

**2007 Research Days Abstract Form – Department of Ophthalmology – UNIFESP/EPM**

2. SCIENTIFIC SECTION PREFERENCE (REQUIRED): Review the Scientific section Descriptions. Select and enter the two-letter Code for the one (1) Section best suited to review your abstract  
(GL)

3. PRESENTATION PREFERENCE (REQUIRED) Check one (1)  
(a) Paper  
(b) **Poster**

4. The signature of the First (Presenting) Author, (REQUIRED) acting as the authorized agent for all authors, hereby certifies.  
That any research reported was conducted in compliance with the Declaration of Helsinki and the UNIFESP Ethical Committee"

\_\_\_\_\_  
Signature of First

Scientific Section Descriptions  
(OR) ORBIT  
(PL) OCULAR PLASTIC SURGERY  
(RE) RETINA / VITREOUS  
(RX) REFRACTION-CONTACT LENSES  
(NO) NEURO-OPHTHALMOLOGY  
(TU) TUMORS AND PATHOLOGY  
(ST) STRABISMUS  
(UV) UVEITIS  
(LS) LACRIMAL SYSTEM  
(LV) LOW VISION  
(CO) CORNEA / EXTERNAL DISEASE  
(GL) **GLAUCOMA**  
(RS) REFRACTIVE SURGERY  
(CA) CATARACT  
(US) OCULAR ULTRASOUND  
(TR) TRAUMA  
(LA) LABORATORY  
(BE) OCULAR BIOENGINEERING  
(EP) EPIDEMIOLOGY  
(EF) ELECTROPHYSIOLOGY

Deadline: 29/10/2007

FORMAT:  
Abstract should contain:  
**Title, Name of Authors, Name of other authors (maximum 6), Purpose, Methods, Results, Conclusions.**  
Example: ARVO (1.10 x 1.70)  
Abstract Book

1. FIRST (PRESENTING) AUTHOR (REQUIRED)  
Must be author listed first in body of abstract  
  
(X) R1 ( ) R2 ( ) R3  
( ) PG0 ( ) PG1 ( ) Estagiário ( ) Tecnólogo ( ) PIBIC  
  
Nakayama Simone Akiko  
\_\_\_\_\_  
Last Name First Middle  
  
\_\_Glaucoma 20070926190143  
Service (sector) Nº CEP

5. ABSTRACT (REQUIRED)  
**COMPARISON BETWEEN HUMPHREY VISUAL FIELD AND FDT MATRIX AFTER RADIAL KERATOTOMY**  
Nakayama, S.A.; Moreno, PAM, Teixeira, SH, Paranhos Jr A.  
  
Purpose: To assess whether there are differences in Humphrey Visual Field and Matrix frequency-doubling technology (FDT) after radial keratotomy.  
  
Methods: Eyes that undergone radial keratotomy were included in this study. Patients with glaucoma or optic nerve head with a glaucomatous pattern were excluded. Visual field (Humphrey 24-2 SITA stand ard) was performed in the first visit after a comprehensive ophthalmology examination. A second visual field (either Humphrey or Matrix frequency-doubling technology (FDT) were performed in the second visit and the other visual field exam in the third visit (second and third visual field exams order were randomized and with a interval of 1 to 10 days) . Mean defect (MD), pattern standard deviation (PSD) and mean threshold sensitivity of baseline were recorded. All the visual fields had to be reliable with Fixation Losses below 20%, False Negatives below 33%, and False Positives below 33%.  
  
Results: Preliminary results showed lower MD values for the FDT- Matrix exams comparing with the Humphrey tests. There is also a higher frequency of GHT alterations in the Humphrey exams.  
  
Conclusion: In the preliminary evaluation it seems that corneal alterations induced by RK might have a higher influence in the Humphrey perimetry than in FDT matrix perimetry.