

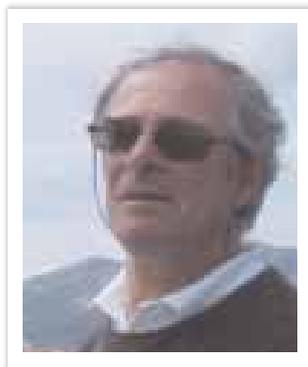
# Georges Baikoff, MD

Dr. Baikoff is Director and Professor of Eye Surgery at the Ophthalmology Center of the Monticelli Clinic, Marseilles, France.

## 1. How has ophthalmology progressed since you first started practicing?

I started practicing ophthalmology in 1971. Early in my medical career, I practiced anterior segment surgery and retinal surgery. In the 1980s, I shifted my practice solely to anterior segment surgery.

There have been so many fantastic advances in all ophthalmology fields since the 1970s; it is a new era. In addition to the improvements in the care of the posterior segment, anterior segment surgery has experienced some big advances as well. The development of refractive surgery is a fantastic story, and the introduction of the excimer laser drastically changed refractive surgery.



## 2. You are one of the pioneers of phakic IOL technology. How has the use of phakic IOLs changed during your 37 years of practice?

When I was a resident in 1973, I used pseudophakic IOLs for the first time. Although my boss was opposed to their use, I was intrigued by their potential. In the mid-1980s, I began developing a new phakic implant. I imagined an angle-supported implant to correct myopia similar to that designed by Charles D. Kelman, MD, of New York.

The use of phakic IOLs is still a niche in refractive surgery, in part because of the success of the excimer laser. Phakic IOLs have a place in ophthalmology because there are some indications that the laser cannot treat. When I started using phakic IOLs more than 20 years ago, laser ablation was not an option. It was the early times of “non-freeze” keratomileusis. Phakic IOLs were the better choice; however, the expense of phakic IOL research could not compare with the advance in laser surgery. In our earlier phakic IOL research, we had trouble with the lens material. Newer phakic IOL models provide patients with excellent visual results, such as quality bifocal vision.

## 3. How do you think phakic IOL technology will evolve over the next few years?

I hope that there will be improvements. Presently, I use different types of phakic IOLs—none of which is perfect. We remove approximately 3% to 5% of the Artisan (Ophtec BV, Groningen, The Netherlands) or posterior chamber phakic IOLs that we implant. I hope that, in the future, we can start manufacturing phakic IOLs made of different materials that will provide our patients with better results. However, I believe correcting presbyopia with phakic IOLs is a field of research that should be explored.

## 4. What is the most significant ophthalmic development you have invested in, and how has it changed the way you practice and treat patients?

The excimer and the femtosecond lasers have both changed my practice tremendously. Both lasers improved the quality of my practice and the quality of my research. I believe it would be advantageous for my colleagues to invest in femtosecond laser technology if they have not already.

## 5. You have had a long career in ophthalmology thus far. Do you plan on retiring soon?

I plan on practicing ophthalmology for approximately 10 more years. When I do retire, my primary goal is to sail with my family and friends on my boat, *Sweet Life*. I have been sailing for 45 years—since I was 15 years old. I started sailing with my family when I was a boy. I took a break for approximately 15 years to establish my private practice, but then I returned to the sport. I just love it. It is my favorite hobby.

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