



Femtosecond Laser Cataract Surgery and the Glaucoma Patient

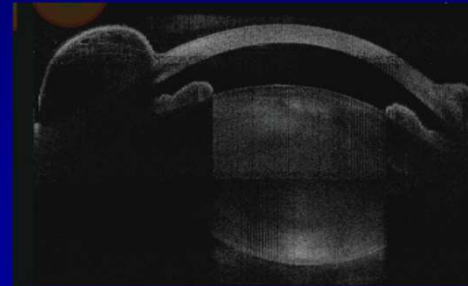
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Advantages of Femtosecond Laser Cataract Surgery

Complicated Eyes

- ◆ Shallow anterior chambers
- ◆ Dense nuclear cataracts
- ◆ Weak zonules
- ◆ Fuchs' corneal dystrophy
- ◆ Glaucoma patients
- ◆ Astigmatism management



Cataract Surgery and the Glaucoma Patient

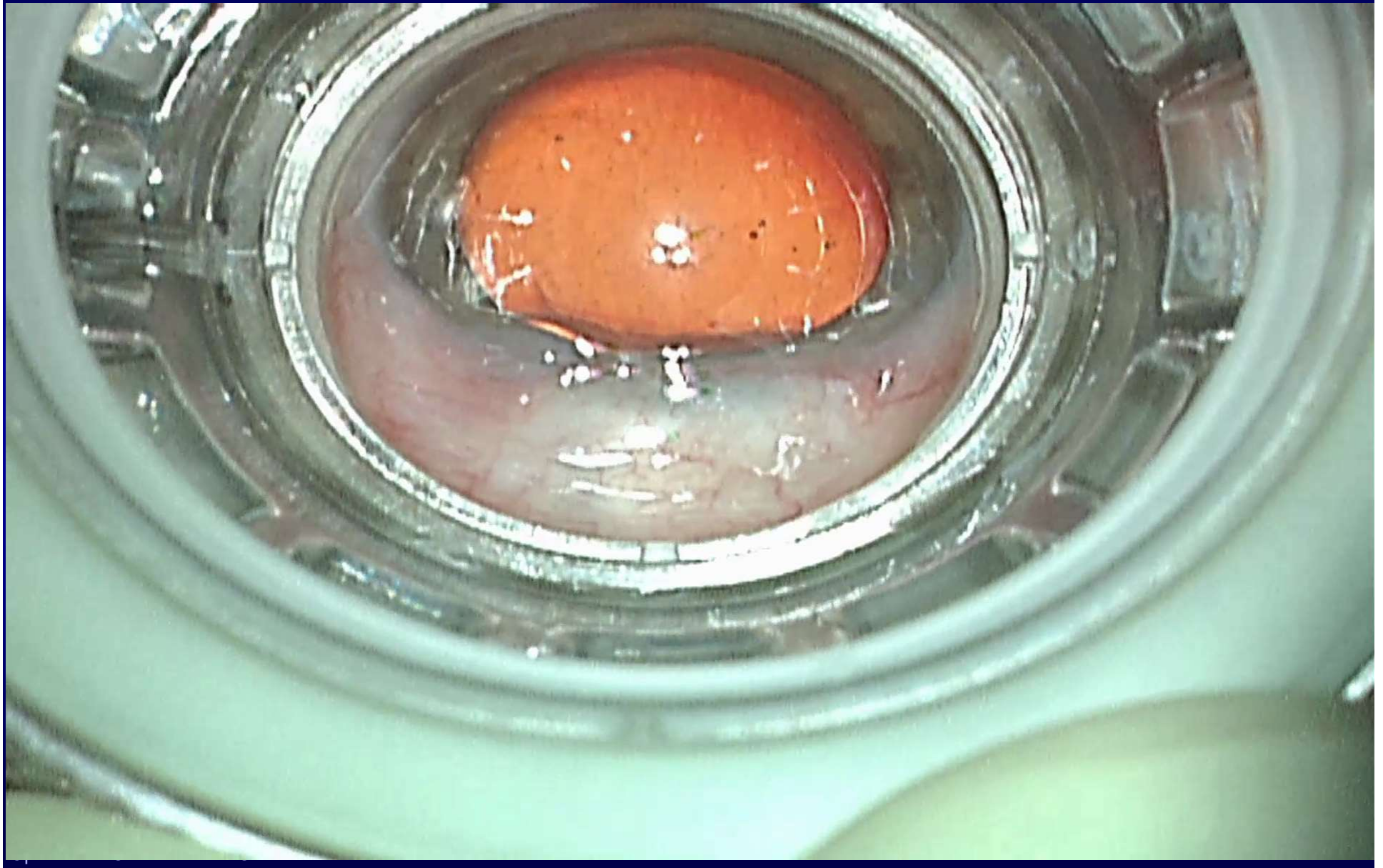
- ◆ More difficult than conventional cataract surgery in many cases
 - Small pupils
 - Shallow anterior chambers
 - Hyperopes
 - Mature lenses
 - Pseudoexfoliation-loss of zonules
 - Previous surgery
 - Low endothelial cell counts
 - High astigmatism

