Abstract:
BACKGROUNDB: Laser epithelial keratomileusis (LASEK) is a new keratorefractive procedure for the correction of myopia and myopic astigmatism, which may combine advantages and eliminate disadvantages of photorefractive keratectomy (e.g. pain, corneal haze) and laser in situ keratomileusis (e.g. flap and interface complications, dry eye, keratectasia). We present the results of 108 consecutively LASEK-treated eyes with a follow-up period of 12 months. PATIENTS AND METHODS: LASEK was performed on 108 consecutive eyes with myopia or myopic astigmatism using a keracor 117 excimer laser. The mean preoperative refraction was -4.12 +/- 1.30 diopters (D) spherical equivalent range: -1.75 to -6.0 D and maximal cylinder was 3.25 D. Results of the 12 months visit are available for 101 eyes (93.5%). RESULTS: No serious complications were observed. After 12 months, SE was within +/-1.0 D of emmetropia in 96% and within +/-0.5 D in 86% of the eyes; 6 eyes had to be retreated. None of the eyes showed haze worse than grade 1 or lost more than one line of best-corrected visual acuity. Uncorrected visual acuity (UCVA) was > or =20/20 in 80% and > or =20/40 in 98%. CONCLUSIONS: Laser epithelial keratomileusis (LASEK) seems to be safe and effective in treatment of myopia and myopic astigmatism of up to -6.0 D. Preliminary results compare
favourably with those after photorefractive keratectomy and laser in situ keratomileusis. Haze formation after LASEK seems to be low. Coverage of the stromal wound with a vital epithelial flap could positively influence postoperative wound healing reactions.

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