

Patient Guides Series

When you are considering laser eye surgery, this series of informative guides will help in making the best decision for you and your eyes. Please call us on 0845 3300010 or visit www.horizoneyecentres.com For more information or to request other Patient Guides in this series, please visit our website, click on Patient Guides on the home page

Patient Guides #4: Frequently Asked Questions about Laser Eye Treatment?

Before the Treatment:

Who can have laser eye vision correction?

You should have a stable prescription that hasn't changed by more than 0.5 dioptres in the past 12 months. You will be at least 18 and normally over 21 years of age. Most candidates will have prescriptions between +5DS and -10DS; patients with mild or moderate prescriptions have generally better results than those with high refractive errors. You should not have any medical condition or be taking any medication that will affect healing. You mustn't be pregnant or nursing. Your eyes must be healthy and have no active problems. Your corneas must be thick enough to safely remove sufficient tissue to correct your refraction, and your pupils shouldn't be too large in the dark. Very importantly, your expectations of what laser vision correction can do must be realistic.

Who shouldn't have this kind of surgery?

Anyone who doesn't meet the requirement listed above. Additionally, those people seeking perfection or who need zero risk are not suitable for laser correction. While the results are generally excellent, they cannot be guaranteed. You should aim for a great reduction in your prescription rather than insisting on zero prescription. If you want to have good useful vision for most or all activities (distance vision) and accept that a very small prescription may remain, you will be more likely to be happy with the outcome.

What if I participate in contact sports?

Anyone doing contact sports, or sports where there is the possibility of trauma, is at risk of injuring their eyes, and damaging the corneal flap that is made as part of the LASIK procedure. Advanced surface laser may be a better option, as trauma to these eyes doesn't really have any increased risk over an unoperated eye. This is because surface laser does not involve having a flap made in the cornea. If you do have LASIK, some patients may elect to continue performing the sport but wear eye protection (e.g. playing squash) or discontinue that particular sport. Others may continue but may need to sign an additional consent form to show that this issue has been discussed and that they understand the risks involved.

How much should I pay?

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What you pay for your surgery will vary according to which surgeon you choose, the region, and the facility where you have the surgery. You should avoid Deep Discounters (see our free downloads, Finding the Right Surgeon). An unfortunate effect of the aggressive marketing of LASIK has led to a perception in the public's mind that it is a commodity, a white box, which is identical no matter where it comes from. This may be true in the case of, for example, a new Jaguar car. If you can buy a new Jaguar from a dealer at \$5000 less than the usual price, you have got a good deal, assuming all else is equal (extras, servicing, warranty etc.). However, this is not true with surgery, where the "product" quality can show great variation. Should one of your loved ones require heart surgery, do you ask "OK, heart surgery, now who is the cheapest?!" Of course, this would be foolish, and patients need to know that the same thing applies to eye surgery.

Do you believe that you get what you pay for? Just about everyone would agree with this statement and its intuitive truth. This is not a time to get a bargain basement price. You want a quality service where you will have all the time you need, and the full attention and service you deserve. As with any other area, if you want the premium service expect to pay the premium price. It is no surprise that the best surgeons charge higher fees, and their patients know why.

Currently in the UK you should expect to pay, with a quality surgeon, between £1200 and £1600 per eye for LASIK, LASEK or other laser vision correction procedure, including follow-up.

Which surgeon should I choose?

This is the most important decision you will make, once you have decided that you want to have laser vision correction. (Also, see below "Who will do my consultation?")

Absolutely, you should see and consult with your individual surgeon before the day of the operation. You should also make certain that your surgeon, or equally qualified partner, is local and available to you on any day of the week. This is in the unlikely event of either having a complication or simply to answer any questions you may have about your progress after surgery and provide a familiar and expert ear (and eye!) should you need it. Do NOT accept a visiting surgeon who flies in for the day, and then leaves, no matter how good he or she claims to be! You have the right to easy access to the person who operated upon you. Further, some of the most unfortunate patients are those who elected to have their surgery done in one of the "Deep Discount" surgery chains, which later went out of business. There are many patients in the US and Canada in this position, now looking around for someone to take over the care of their eyes. A surgeon who owns his own practice is likely to be committed to you and to building a strong reputation in the local area, and will still be around when you need them.

Who will do my consultation?

