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FEMTOSECOND LASERS IN OPHTHALMOLOGY

Soong and Malta

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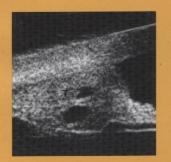
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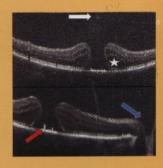
REDUCED ZINC AND COPPER IN THE RETINAL PIGMENT EPITHELIUM AND CHOROID IN AGE-RELATED MACULAR DEGENERATION

Erie, Good, Butz, and Pulido









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• 984 One-year prospective intrapatient comparison of aspherical and spherical intraocular lenses in patients with bilateral cataract. Shinichiro Ohtani, Susumu Gekka, Masato Honbou, Yasushi Kataoka, Keiichiro Minami, Kazunori Miyata, and Tetsuro Oshika

In a longitudinal, intraindividual comparison of aspherical and spherical silicone intraocular lenses (IOL) of same material and platform, a silicone, foldable, aspherical IOLs (Tecnis Z9000) yielded significantly lower ocular wavefront aberration and better contrast sensitivity under scotopic conditions without compromising depth of focus. Contrast sensitivity under photopic and mesopic conditions was not different between lenses. These results were consistent through the 1-year follow-up.

• 990 Refractive lens exchange with foldable toric intraocular lens. Ramón Ruíz-Mesa, Daniel Carrasco-Sánchez, Sara B. Díaz-Álvarez, M. Ángeles Ruíz-Mateos, Teresa Ferrer-Blasco, and Robert Montés-Micó

In this study, we evaluated the visual and refractive outcomes and rotational stability after refractive lens exchange (RLE) with toric intraocular lens (IOL) implantation to correct ametropia and preexisting astigmatism. We found that RLE with toric IOL implantation is a good surgical option for correcting spherical and cylindrical refractive errors.

• 997 Late-onset decentration of iris-fixated phakic intraocular lenses: a case series. Muriël Doors, Fred A. Eggink, Carroll A. B. Webers, and Rudy M. M. A. Nuijts Late-onset downward decentration of iris-fixated phakic intraocular lenses (pIOL) resulting from progressive shifting of the haptics through the iris tissue occurred in 9 (2.4%) of 368 eyes. This decentration was associated with a decrease in iris tissue, but did not result in a distance from the edge of the pIOL to the endothelium smaller than the recommended safety distance of 1.5 mm. Careful follow-up is necessary to decide whether timely refixation is indicated.

• 1004 Successful treatment of Stevens-Johnson syndrome with steroid pulse therapy at disease onset. Yayoi Araki, Chie Sotozono, Tsutomu Inatomi, Mayumi Ueta, Norihiko Yokoi, Eiichiro Ueda, Saburo Kishimoto, and Shigeru Kinoshita

This article highlights the usefulness of steroid pulse therapy at the onset of Stevens-Johnson syndrome. Patients who received steroid pulse therapy combined with topical betamethasone within 4 days from disease onset showed clear corneas at 1 year from the onset. No eye had cicatricial changes except 1 with slight fornix shortening, and best-corrected visual acuity was 20/20 or better in all eyes.

• 1012 Retinal breaks associated with the induction of posterior vitreous detachment. Song Ee Chung, Kuk-Hyoe Kim, and Se Woong Kang

The correlation between the incidence of vitrectomy-related retinal breaks and the induction of a posterior vitreous detachment (PVD) was assessed in this study. The incidence rate of intraoperative or postoperative retinal breaks, or both, was higher in the eyes with induction of PVD. The results suggest that caution should be exercised after the induction of PVD to identify all retinal breaks so they can be treated.

• 1017 Relationship between diabetic retinopathy and sleep-disordered breathing. Tomoaki Shiba, Yukihiro Sato, and Mao Takahashi

Forty-eight nonproliferative diabetic retinopathy (NPDR) and 118 proliferative diabetic retinopathy (PDR) cases were calculated sleeping 4% oxygen desaturation index (ODI) (times/hour). If 4% ODI>5, sleep-disordered breathing (SDB) was diagnosed. The incidence of SDB and the value of 4% ODI were significantly higher in the PDR group. Higher value of 4% ODI was selected as independent contribution factors to diagnosis of PDR. In DR patient, it was suggested that nocturnal desaturation, reoxygenation caused by SDB may related to the development of PDR.