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Epi-LASIK enhancement corrects residual myopia

Epithelial flaps can be created after primary PRK, LASEK or epi-LASIK with minimal resistance between the stroma and Bowman's membrane.

Jared Schultz

LISBON – Enhancements after flap creation with an epikeratome appear to be safe and effective for the correction of residual myopia after primary surface ablation, according to one ophthalmologist.

Christoph Winkler von Mohrenfels, MD, of the Technical University in Munich, presented early clinical results with the enhancement procedure to attendees of the European Society of Cataract and Refractive Surgeons meeting here. He said not only is the procedure effective, but repeated epithelial flap creation is possible without technical modifications to the epikeratome. In the study, Dr. von Mohrenfels performed epi-LASIK enhancements on 20 eyes with residual refractive error after primary PRK, LASEK or epi-LASIK.

“The re-surgery is an effective procedure. We can make epithelial flaps, had no problems with any buttonholes or incomplete flaps; therefore, it is very safe,” he said.

According to Dr. von Mohrenfels, there is minimal resistance between the basal membrane and Bowman's membrane during a primary epi-LASIK procedure. However, after ablation, the epithelium is more adherent to the stroma. This raised the question of whether enhancement with epi-LASIK was possible in these cases.

Dr. von Mohrenfels performed epi-LASIK enhancements using the EpiLift System from Gebauer in 12 eyes with previous LASEK, seven with previous epi-LASIK and one with PRK.

Ablation was performed with the Carl Zeiss Meditec MEL 80, and follow-up was a minimum of 6 months after the second epi-LASIK treatment.

According to Dr. von Mohrenfels, the epithelial separation was smooth in all eyes, with no defects or buttonholes and no incomplete flaps.

At the 6-month follow-up, 19 of 20 eyes were within -0.5 D of the intended refraction, and no eyes lost more than one line of visual acuity.

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