

Mixed and Compound Hyperopic High Power Astigmatism: Still a Problem ?

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Correction of High Power Astigmatism

Goals

- Good visual acuity
- Reducing cylinder power
- Obtaining the widest possible optical zone
- No increase in aberrations

High Power Mixed and Compound Hyperopic Astigmatism

- Still the most complex refractive errors to treat
- Several ablation patterns proposed:
 - Steep meridian: myopic cyl ablation + hyperopic sph ablation
(Dausch D, J Cataract Refract Surg 1994, 20 S)
 - Flat meridian: hyperopic cyl ablation + myopic sph ablation
(Argento CJ, J Cataract Refract Surg 1997, 23)
 - Cross - Cylinder
(Vinciguerra P, J Refract Surg 1999, 15)
 - Bitoric ablation (asymmetrical split on two meridians)
(Chayet AS, Ophthalmology 2001, 108)

High Power Mixed and Compound Hyperopic Astigmatism

- Azar, in a thorough analysis of different available methods, recommended correction on the hyperopic meridian only, with the advantage of removing less cornea than with any other technique.

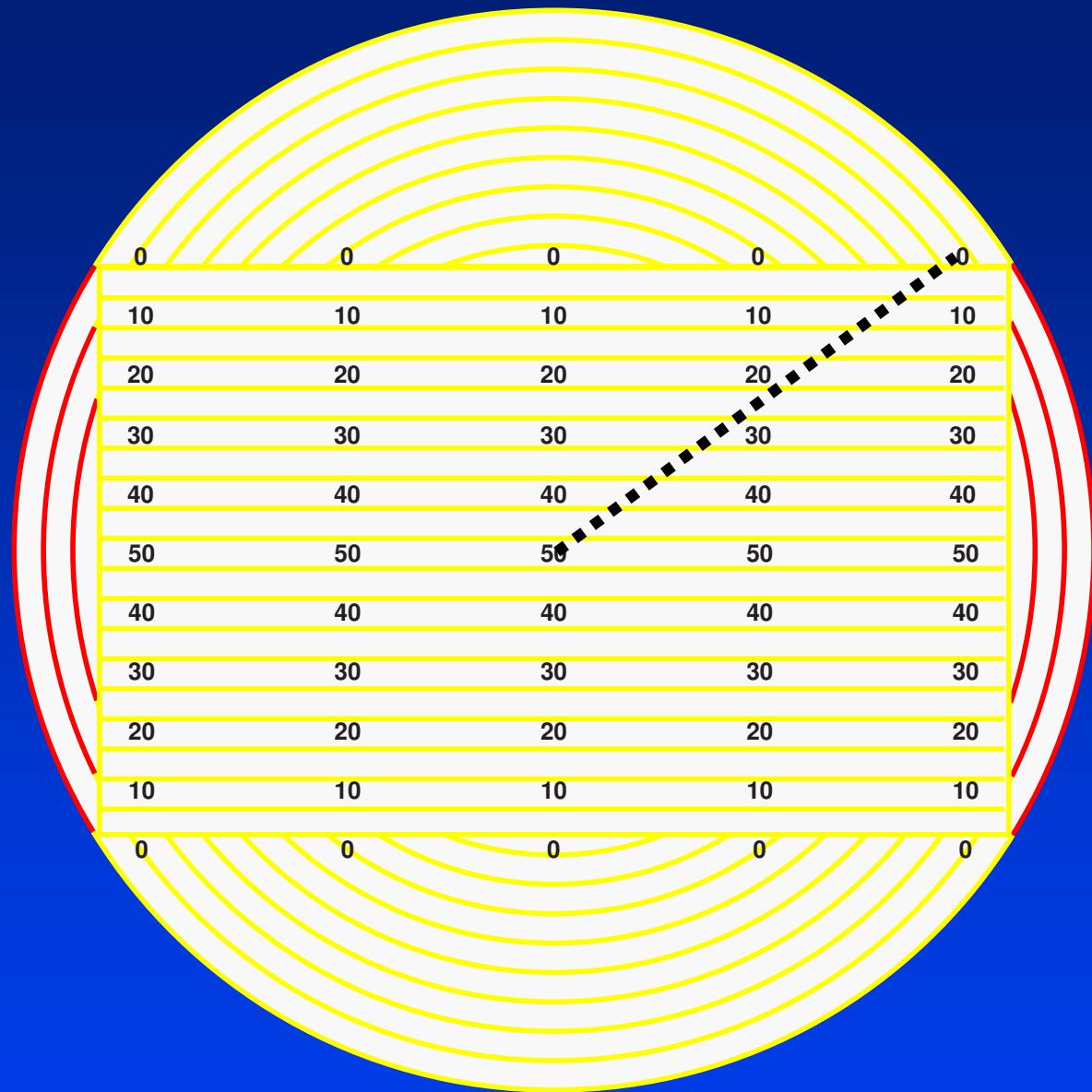
(Azar DT, J Cataract Refract Surg 2000, 26)

