to provide stable vision. Eventually the cornea may become so ectatic (thinned) that the

endothelial pump fails and there is a subsequent loss of transparency of the cornea and hence vision. To avoid this, penetrating keratoplasty may be indicated.

Recently, a new technique called topography guided ablation with corneal cross linking has been developed in conjunction with Accuvision, complementing C3-R treatment and it was this that was on display at the seminar.

New treatment

Topography guided ablation with corneal cross linking attempts to normalise the irregularities of the corneal shape and (where appropriate) cancel the effects of ectasia *prior* to any corneal collagen cross linking taking place.

Corneal collagen cross linking treatment has been developed in recent years as a means of stabilising, and in some cases actually thickening, the keratoconic cornea (see *Optician*, 11.11.06).

By reshaping the cornea prior to C3-R treatment, greater levels

of acuity can be obtained for the patient and greater levels of comfort when wearing contact lenses after treatment.

Delegates were excited to learn that following the new procedure patients could be co-managed and returned to their optometrists and given the choice of contact lenses (rigid and soft) and, in some cases, spectacles once again.

Details of the procedure will be described in a follow-up article next week.

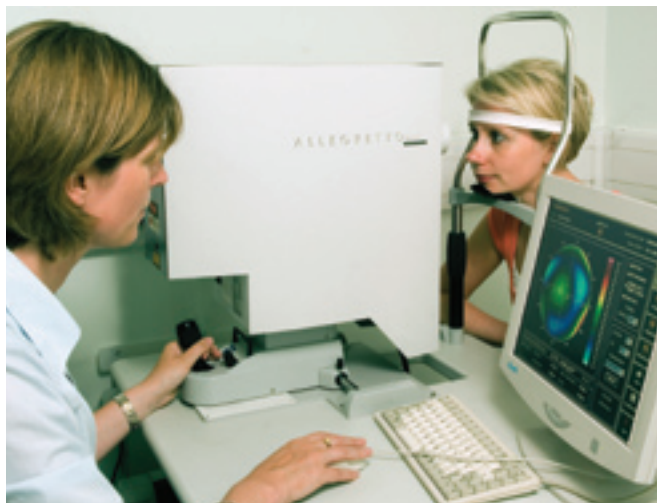
Positive response

'The response from the optometrists was very positive,' reported John Andrews of Accuvision, 'and most would be keen on letting their keratoconus patients know of all new treatment options. Especially after watching a treatment at the seminar.'

The event proved so popular that Accuvision plans to repeat it in September. Readers interested in attending should contact Accuvision on 0845 000 2020 or email at info@accuvision.co.uk ●



C3-R treatment being undertaken



Topographic changes