



# ACROSS THE POND

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

## **SURGICAL SENSE**

### **CATARACT SURGERY AFTER RADIAL KERATOTOMY**

By Bernard Mathys, MD

When cataract surgery is performed on an eye with a history of radial keratotomy, the technique may be basically the same as for a virgin eye, but the IOL calculations will be fundamentally different. A practical recommendation is for surgeons to give every refractive surgery patient his or her preoperative refractive and keratometric data, along with the correction obtained from the refractive surgery, and to advise patients to keep these data for the future.

[bit.ly/mathys0216](http://bit.ly/mathys0216)

## **ACCELERATED CXL: PRESENT AND FUTURE**



By Cosimo Mazzotta, MD, PhD, and Soosan Jacob, MS, FRCS, DNB

Conventional and accelerated protocols for corneal collagen cross-linking (CXL) have demonstrated medium- to long-term improvement in visual acuity and topographic and aberrometric parameters. The results of CXL are often variable and unpredictable, however, due to the uneven biologic response of collagen to photodynamic reaction. The CXL treatment of the future will be customized. In addition, greater attention will be paid to obtaining a refractive effect through focal treatment enhanced to increase the flattening of the most ectatic areas while inducing a compensatory steepening of the flattest.

[bit.ly/mazzotta0216](http://bit.ly/mazzotta0216)

## **FUNDAMENTALS**

### **SPECIALTY LENSES FOR KERATOCONUS**

By Carina Koppen, MD, PhD

Corneal surgeons and contact lens specialists must work together to find the most effective and secure correction modality for patients with keratoconus. This article shares pearls every cataract and refractive surgeon should know for developing a comprehensive keratoconus treatment plan.

[bit.ly/amon0216](http://bit.ly/amon0216)

## **PEDIATRIC OPHTHALMOLOGY**

### **IOLs IN PEDIATRICS: IS THERE A VERDICT?**



By Michael Amon, MD

Cataract surgery procedures, considerations, and risks differ in children and adults. Although there is general agreement on the timing of surgery, the decision whether or not to implant an IOL in a child is still a subject of discussion.

[bit.ly/koppen0216](http://bit.ly/koppen0216) ■