

# Astigmatic keratotomy with PRK for correction of mixed Astigmatism

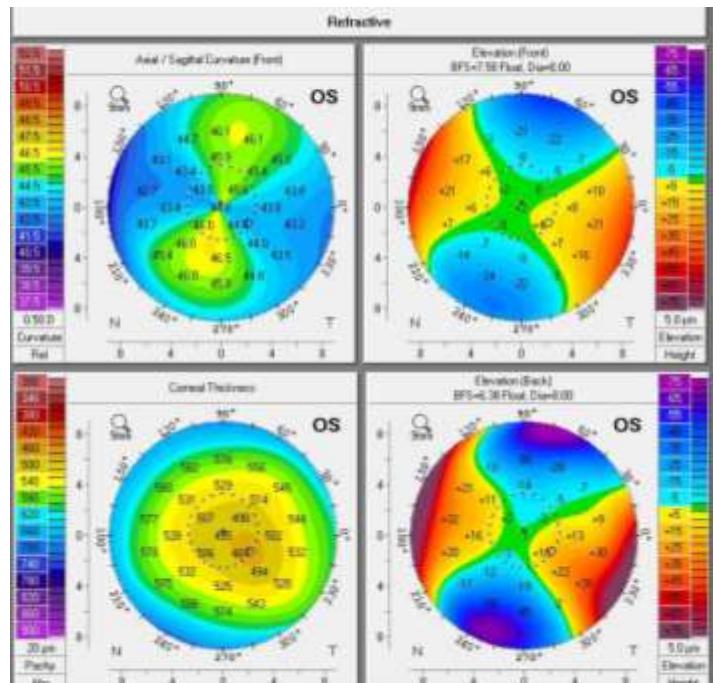
## Complex solution for complex cases

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Consultant Cornea and Refractive surgery

### Background

- Mixed Astigmatism
- Good corneal topography
- Relatively thin cornea



## PRK for mixed Astigmatism

### The higher the Cylinder treated with PRK:

- The higher the Astigmatism the higher the haze [J Cataract Refract Surg.](#) 2016
- Under correction of Astigmatism [J Refract Surg.](#) 2016
- Un satisfactory UCDVA [Ophthalmic Surg Lasers Imaging.](#) 2007

