( ) R1 ( ) R2 ( ) R3 (X) PG0 ( ) PG1 ( ) Estagiário ( ) Tecnólogo ( )
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Service (sector) Refraction and Contact lenses Nº CEP

INTRAOCULAR PRESSURE ANALYSIS AFTER CORNEAL PHOTOABLATION BY LASIK AND LASEK. (E.L.GARCIA, MD)

PURPOSE:To display a comparative study of the pre and postoperative intraocular pressure between LASIK and LASEK , and correlate it to initial and final pachimetry.

METHODS: 60 eyes of myopic patients aged over twenty years and below forty years will be analysed. The graduations will be limited between 1.00 and 8.00 dpt. All patients will be submited to a complete ophthalmic preoperative examination, general examination, central pachimetry, corneal topography , aplanation tonometry and non-contact tonometry. It will be realized 30 LASIK and 30 LASEK. All surgeries will be realized by the same surgeon, making use of a defined technic and the described equipments. The pachimetry, the aplanation tonometry and the non-contact tonometry will be done twice: preoperative and at the 30th postoperative day (same hour).

RESULTS: At the moment there are 12 eyes with LASEK and 14 eyes with LASIK. Two patients realized LASIK in the right eye and LASEK on the left. The age average of LASIK´s patient is 30,57 years and of LASEK´s patient is 29,66 years. The first results for LASEK in preoperative in average are: refraction –5,91 dpt; pachimetry (in micras) 487,27; aplanation tonometry 12,41 mmHg and non-contact tonometry 13,4 mmHg. And in postoperative are: refraction –0,08 dtp; pachimetry 398,83; aplanation tonometry 9,08 mmHg and non-contact tonometry 8,08 mmHg. The first results for LASIK in preoperative in average are: refraction –3,08 dpt; pachimetry (in micras) 513,21; aplanation tonometry 13,57 mmHg and non-contact tonometry 11,84 mmHg. And in postoperative are: refraction –0,05 dpt; pachimetry 473,93; aplanation tonometry 11,12 mmHg and non-contact tonometry 10,42 mmHg. There had a postoperative complication with LASEK technic, HAZE, in 2 patients (4 eyes) that made their AV lower (20/30) and these patients are been analysed and taken care of. As sugested before, this cases will be statisticaly analysed and compared with the literature. The data must be retained under a Windows Excelâ report and under an Epi Info 6.0’s statistic analyse.

CONCLUSIONS: The tonometry value’s redution in postoperative exists, in such case we will attempt to correlate with the corneal thickiness redution. Our initial results are similar to the literature: We found reduction in IOP after LASIK and LASEK procedures in myiopic eyes. Will try to compare the final results of LASIK and LASEK.