

News -- Week of June 1, 2008

## **The flap over LASIK: Is this the right procedure for you?**

by a Staff Writer

Over the past decade, more than 10,000 people on the Treasure Coast have had some form of laser vision correction. The vast majority wound up with better vision and are happy.

But a small fraction of people who have LASIK surgery – a procedure made popular by large volume laser centers that lure patients with ad campaigns promising miracle results at bargain prices – end up unhappy.

Recently, an FDA Advisory Panel heard testimony from a group of LASIK patients complaining of side-effects ranging from painful dry eye to difficulty driving at night.

In an effort to better understand the pros and cons of LASIK and other forms of laser eye surgery, we interviewed Dr. David J. O'Brien, a surgeon at the New Vision Eye Center in Vero Beach, who a decade ago was one of the researchers in the LASIK clinical trials.

What is the difference between LASIK and the procedure called photorefractive keratectomy (PRK)?

We did our first PRKs, where you use a laser to precisely remove tiny layers of tissue from the surface of the cornea, in 1996. And what doctors were trying to do with LASIK – which we began doing a year later -- was shorten recovery time and decrease discomfort.

During LASIK, we make a thin flap in the top layer of the cornea and perform the laser correction underneath. We then replace the flap and the recovery time is very fast. With a surface treatment like PRK, patients liked the results long term, but back in the 1990s we didn't have great control of their discomfort. There was a slow healing process.

So there was a great push for LASIK to shorten their recovery time. My first 50 eyes were part of the FDA clinical trials of LASIK, and the patients were uniformly happy.

What is the problem with LASIK?

What we really didn't predict in the mid-90s was that when we make the LASIK flap, we temporarily damage corneal nerves and therefore the surface of the eye becomes numb, and there's no reflex back to the brain to say, "The surface of the eye is dry. Please make more tears."

The corneal nerves regenerate over 6 months to a year and most patients have a decrease in dry eye symptoms concurrently. And so there are some patients whose dry eye was exacerbated with LASIK – myself included.

I had LASIK done 9 years ago, and I have done very well. But I had preexisting dry eye, and I think that back then, frankly, we were not as aware as we are now of the effect of LASIK on dry eye patients. We have had advances in treatment for dry eye since my surgery and I now use Restasis drops and Omega 3 supplements with full relief.

So LASIK may not be for everyone?

Correct. The results on ideal candidates for LASIK, patients under 40 years old with stable vision, low correction, no dryness at all, are spectacular. They see very well the next day. It's common to see 20/20. And we love doing LASIK on people under 40.

But for people over 40, we now do almost exclusively advanced surface treatment (PRK). The majority of patients who come to me are seeking LASIK because it is a buzz word, but in my practice, probably 90 percent wind up deciding to go with advanced surface treatment (PRK).

We call it advanced surface treatment because the medications for discomfort have gotten better, and we use a bandage contact lens on the eye to decrease discomfort.

Although the down time is slightly increased with surface treatment versus LASIK, we don't see dry eye issues, and therefore, we see a better refractive result. In other words, better vision -- and we don't see those night vision problems, to any significant degree with custom, wavefront guided treatments commonly employed today.

Are there others beyond people with dry eye who are not candidates for LASIK?

In an aging population, you see some cataracts. For patients who have cataracts, there are lens implants available now to correct distance, intermediate and near vision, so we suggest they go right into cataract surgery. That happens daily here.

People who have fluctuating vision due to abnormality in the cornea, normally a thinning problem, are not good candidates. Patients who have severe uncontrolled diabetes are generally poor healers. People on steroids long term are poor healers also. Those are people more at risk for infection.

What is your view of this FDA review of LASIK?

I think what has the FDA doing sort of a 10 year review of this technology can largely be attributed to two fundamental problems. Number one, some of these patients probably were not great candidates for LASIK to begin with, and number two, their doctors probably did not communicate with them well before or afterwards. These people are unhappy, and they were kind of left there to struggle.

The nice thing about Vero Beach is I see my patients in church, I see them at school, I see them all the time. I do the post-op care myself. And I certainly don't mind it if somebody grabs me and says, "My eyes are dry. What do I do?" But people in big cities don't have that luxury.

What should a person considering laser eye surgery look for?

I think it is important to do some homework. Does the doctor specialize in this treatment? Does he or she do lots of them? Talk to patients. If you ask around quite a bit, you'll find them.

Ask your optometrist or family doctor: Where would you go to have this done? They'll give you a real good idea, and they might give you an idea of whom not go to. And ask the surgeon: How frequently do you tell people they are not a good candidate for LASIK?

How many laser eye surgeries have you performed?

I would say in the neighborhood of 9,000 procedures over the past 13 years. Depending on time of year, we might do (delete anyway) from 10 to 30 in a week.

There are an awful lot of people between 19 and 70 years old out there who are very healthy, busy, and active. They play golf several times a week, go out to dinner and drive at night to Riverside Theatre, participate in water sports, and they don't want to wear glasses or contacts doing these activities. We're definitely on board with helping them achieve that goal.