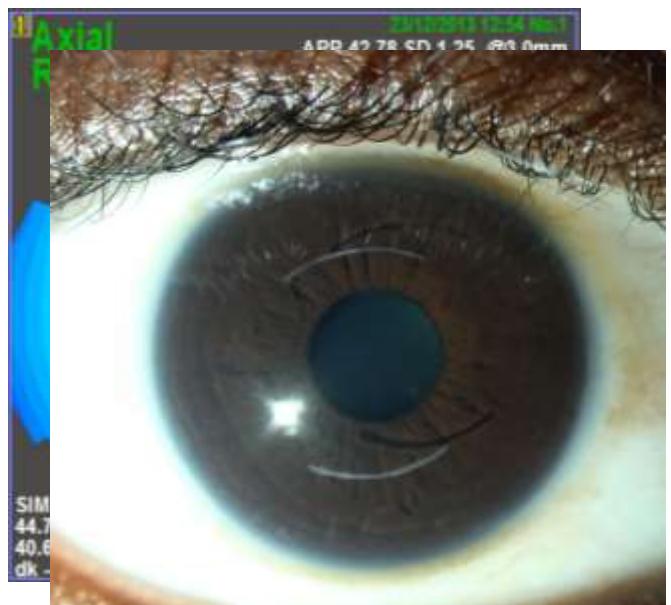


## Inclusion criteria

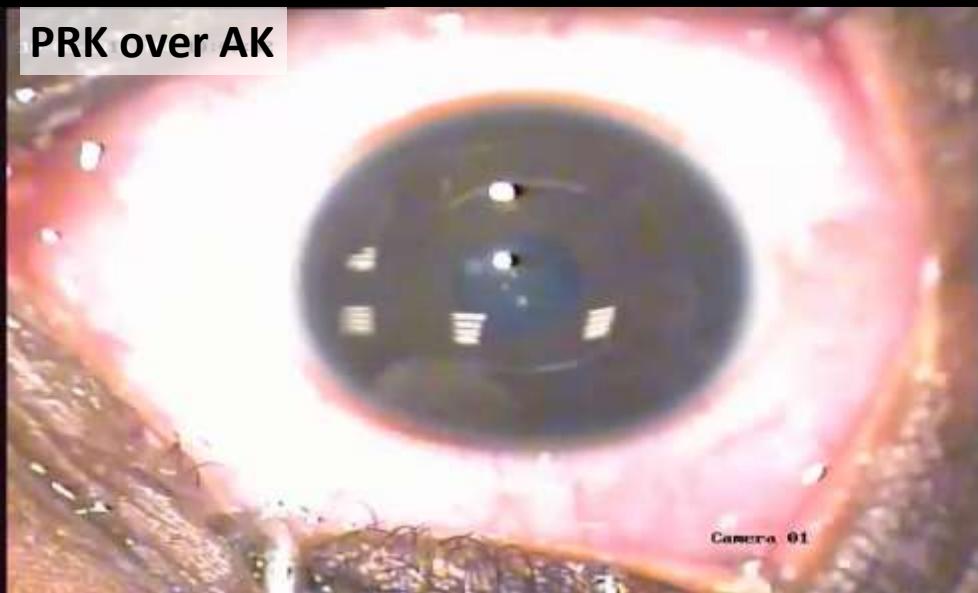
- Mixed Astigmatism
- Stable refraction
- Corneal thickness < 500 µm
- Normal Topography profile

## Methods

- Diameter : 6mm
- Arc : 70 degrees
- Depth : 80% @ site of incision
- IFS 200 - Intralase
- Six months later → PRK + MMC



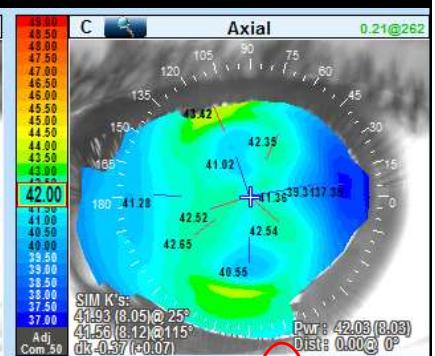
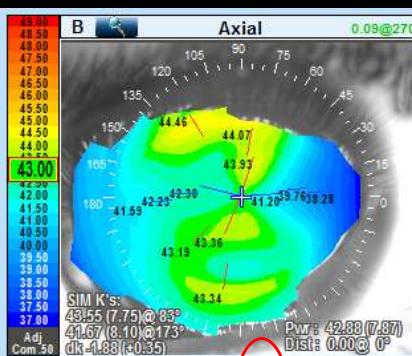
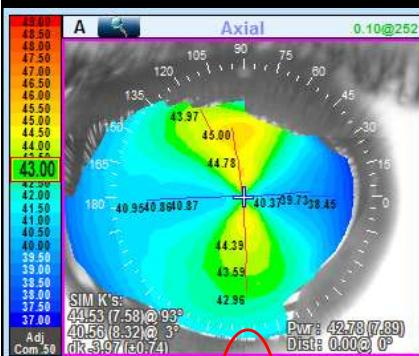
## PRK over AK



