

The First Step to Educating Patients Is

UNDERSTANDING THE TECHNOLOGY



BY KAROLINNE MAIA ROCHA, MD, PhD

Refractive IOL options are expanding rapidly. We now have access to myriad IOL designs that can correct presbyopia and astigmatism independently or together. Patient expectations are on a parallel trajectory. Most patients we see today demand spectacle independence, at least for most tasks. New presbyopia-correcting lens designs can help us make their expectations a reality.

Before we can meet patient demands, however, we must understand how the available IOL technologies work and identify their pros and cons. This exercise will help us to offer new IOL technologies confidently to patients.

Guiding patients through IOL selection requires using language that they can understand easily. It also requires sharing only the information that is most pertinent to their daily

lives, listening to patients, and asking them the right questions to determine their unique visual requirements. This process can guard against patient dissatisfaction after surgery.

The articles featured in this issue explore the latest presbyopia-correcting IOL technologies and provide information about their design concepts, advantages, and disadvantages. The contributors to this series share how they use new presbyopia-correcting IOLs in their practices, and some even share which IOL they would choose for themselves if they needed cataract surgery today.

Having so many IOLs at our fingertips presents many advantages, but we would be remiss not to mention the potential pitfalls, including patient selection, inventory management and spatial constraints, and unhappy patients in the postoperative period.

These issues are all addressed by our contributors.

It's easy to get overwhelmed by the availability of so many options. We hope that this series can be a guiding light to educating yourself and your patients on new refractive IOL technologies and to deciding which IOL could bring the greatest benefit to each patient. ■

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