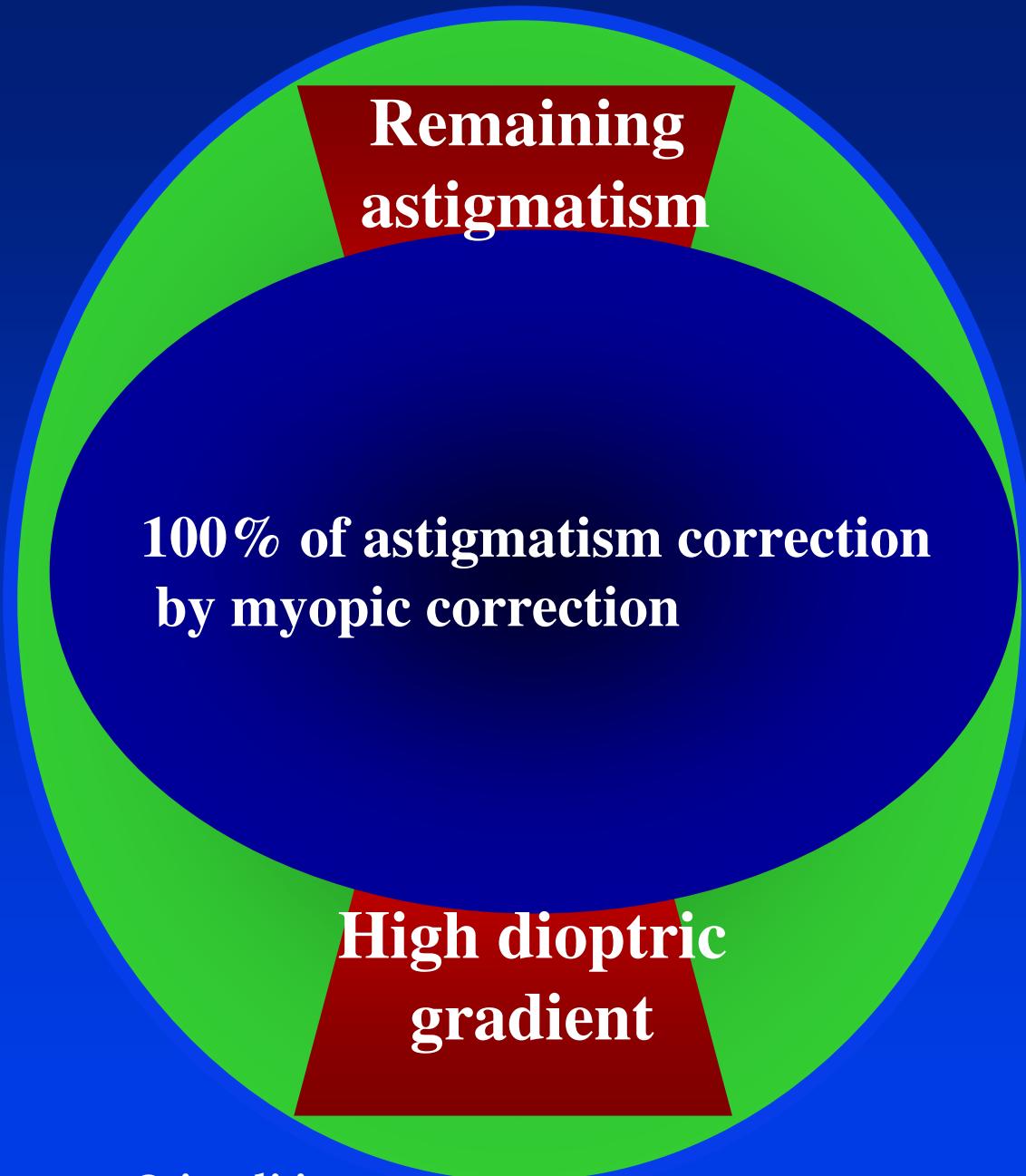
- However, good visual acuity remains the most important goal
- Astigmatic ablation on one meridian only induces tetrafoil