Before AK

After AK

After PRK



OD	+1.00	-4.00	180
OS	+1.25	-3.75	175

OD	-0.75	-1.75	170
OS	-1.25	-1.00	165

OD	-0.50	<b>-0.50</b>	105
OS	-0.25	<b>-0.50</b>	80

## Results

### Patient Population and Average Values

number of eyes pre OP: 20

average age@surgery: 29 years (range 19 to 48)

gender	female:	35.0% or 7 eyes	male:	45.0% or 9 eyes
eye	left:	50.0% or 10 eyes	right:	50.0% or 10 eyes

pre SR equiv: mean  $-1.53 \text{ D} \pm 1.06 \text{ D}^\circ$  (range -2.88 to 0.25)

pre SR sph: mean  $0.68 \text{ D} \pm 0.91 \text{ D}^\circ$  (range -0.75 to 2.25)

pre SR cyl: mean  $-4.40 \text{ D} \pm 1.07 \text{ D}^\circ$  (range -6.50 to -2.00)

number of eyes last: 20 (follow up rate 100.0%)

post SR equiv: mean  $-1.44 \text{ D} \pm 1.09 \text{ D}^\circ$  (range -2.50 to 2.38)

post SR sph: mean  $-0.25 \text{ D} \pm 1.19 \text{ D}^\circ$  (range -1.50 to 3.50)

post SR cyl: mean  $-2.39 \text{ D} \pm 0.98 \text{ D}^\circ$  (range -4.50 to -0.25)

$\pm 1$  standard deviation

## Results

### Patient Population and Average Values

number of eyes pre OP: 20

average age@surgery: 28 years (range 19 to 48)

gender	female:	35.0% or 7 eyes	male:	45.0% or 9 eyes
eye	left:	50.0% or 10 eyes	right:	50.0% or 10 eyes

pre SR equiv: mean  $-1.53 \text{ D} \pm 1.06 \text{ D}^\circ$  (range -2.88 to 0.25)

pre SR sph: mean  $0.68 \text{ D} \pm 0.91 \text{ D}^\circ$  (range -0.75 to 2.25)

pre SR cyl: mean  $-4.40 \text{ D} \pm 1.07 \text{ D}^\circ$  (range -6.50 to -2.00)

number of eyes last: 20 (follow up rate 100.0%)

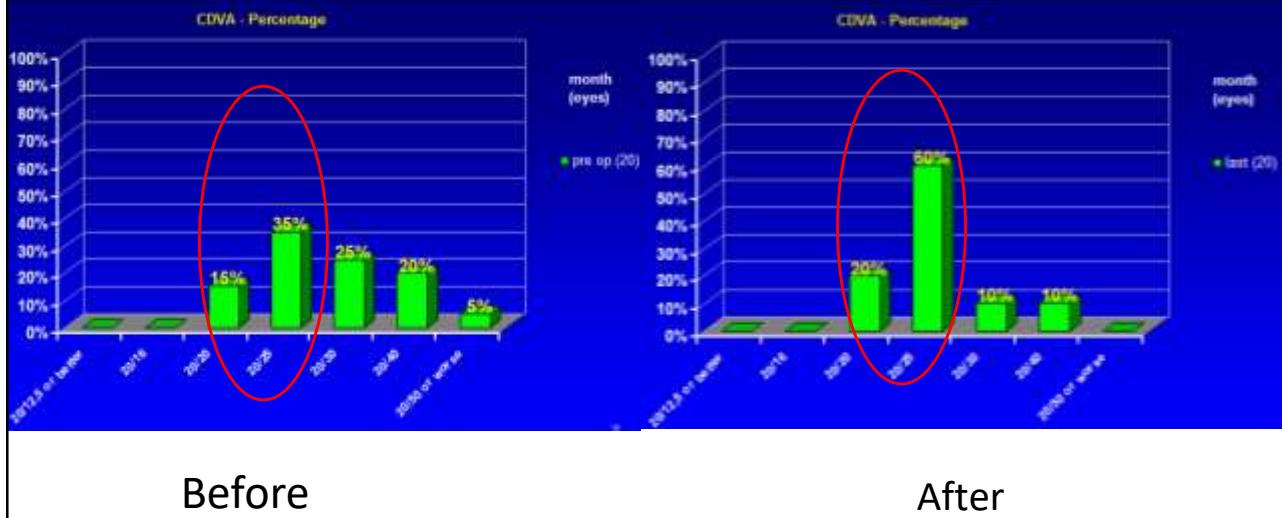
post SR equiv: mean  $-0.33 \text{ D} \pm 0.67 \text{ D}^\circ$  (range -1.63 to 0.63)

post SR sph: mean  $0.23 \text{ D} \pm 0.72 \text{ D}^\circ$  (range -1.50 to 1.75)

post SR cyl: mean  $-1.10 \text{ D} \pm 0.79 \text{ D}^\circ$  (range -2.75 to -0.25)

