

(X) R1 () R2 () R3 () PG0 () PG1 () Estagiário () Tecnólogo () PIBIC

Last Name - Oliveira
First Name - Alexandre
Middle - Príncipe

Service (sector)
Refractive Surgery

Nº CEP

Evaluation of two refractive surgery outcome analysis softwares

Príncipe, A., Schor, P.

Purpose: To evaluate two currently outcome analysis softwares for refractive surgery and their usefulness for the refractive surgeon

Methods: The software Sanan Comprehensive Outcomes Reporting (S.C.O.R), and the Outcomes Analysis software (O.A.S) were evaluated focusing in their features and capabilities. The amount of questions to edit the patient and procedure data and their capability to analyze it were evaluated.

Results: Both softwares have a complete file to edit patient data including identification, ocular examination, surgical technique, and equipment used in the procedure. Also a detailed description of the pre surgical information results and follows up of each patient. Both software's also have methods to analyze the surgical results. There are also methods peculiar to each software. The S.C.O.R has a unique astigmatism analysis graph that shows the surgical induced astigmatism, the intended astigmatism correction and their difference. The O.A.S have options to analyze surgical results between specific groups of patients separated by age, refractive error, equipment used in surgery, date of the intervention, and other edited data. It can also analyze pre surgical data, complications and can perform nomograms. The S.C.O.R has less information to be filled up which makes the editing of patient data faster. The O.A.S have a more detailed file to be filled up which takes more time but it has more analysis options.

Conclusion: The widespread of refractive surgery procedures worldwide created a necessity to better manage clinical postoperative data. New software's must be able to match individual patient automatically and provide comprehensive behavior of procedures, either by its main and specific indications. Regardless it's features they must be included in the good clinical practice, to improve the predictability of procedures.