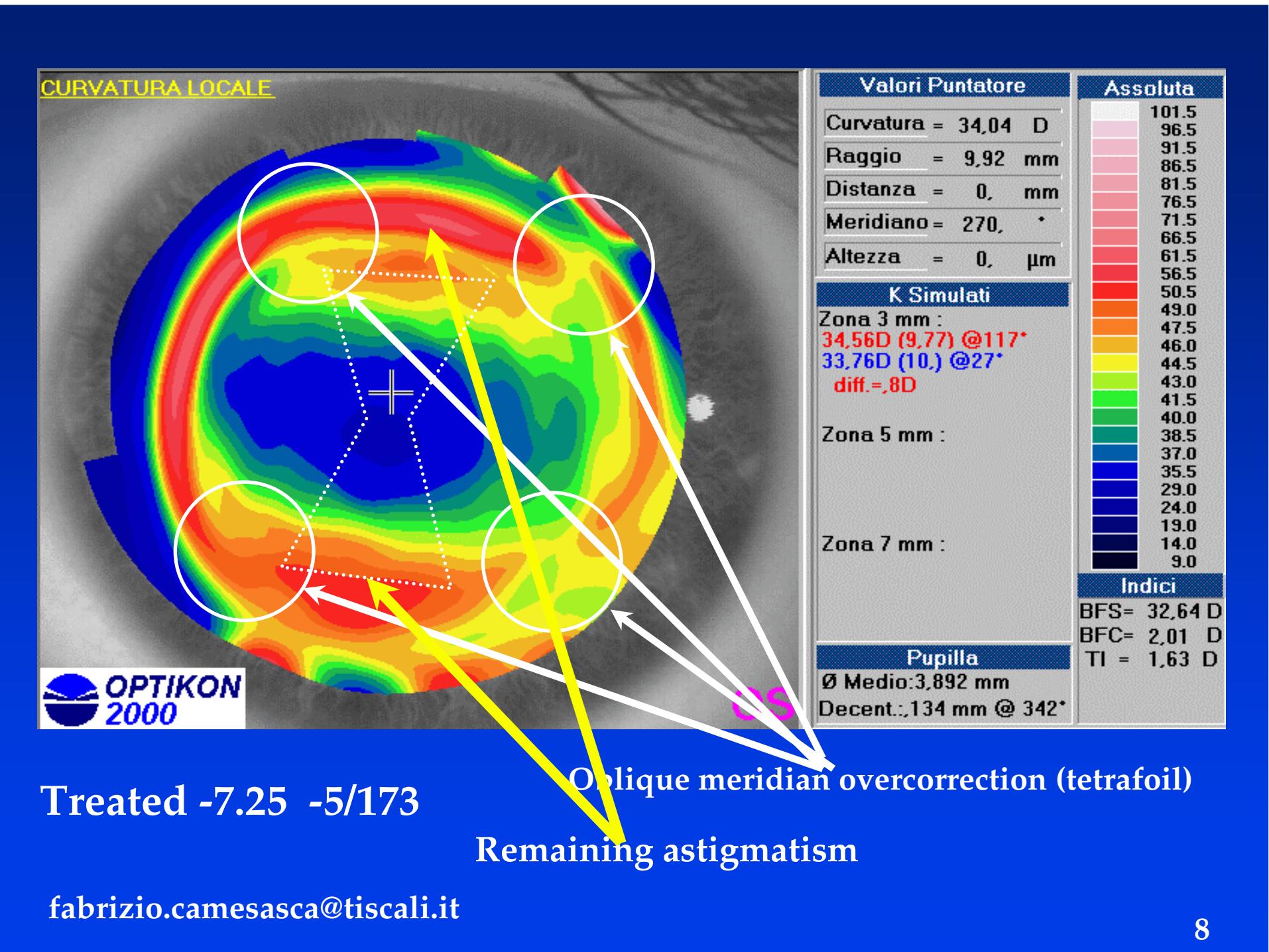
Astigmatism

The presently available techniques for the correction of astigmatism are adequate on the steepest meridian, but create overcorrection

on the oblique meridians, that feature a lower preoperative dioptrical power.







Astigmatism

Cross-Cylinder Technique

- Cyl power
 - 50% positive cyl
 - 50% negative cyl
 - Spherical equivalent added to sphere
- i.e. : +4.00 -3.00 (180)
 - +2.50 +1.50 (90)
 - -1.50 (180)

(Vinciguerra P, J Refract Surg 1999, 15)

Materials & Methods

High Power Mixed and Compound Hyperopic Astigmatism

- Retrospective study, 2000 – 2003
- Selection criteria:
 - Cyl power: from -2.00 to -6.00
 - SE from -2.00 to +4.00

Materials & Methods

- NIDEK EC 5000
- PRK - LASEK
- Amoil's brush-Asico LASEK set
- Cross-Cylinder Technique

Materials & Methods

High Power M and CH Astigmatism - Preoperative

- 29 eyes of 20 patients
- VA 0.84 ± 0.15
- Sph 1.73 ± 1.25 D
- Cyl -3.20 ± 0.90 D
- Axis $37.9^\circ \pm 60.0^\circ$
- SE 0.06 ± 1.25 D

Results

Cross-Cylinder, Multizone Ablation

- Hyperopic ablation
 - OZ width: mean 5.8 ± 0.6 mm (range: 5.5 – 7.0 mm)
 - TZ width: mean 9.9 ± 0.4 mm (range: 8.0 - 10 mm)
 - Mean + sph: 0.71 ± 0.94 D
 - Mean + cyl: 1.71 ± 0.55 D
- Myopic Ablation
 - 1 – 6 OZs (mean: 2.4 OZ/eye)
 - OZ width: mean 4.9 ± 0.4 mm (range 4.7 – 7.5 mm)
 - TZ width: mean 7.5 ± 0.4 mm (range 10 – 8.6 mm)
 - Mean - sph : -0.20 ± 0.18 D
 - Mean – cyl : -0.51 ± 0.14 D

