



ASCRS
BUSINESS *of* REFRACTIVE
CATARACT SURGERY
— SUMMIT —

When the Primary Surgery Doesn't Go As Expected
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Financial Disclosures

- ACE Vision – A, C
- Alchemy Vision- C
- Alcon- A, C, R
- Allergan/Abbvie- C, S
- Bausch & Lomb – C, S
- Bruder - C
- Epion – R, C
- Eyesafe- A, O
- Eyenovia- C
- Glaukos- O, C
- iOR Partners - C
- Johnson & Johnson- C
- Lensar - C, R
- Lenstec- C
- NovaBay - A
- Oculotix – A, C, O
- Ocuphire - C
- Radius XR- A, C, O
- Santen – S
- STAAR- C
- Tarsus- C
- Trefoil Therapeutics - C
- Trukera – C
- Vialase - C
- Visus Therapeutics- C

A = advisor

C = consultant

S = speaker's bureau

R = research

O = stock owner/options

What could go wrong?

Plan A: You plan a toric and/or presbyopia-correcting IOL

....But the posterior capsule ruptures

Plan B: ???

What would you do?

How would you counsel the patient?

- Refractive miss – offer enhancement (how much do you charge?)
 - residual myopia vs hyperopia vs astigmatism
- OSD symptoms – treat aggressively
 - “If you diagnose it before surgery, it’s the patient’s fault. If you diagnose it after surgery, it’s the surgeon’s fault.”
- Visual disturbances - neuroadaptation
- “Blurry vision” – identify cause
 - Top causes
 1. Refractive error
 2. Dry eye/OSD
 3. Visual disturbances
 4. Floaters/vitreous opacities
 5. Temporal shadow/negative dysphotopsia

When do you offer the patient a refund?

Case 1: The unhappy nurse

57 yo female nurse with h/o monovision CL wear presents for POM#1 visit s/p uncomplicated bilateral cataract surgery with diffractive EDOF IOLs (mini-mono)

“I WANT THESE LENSES OUT!!!”



Case 1: Exam

UDVA

OD 20/70

OS 20/25

J1

What else do you want to know?

MRx

OD -0.75 (as targeted)

OS -0.25

SLE: Diffractive EDOF IOLs well-centered OU, trace PCO OU



Case 1: What I did

- Exchanged diffractive EDOF in dominant eye for monofocal plus IOL
 - POM#1 patient has much better quality DVA and is able to start driving again to early morning and late night shifts
 - Still wants the other eye IOL out!
- As of Tuesday, I exchanged the diffractive EDOF in non-dominant eye for LAL+
 - Wait and see!

Case 2:

- 55 yo woman presents unexpected at POW#2 s/p uncomplicated bilateral cataract surgery with mix-match non-diffractive EDOF/trifocal IOL

“I CAN’T SEE ANYTHING!!!”



Case 2: Exam

UDVA

OD 20/50 (EDOF)

OS 20/40 (Trifocal)

J2

What would you do?

MRx

OD -0.75-0.50 x 93 (target was plano)

OS plano

SLE: IOLs well-centered OU, trace-1+ PCO OU

Case 2: Pending

Trialed -1.00 CL OD and felt haloes/glare improved, but still unhappy with vision quality

Plan for IOLX with LAL dominant (EDOF) right eye first