

ACROSS THE POND

Tidbits from what your international colleagues are reading in CRST Europe.

SURGICAL SENSE

A FASCINATING CONCEPT: SCLERAL CXL TO TREAT PROGRESSIVE MYOPIA





By Farhad Hafezi, MD, PhD, and Olivier Richoz, MD, PhD Scleral cross-linking is an intriguing idea that may someday become a therapeutic approach to arresting scleral elongation and progressive myopia. Proof of concept has been demonstrated in vivo and ex vivo. The settings and parameters for ultraviolet-A and riboflavin corneal collagen cross-linking cannot simply be transferred to the

sclera. It remains to be seen which cross-linking technique will prevail for the sclera: photoactivation of a chromophore, chemically induced cross-linking, or other approaches that have yet to be developed.

http://bit.ly/1Mm6bCV

SUTURE CUTBACK REDUCES SUTURE-INDUCED ASTIGMATISM

By Ramesh Dorairajan, DO, MS; Geetha Parasuram, MBBS, DO; and Varshini Ramesh, MBBS

The simple technique of suture cutback can reduce corneal compression and irregular astigmatism and preserve wound apposition, thereby promoting safe healing and earlier visual recovery. In the procedure, the surgeon divides the superficial corneal lamellae along the suture tract, creating a partial-thickness corneal groove into which the suture slips. http://bit.ly/10d4BEM

LASER TREATMENTS

WILL SURFACE ABLATION TECHNIQUES SURVIVE?



By Suphi Taneri, MD

Clinicians will no doubt continue to refine cutting-edge technologies and procedures for refractive surgery. No matter how successful these procedures become, however, it is likely that certain indications will always be inherently better addressed by surface ablation, the first-generation laser treatment. In the long term, with enhanced control of corneal pain perception and improved epithelial

healing, surface ablation may not only survive but thrive. http://bit.ly/1Mm6o9d

WHAT IS THE IDEAL FEMTOSECOND LASER FOR LASIK?



By Mark Wevill, MD, MBChB, FCS(SA), FRCS(Ed)

Although no single laser meets all the criteria outlined in this article, the currently available devices are all excellent tools. Even the most skilled ophthalmic surgeon's proficiency with blades and mechanical instruments has already been superseded by laser technology, which will continue to be improved.

http://bit.ly/1NYb0Ys