

R1 R2 R3 PG0 PG1 Estagiário Tecnólogo
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Service (sector) Cataract N° CEP

Phacoemulsification with AMO Array multifocal intraocular lens implantation: visual function, clinical and quality-of-life outcomes – preliminary results.

(Solange Higashitani , Lincoln Lemes Freitas) Purpose – To evaluate visual function, clinical and quality –of-life in patients after phacoemulsification with AMO Array multifocal intraocular lens implantation. Methods –This prospective, randomized, unmasked clinical trial includes patients with bilateral cataract who looked for assistance from the Cataract section. Inclusion criteria: all literate patients , bilateral senile cataract and no non cataract ocular pathology; 40 to 80 years old; preoperative cylinder less than 1,75 D ; Snellen chart best corrected visual acuity of 20/40 or less in both eyes ; 20/30 or better potential visual acuity in both eyes; axial length 21 to 26 mm. Power lens calculation has been done by one examiner with applanation biometry and Zeiss IOLMaster. “Phaco –chop” phacoemulsification has been performed by one experienced surgeon, using a “neutral” clear corneal incision with AMO Array multifocal intraocular lens (SA 40N foldable silicone 6mm diameter) implantation. Second eye surgery has been done after 2 weeks. Postoperative routine also included in the 3rd and 6th month: distance and near uncorrected and best corrected visual acuity, videoceratometry , contrast sensitivity measurements, quality of life questionnaire by Javitt. Results –This study included 21 patients up to the present. Eight of them had bilateral AMO Array intraocular implants but only five (10 eyes) have had a 3 months follow up . Uncorrected distance visual acuity was 20/20 in 60% (6 eyes); 30% range from 20/30 to 20/50 (3 eyes) and 01 eye presented pigment changes in the retinal epithelium and reach 20/200. Uncorrected near visual acuity was J1 in 80% (8 eyes) and J6 in 20%. However, in the questionnaire none of them needed distance or near glasses .Another thirteen patients had monocular AMO Array implants and the second eye surgery is going to be done. Conclusion: Preliminary results suggest satisfactory uncorrected distance and near visual acuity and high patient satisfaction with AMO Array multifocal intraocular lens. Most postoperative exams are not available up to this moment and those missing exams are critical to give us conclusive results.