

**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.  
RS

**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'

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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)

**75. FIRST (PRESENTING) AUTHOR (REQUIRED):**

Must be the author listed first in abstract body.

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

Last Name: Espirito Santo

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Middle: Cristina

Service (Sector): Refractive surgery (RS)

CEP Number: 1629/09

**5. ABSTRACT (REQUIRED):**

**Title: OPTICAL AND ANATOMICAL CONSEQUENCES IN CORNEAL HUMAN EPITHELIUM TO INCREASE OCULAR MEDICATIONS PENETRATION WITH HYPERTONIC SALINE**

Espirito Santo, LC; Hazarbassanov, RM; Pereira, CI; Oliveira, FC; Lima Filho, AAS; Schor, P.

Purpose: Verify if saline solution 5% before Cyclopentolate can modify corneal penetration of this drug, diminish the time to cycloplegia and midriase, without optical and anatomical clinically significant alteration in ocular surface. Methods: Comparative, randomized and double blind study. 15 patients between 18 to 40 years old, with myopia or compound myopic astigmatism with best visual acuity better than 0.3 logMAR (20/40) were submitted for this study. Anesthesia, NaCl 5% and Cyclopentolate 1% drops were administered in one eye in intervals of 3 minutes. On the other eye, were used anesthesia, balanced solution saline (BSS) and cyclopentolate 1% drops in intervals of 3 minutes. After 5 minutes the same procedure was repeated without anesthesia. It was performed slit lamp exam of the eye, subjective and automatic refraction, best corrected visual acuity, measurement of pupil and monocular accommodation, corneal topography (EyeSys and Pentacam), fluorescein staining and fluorescein break-up time before and 40 minutes. Results: in progress. Conclusion: in progress.

**Keywords:** Cyclopentolate, hypertonic saline solution, ocular penetration, cycloplegia