Course title: REFRACTIVE OUTOME OF KERATOCONUS SURGERY

Topic: Combined Keratoconus and Refractive Applications

Course Description: Course will discuss the key points of proper keratoconus diagnosis, which influences the management decision. Different modalities of surgical approaches will be discussed, as well as how to avoid their complications. Attendees should be able to select the proper surgical approach in keratoconus cases.

Educational Objective: Attendee will learn to combine the concept of treatment of the disease with the lowest refractive error possible as the final goal.

keywords: Crosslinking and Keratoconus

Slot: Sunday, April 27, 2014: 8:00 AM-9:30 AM

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Category: KeratoRefractive.

Handout description:
Keratoconus is a bilateral, non-inflammatory and progressive ectatic corneal steepening. Eventually, central and para-central corneal thinning occurs inducing myopia and irregular astigmatism. Subsequent loss of best corrected visual acuity (BCVA) is eminent due to aggravation of the higher order aberrations.
Surgical treatment for Keratoconus includes
- ultraviolet Cross Linking application in stage I
- Intracorneal rings segments or Mayo Rings and ultraviolet Cross Linking application in stage II.
- Deep Anterior lamellar keratoplasty for Stage III.
- Penetrating Keratoplasty for stage IV.

The patient is directed to one of the above mentioned treatment as management of deterioration mainly to cease it. However, from the patient's point of view there are 2 important goals:
1- Improvement of visual quality, i.e., the best corrected visual acuity
2- vision independent of glasses, i.e., refractive surgery.

During our mission for patient's satisfaction, there are some maneuvers and complimentary procedures that can be performed to achieve such goals. Among which we include PRK + MitoC with or without cross Linking (PRK extra), phakic IOLs either iris claw lenses or implantable contact lens (ICL). It is also possible to plan a clear lens extraction and implanting aspheric lenses for cases with high myopic error and shallow anterior chamber. Last, we can still also consider early postoperative suture manipulation to correct astigmatism in cases of keratoplasty.

The Course is directed to a crucial and proper keratoconus diagnosis, which influences the management decision. Different modalities of surgical approaches will be discussed, as well as how to avoid their complications. Finally, how to improve the refractive outcome of the different procedures in order to achieve better patient satisfaction.