Results

Surgical Data

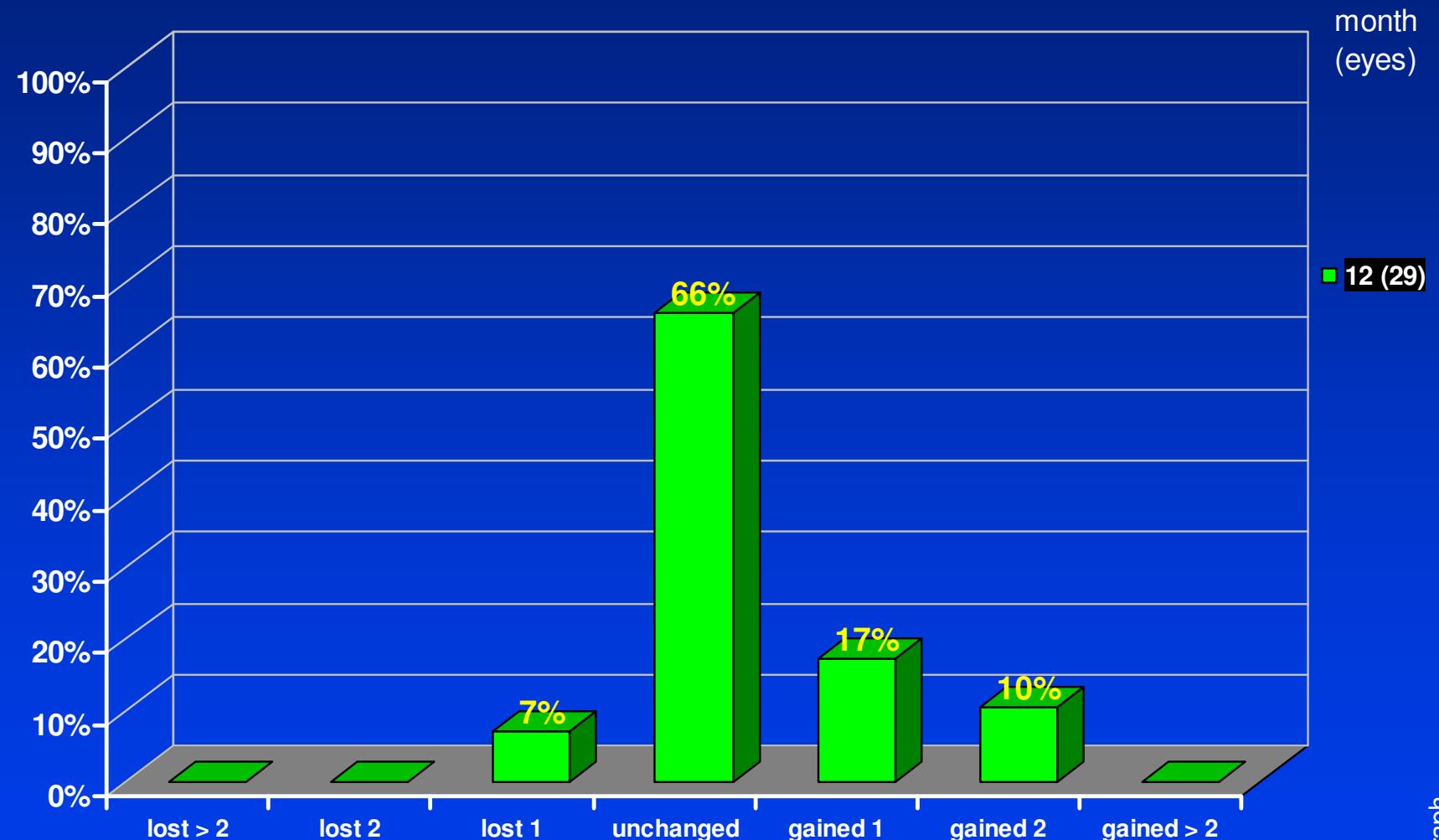
- Smoothing with masking fluid:
 - 10 Hz
 - Diameter: 10 mm
 - Laser scans: 80 ± 25
 - Effective ablation: 30μ

Results

High Power M and CH Astigmatism - Postoperative

- Follow up: 327 ± 196 days
- VA 0.88 ± 0.11
- Sph 1.11 ± 1.52 D
- Cyl -1.55 ± 1.42 D
- Axis $41.3^\circ \pm 63.3^\circ$
- SE 0.34 ± 1.11 D