You should insist that you see the doctor who will be doing your surgery, prior to the day of treatment. While this sounds obvious, some of the high volume operations in various countries, including the UK, have patients meeting the surgeon only immediately before the operation. Be sure to meet your surgeon before the scheduled day of laser vision correction, and that you have sufficient time to ask all the questions you wish.

Your eyes are incredibly precious, so be certain of who will be operating on them. Ascertain that you have the confidence that your doctor will be able to give you an excellent result, and deal with any complications in the unlikely event that they do occur.

Which procedure is best for me: LASIK or LASEK?

A number of factors can affect your choice of procedure, both concerning your eyes and prescription, as well as personal circumstances and lifestyle. Your surgeon will discuss these fully with you and help and advise on which is best. You should make sure that your doctor is fully experienced in both procedures and will offer the best for you, not for him or her (remember the

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three important factors in deciding where to go for your eye laser correction - surgeon; surgeon; surgeon - see our downloads for more information on how to choose your surgeon). See our free download on which procedure is right for you

Can the doctor guarantee 20/20 vision?

Your result will depend on your prescription, eyes and healing response. It isn't possible to guarantee 20/20 vision although modern techniques are producing extremely good outcomes. It is best to think of laser vision correction as reducing your prescription and dependence on glasses, rather than completely eliminating it. You will still typically have a small residual prescription, with which you can manage most or all distance activities without needing lenses.

On the Treatment Day:

Will it hurt?

This is quite understandably the most common question I get asked at consultation, and sometimes again on the day of surgery! Be reassured that the operation itself is painless because of the use of anaesthetic drops. You may feel the presence of the eyelid holder keeping the lids apart, and a sensation of pressure while the flap is made on the corneal surface, lasting about 30 seconds.

After the procedure, the eye often feels gritty and may water, for about 4 to 6 hours. It is best to keep the eyes closed during this time, and many patients prefer to sleep for 2-3 hours, which is ideal.

How long does the operation last?

This is the second most common question, after the one above. The surgery only takes about 10 minutes for each eye, with the application of the laser usually lasting 30-45 seconds, depending on your correction. You can expect to spend 2 or 3 hours in total at the medical centre, which includes pre-operative checks and preparation, the actual surgery, and a short wait before your doctor will look at the eyes to make sure all is in place. You will need to have someone with you, who can help you return home safely.

What if I am very nervous?

Everyone feels some nerves on the day of treatment, and this is quite normal. Your doctor can prescribe a mild sedative, such as Valium, 30-60 minutes beforehand to help you relax. Many patients manage just fine without. Please only take what your doctor prescribes for you pre-operatively.

Should I have both eyes done on the same day?

For some patients having LASEK with higher prescriptions, the only choice will be to have separate day treatments. If your doctor says that you are suitable to have both eyes done together, you will have to decide which you prefer. There are advantages and disadvantages to each approach.

Most patients having LASIK opt for bilateral (both eyes) treatment. They would rather complete the process and get on with their lives. The quality of vision even by the next day is usually very good, and you can expect to be back to work in a couple of days. LASEK takes several days for the vision to improve and having both eyes done usually means allowing a full week off work.

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If you can tolerate a contact lens comfortably for most of the day, you might have one eye corrected and use a lens in the untreated eye until the second is done. Having separate treatments is certainly not as convenient but is safer. If you want the absolute minimum risk, you can make sure that the first eye has gone well and fully healed before the second procedure. This also allows your doctor to assess your individual healing response which can be taken into account for your other eye.

Having both eyes done together means that the healing of both takes place at the same time, so you don't have to go through the whole thing twice. Also, you won't have a period of imbalance before the second eye is done. If you have more than a mild prescription, you may find this imbalance too great for comfortable vision - contact lenses can help here.

After the Treatment:

How soon will I see clearly after the operation?

With LASIK, you can expect to see well within 1 to 3 days after surgery, although this can vary a little according to your individual healing response. Some people are back at work the next day; others need a day or two for the eyes to feel comfortable. The vision will improve more during the first week, and more slowly for several more weeks. Long sighted patients take longer to settle, often needing 7 to 10 days for the distance vision to become clear, and may not be at the driving vision standard until it does. If they normally wear need reading glasses, they usually enjoy having near objects in focus during this time.

LASEK patients take longer to settle down, often up to week before having clear vision. Unless the prescription is under -4 or -5DS, many surgeons will do one eye at a time, perhaps 2 months apart. Current early research suggests that the final vision result is the same for both procedures, and may even be possibly better with LASEK. We look forward to studies to more definitely answer this question.