$\pm 1$  standard deviation

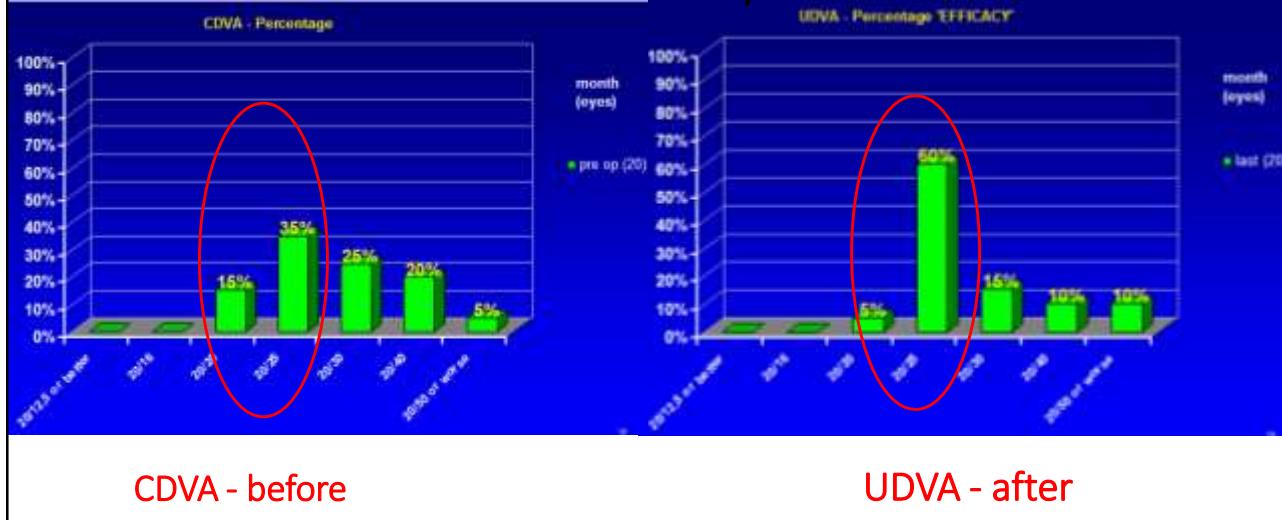
## Results – Visual Acuity (CDVA)



Before

After

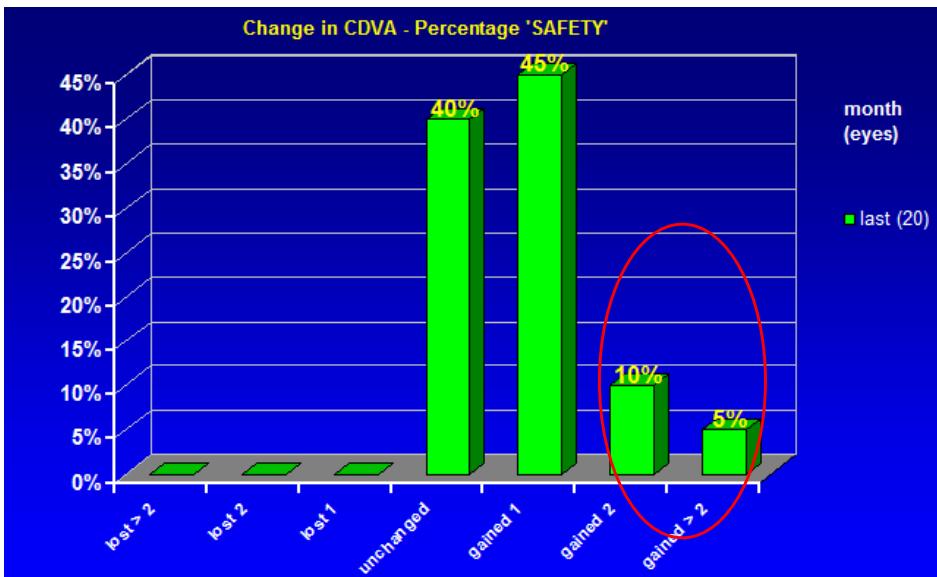
## Results – Visual Acuity UDVA (after) vs CDVA (before) Efficacy