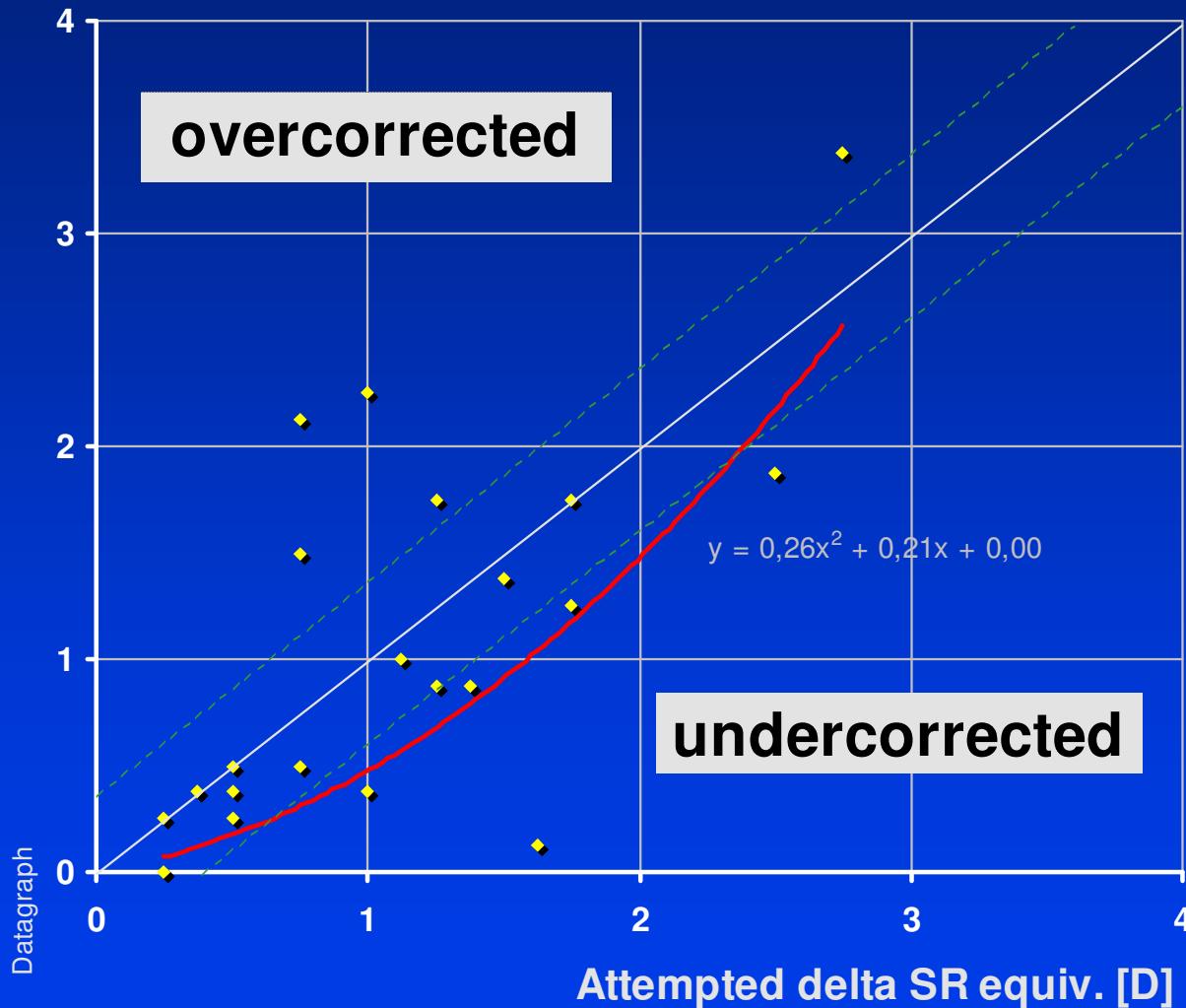
SAFETY: Change in BSCVA - Percent



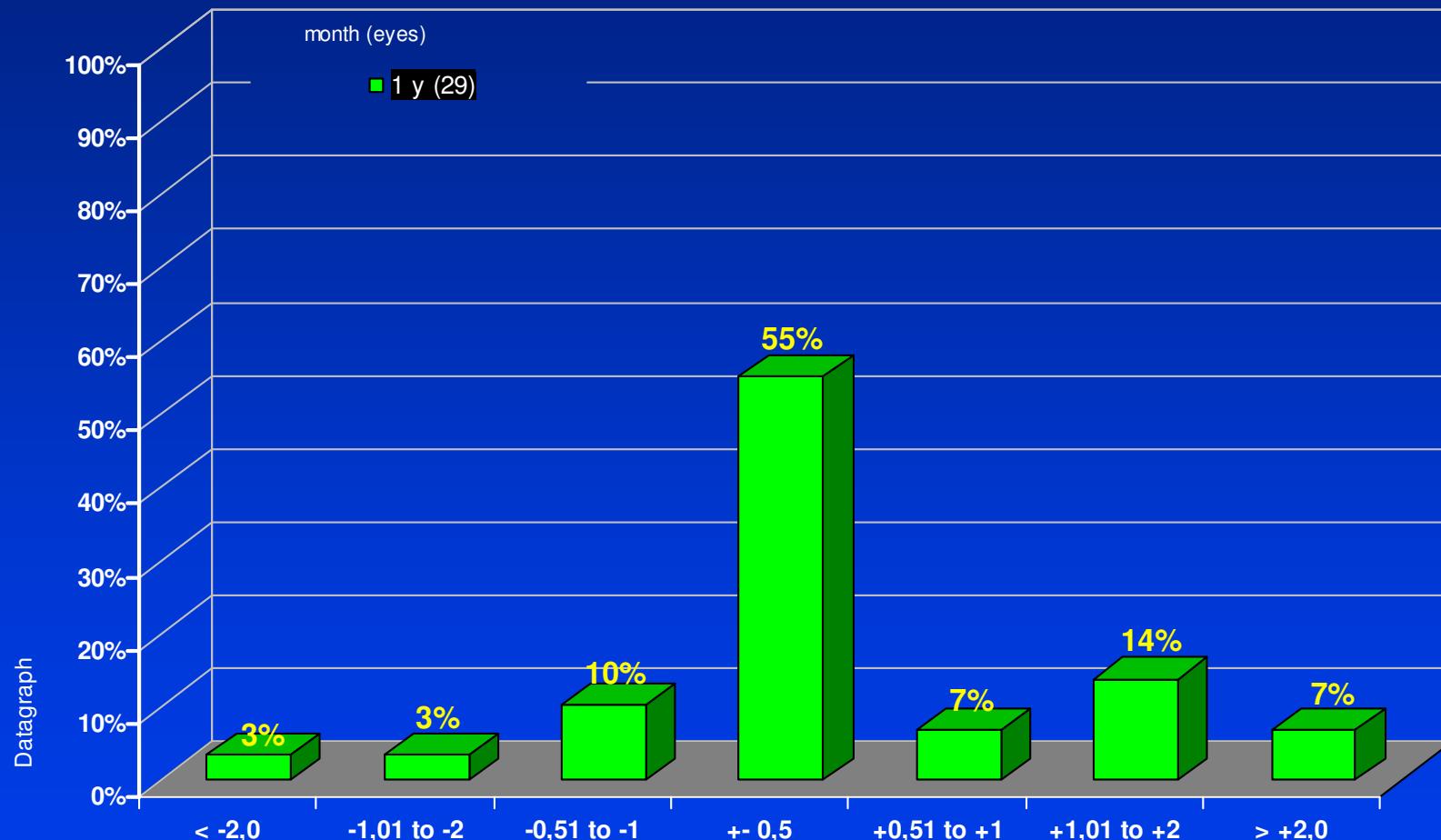
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Attempted vs. Achieved SE