Will an eye patch be necessary after the treatment?

No, although you may have a contact lens placed in your eye for one or more days. Bring some sunglasses with you on the treatment day.

How soon can I go back to work?

LASIK patients may be able to go back to work by the following day, although two days later gives the eyes chance to rest and heal. If you work in a dirty or dusty environment you should keep away for 3-4 days. Modern LASEK and PRK patients are often fairly comfortable and can be back at work within a couple of days. Your vision might not be clear up however until the contact lenses have been removed on day 3 or 4. Some patients will also experience some pain so you should make sure you don't have any critical tasks at work during that week, just in case you want to rest.

If I don't get 20/20 vision, can I have laser treatment again?

If your vision isn't 20/20 after the procedure (and it was before) the most likely cause is some residual long or short-sightedness. Most people can have an enhancement ("re-do" or "touch-up") to improve the vision and may then see 20/20. On average, 1 in 20-30 people need an enhancement and this is more common with higher prescriptions. You might find that if you are

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left a touch long- or shortsighted, your vision can be perfectly adequate and no enhancement is necessary (this will also depend on your age somewhat).

Will I ever need glasses again? How long does the treatment last?

It seems that laser vision correction will last for your lifetime, based on what we have seen so far. Several million laser treatments have been performed since 1988, and we have seen no evidence after 15 years that the effect wears off or can upset the long term health of your eyes. Some patients though will get a partial regression of effect during the first year. As far as your cornea is concerned, particularly for shortsight, we believe your distance vision will be permanently fixed and you will not need to wear distance glasses again.

You must also realise that have corneal laser correction will not influence the normal age related changes that happen to everyone. It can't give you some magic protection against other diseases! If your eyes are destined to get cataracts or glaucoma, for example, that is still going to happen. They can still be treated in the usual way with drops or surgery. LVC will not interfere with this (note: if you are having surgery or treatment for glaucoma, please tell your ophthalmologist that you have had laser correction - your treatment may be modified slightly to the correct degree).

What are common side effects from laser vision correction?

You can expect your eyes to feel a little dry afterwards, and this may take a few weeks or months to settle. Some patients will use artificial tear drops during this time, while many need none at all. You may well notice some halos and glare during the first few weeks, which quickly settle in the vast majority of cases. The most common side effect is under correction or overcorrection, which sometimes needs a second enhancement procedure.

[Click here for more information on complications of laser vision correction](#)

Will I still need reading glasses?

Laser eye surgery is, at present, only for the correction of our distance vision. This is anything over 2 metres, e.g. social vision, seeing people across a room, watching television or a movie, or seeing the car in front of you. When we are younger than 40, we can focus on close objects easily (e.g. using a computer or reading a book) through the action of the ciliary muscle on the lens inside our eyes. Once we need reading glasses in our 40s we have what is called presbyopia (literally "old eyes"); this will still be the case after our distance vision is clear after laser correction.

Fortunately, conductive keratoplasty can be used after LASEK, PRK or LASIK to provide reading vision.

What is monovision?

Monovision was first applied to contact lens wearers who needed reading glasses after the age of 40. We all lose the ability to focus as we move into middle age, caused by the hardening of the lens inside our eyes. We call this presbyopia. When we become presbyopic, we have to wear reading glasses. For example, we might be able to see our dinner companion across the table, but need to put on our glasses to see the menu.

One way around this is to have one contact lens underpowered and be left a little shortsighted in that eye. This means that distance vision is a little blurred but objects close to are in clear focus. The other eye is fully corrected and has sharp distance vision. With both eyes open, this allows you to see in the distance and up close. Perfect! The disadvantage is that some people don't adjust to having one eye blurred and not balanced with the other.

An effect similar to but distinct from monovision, called blended vision, is produced by the CK radio wave treatment. CK is suitable for those who just wear reading glasses, or those who also

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have mild longsight needing bifocals or varifocal lenses. CK produces a multifocal effect, and so the treated eye has a very good depth of field. Many presbyopic eyes in those aged 45+ treated with CK can see 20/20 in the distance, AND have excellent reading power. Although one eye is focused for distance and the other for near, the greater depth of field compared to monovision means both eyes are used together over all distances.

This guide is an extract from Dr. David Allamby's new book, written for anyone considering laser eye surgery, and available March 2006

Call us now on 0845 3300010 to find out more, and to book your consultation