

PHOTOREFRACTIVE KERATECTOMY OF HYPEROPIC ASTTIGMATISM BY STTEEPENING THE FLAT AXIS OFF THE CORNEA: ONE YEAR FOLLOW- UP OF ONE HUNDRED CASES

*Authors: Gerold Fiedler, M.D.; Matthias
Pertzsch, M.D.; Monika Ulman, M.D.*

Pilgersheimer Str. 62
Munich
GERMANY D-81543
Office #: 011 49 89 658 828
Fax # : 011 49 89 659 370

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Purpose: Astigmatic PRK was usually performed by flattening the steep axis. If a general hyperopic correction is required, the optical zone had to be resteeptened again.

Methods: With the Keracor 116, the flat axis is steepened first, then the whole optical zone is steepened up to correct hyperopia.

Results: Average hyperopia of 2.51D was reduced to +0.43 +/- 0.69D and astigmatism from 1.71D to +0.59+/-0.48 D. BVA was 0.71 compared to 0.89 preOP. Four eyes lost two lines. Regression was 0.37D in Sphere and 0.49D in Cylinder.

Conclusion: Treatment of hyperopic astigmatism by steepening up the flat axis represents a new method saving corneal tissue. Larger standard deviation, more regression and a higher percentage of lost lines in BVA compared to PRK of compound myopic astigmatism are observed.