

2009 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.

3. PRESENTATION PREFERENCE (REQUIRED) Check one:

- Paper
- Poster
- FAST Paper

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'



Scientific Section Descriptions (two-letter code):

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

Deadline: Oct 12, 2009

FORMAT:
Abstract should contain:

- Title**
- Author, Co-authors (maximum 6),**
- Purpose, Methods, Results,**
- Conclusion.**

Poster guidelines:
ARVO Abstract Book (1.10 x 1.70m)

74. FIRST (PRESENTING) AUTHOR (REQUIRED):

Must be the author listed first in abstract body.

- () R1 () R2 () R3 () PIBIC
- (X) PG0 () PG1 () Fellow () Technician

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5. ABSTRACT (REQUIRED):

Pachymetric Mapping with Fourier-Domain Optical Coherence Tomography

Camila H. R. Salaroli, MD, Jose L. Ramos, MD, Yan Li, PhD, Maolong Tang, PhD, Xinbo Zhang, PhD, David Huang, MD, PhD

Purpose: To evaluate the repeatability of Fourier-domain optical coherence tomography (FD-OCT) pachymetric mapping and compare OCT central corneal thickness (CCT) measurements with those of ultrasound pachymetry and Orbscan II.

Methods: An RTVue-CAM FD-OCT system was used to map the corneal thickness of 50 participants without corneal abnormalities. The scans were centered on either the corneal vertex or pupil. The repeatability of central and pericentral map sectors was assessed by pooled standard deviation (SD). The CCT measured by OCT was compared with those measured by ultrasound and Orbscan II by paired *t*-test, Pearson correlation, and Bland-Altman analysis.

Results: Pupil centration (SD: 1.3 µm central, 1.8-3.8 µm pericentral) provided better repeatability than vertex centration (1.7 µm central, 2.4-5.7 µm pericentral) in all sectors (*P*<0.035). The CCT measured by OCT, ultrasound, and Orbscan II (acoustic factor 0.92) was 536.9±27.0, 556.6±30.5, and 537.2±32.6 µm, respectively. The CCT measured by OCT was significantly thinner than ultrasound pachymetric readings (*P*=0.007, mean difference -19.7 µm, 95% limits of agreement -40.4 to 0.9 µm) but not those of Orbscan II (*P*=0.2637, mean difference -0.3 µm, 95% limits of agreement -24.0 to 23.5 µm). The OCT CCT correlated well with those of ultrasound and Orbscan II (Pearson *r* = 0.940 and 0.934, respectively).

Conclusion: Pachymetric mapping with FD-OCT was highly repeatable in normal corneas. The repeatability was better with pupil-centered scans than with corneal vertex-centered scans.

Keywords: Pachymetric mapping, central corneal thickness, optical coherence tomography.