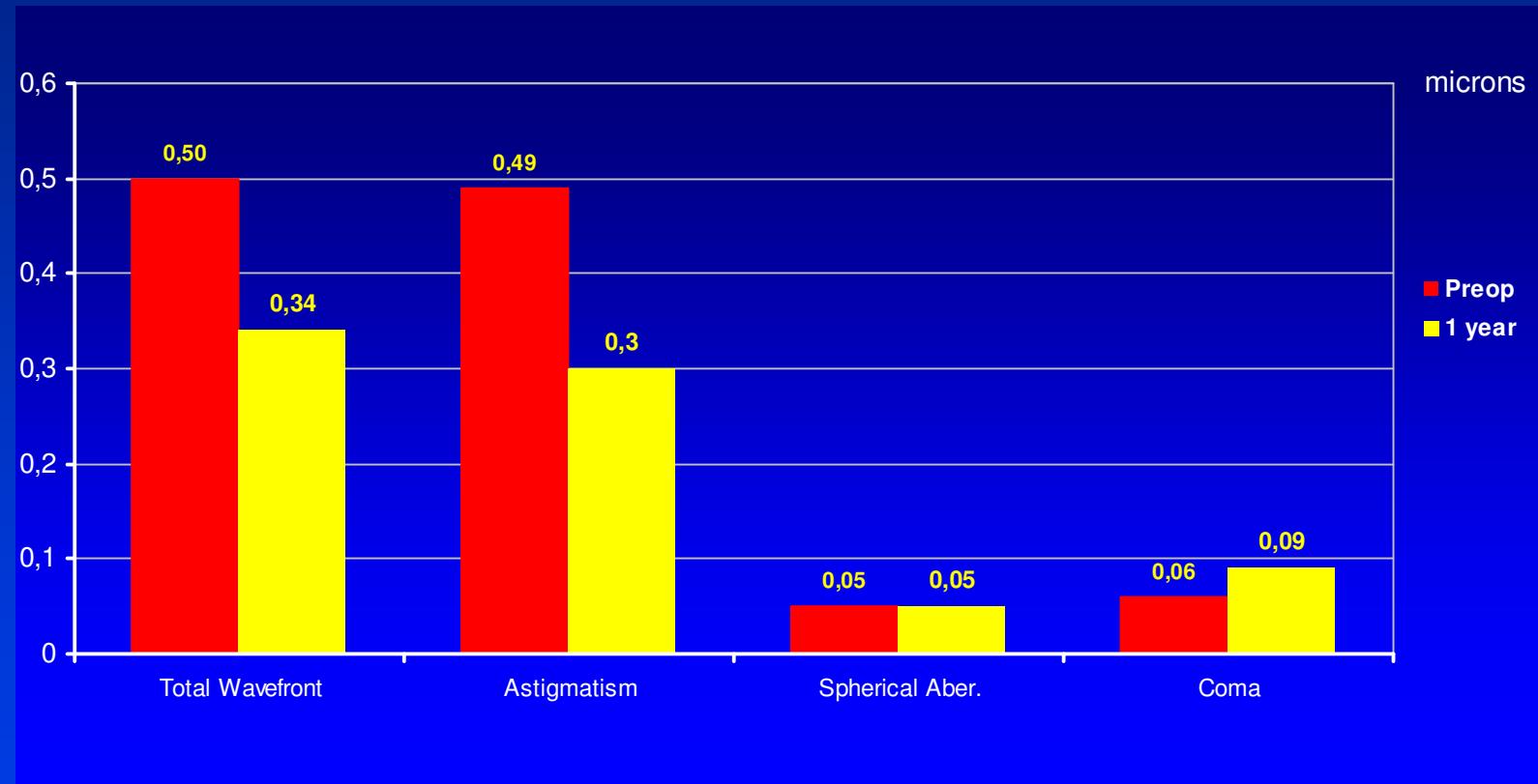
Achieved [D]