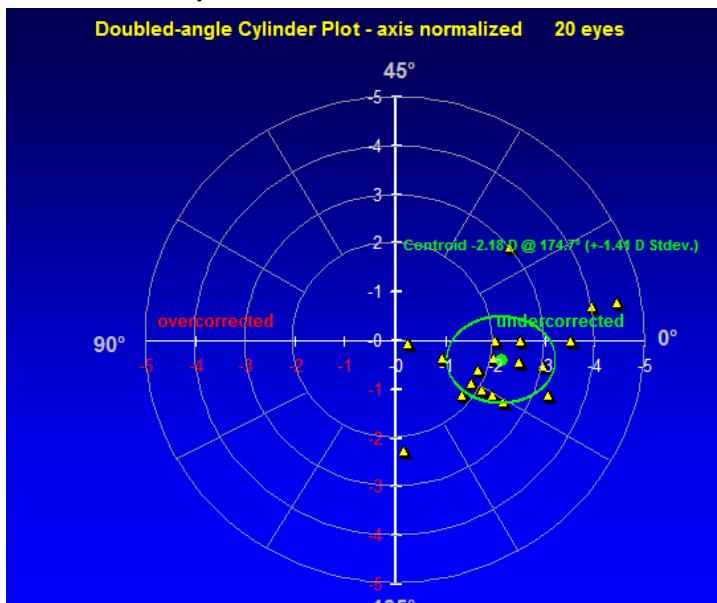
CDVA - before

UDVA - after

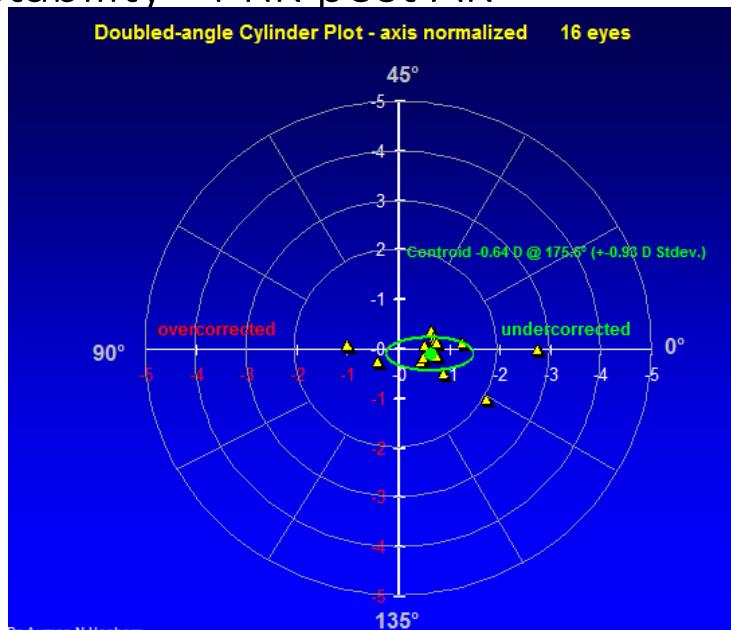
## Visual Acuity - Safety



## Predictability - Post AK



## Predictability - PRK post AK



## Conclusion

Combined Femto-Ak and PRK is safe and relatively predictable for correction of mixed astigmatism

Yes It's More costly

Yes It's More time consuming      BUT

Yes It's Worth it . . .      it is the ONLY option

Thank you