Refractive Outcome: % within Attempted Correction



Wavefront Aberrations



Conclusions

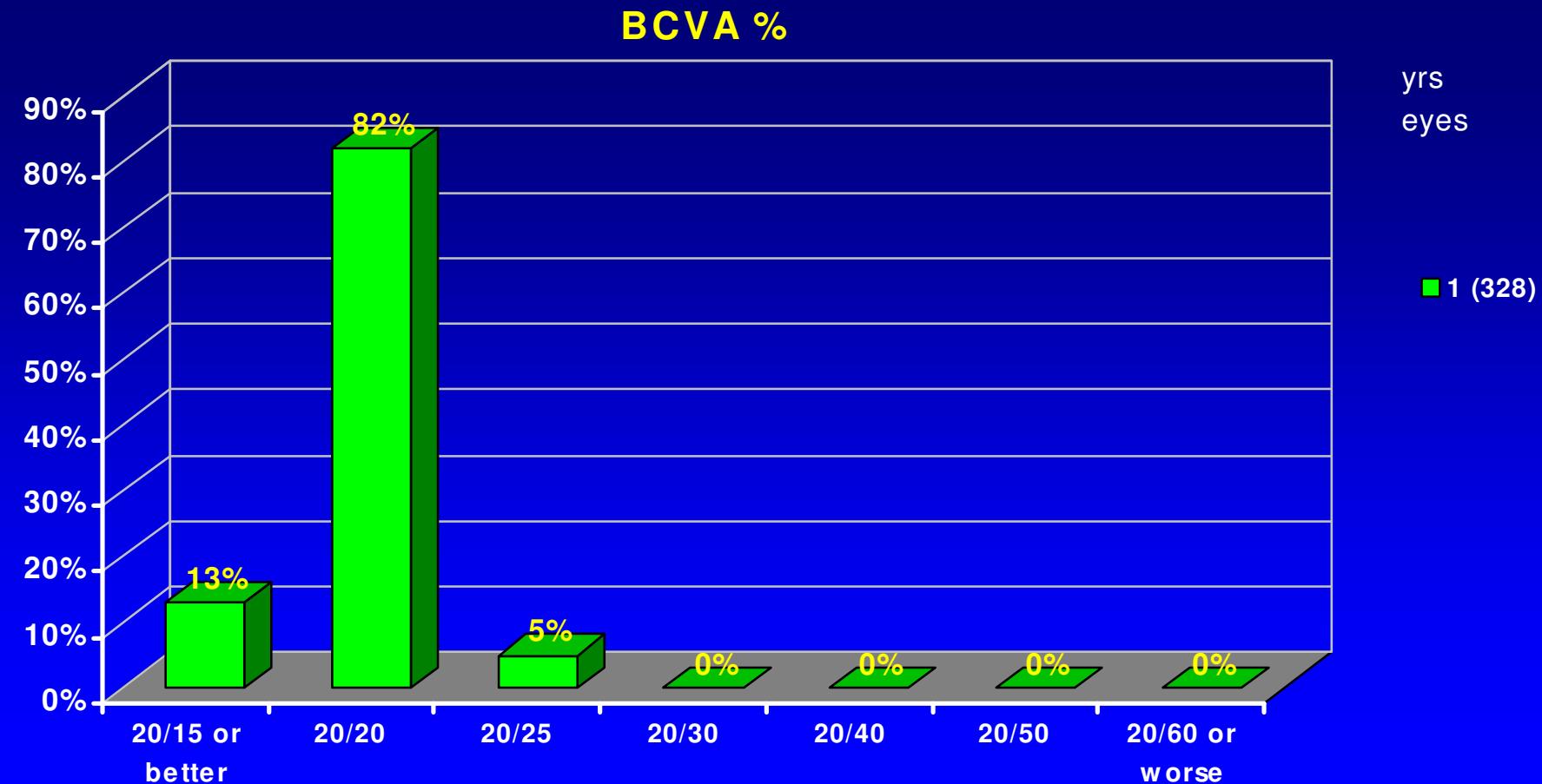
High Power M and CH Astigmatism

- Multizone Cross-Cylinder is a safe technique
- Reduction: 56% Sphere and 49% Cylinder
- Total wavefront error: decreased (astigmatism is the main component)
- Spherical aberration and coma: unchanged

...is that all ?

Results

Myopic Astigmatism

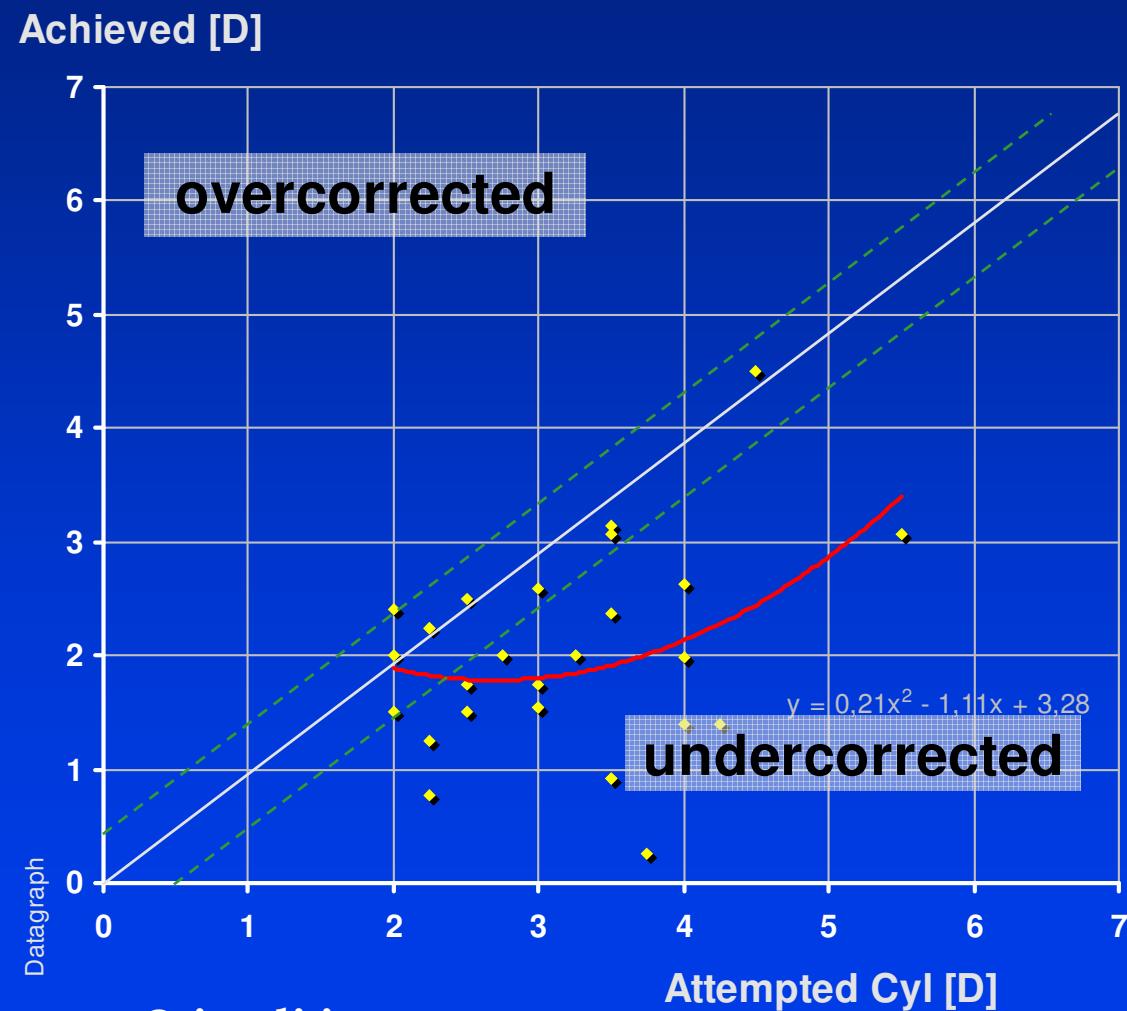


Total Induced Change in Astigmatism (Vectoral Change)

- The cylindrical component of the spherocylindrical lens that mimics the change in power of the cornea, as calculated by vectoral analysis; that is, the combined change of power and axis of the astigmatism.

(Harris DJ, Ophthalmology 1989;96:1597-607)

Preop Cyl vs. Achieved Change in Cyl. (based on Vector Analysis)



Axis Alignment

High Power M and CH Astigmatism

- Mean preoperative axis:
 37.9 ± 60.0 degrees
- Mean postoperative axis:
 41.3 ± 63.3 degrees
- Mean resultant axis of correction:
 63.3 ± 64.5 degrees
- Mean axis error:
 9.6 ± 14.6 degrees

Vectoral Change

Cyl Power

- Mean preoperative cyl: -3.20 ± 0.90 D
- Mean postoperative cyl: -1.55 ± 1.42 D
- Mean cyl vectoral change :
 -1.98 ± 0.84 D
- Mean refractive error induced by axis misalignment:
 - 0.92 ± 1.38 D sphere (53% of preop.)
 - -1.22 ± 1.06 D cylinder (38% of preop.)

Residua Aberration For Most Axis-Sensitive Term (%)

125
100
75
50
25
0

Torsional Alignment Error (degrees)

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Axis Misalignment Effect

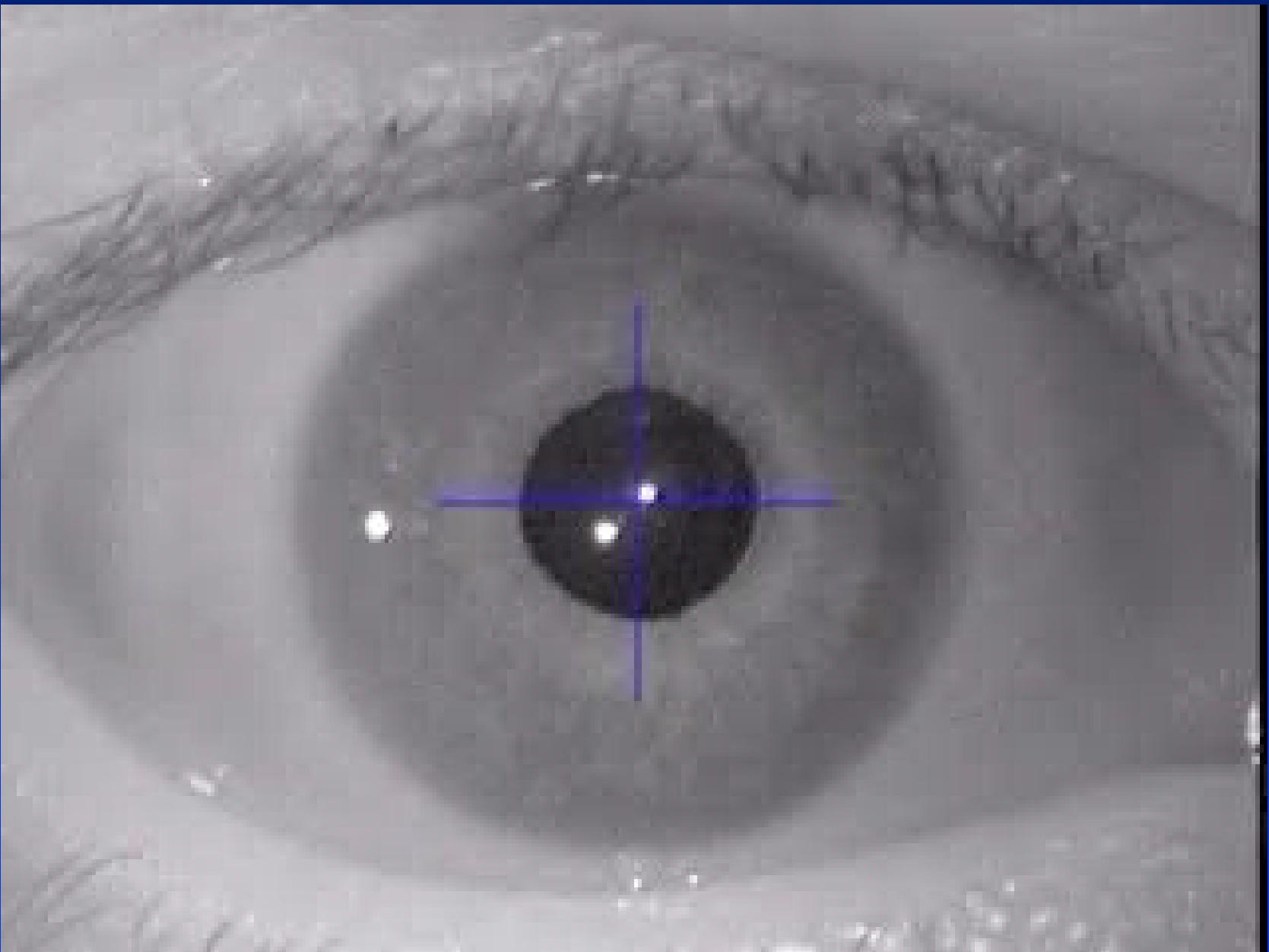
65%
**Uncorrected
Tetrafoil**

- Z2 Astigmatism
- Z3 Trefoil
- Z4 Tetrafoil

50%
**Uncorrected
Trefoil**

30%
**Uncorrected
Astigmatism**

10° Alignment Error





Arrivederci
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2004

Overcorrection ($\leq 20\%$) of the oblique meridians

Axis	Theoretical	Real	Overcorrection D
90	50	50	0
108	40	47.5	0.75
126	30	40	1
144	20	29	0.9
162	10	15.5	0.55
180	0	0	0