Laser assisted surgery in patients with prior glaucoma procedures

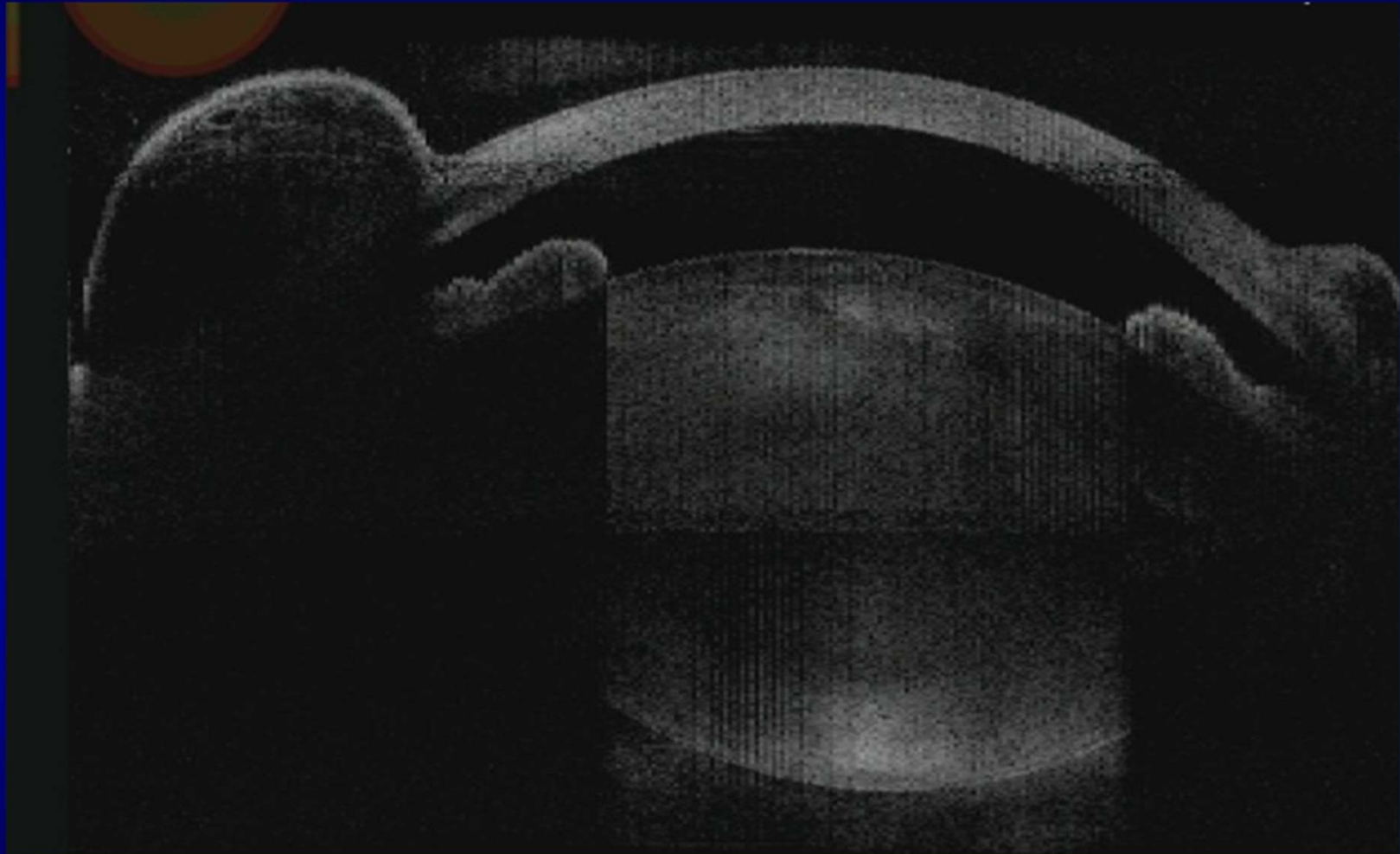
Femtosecond Laser Cataract Surgery and Filtering Blebs



Filtering Bleb



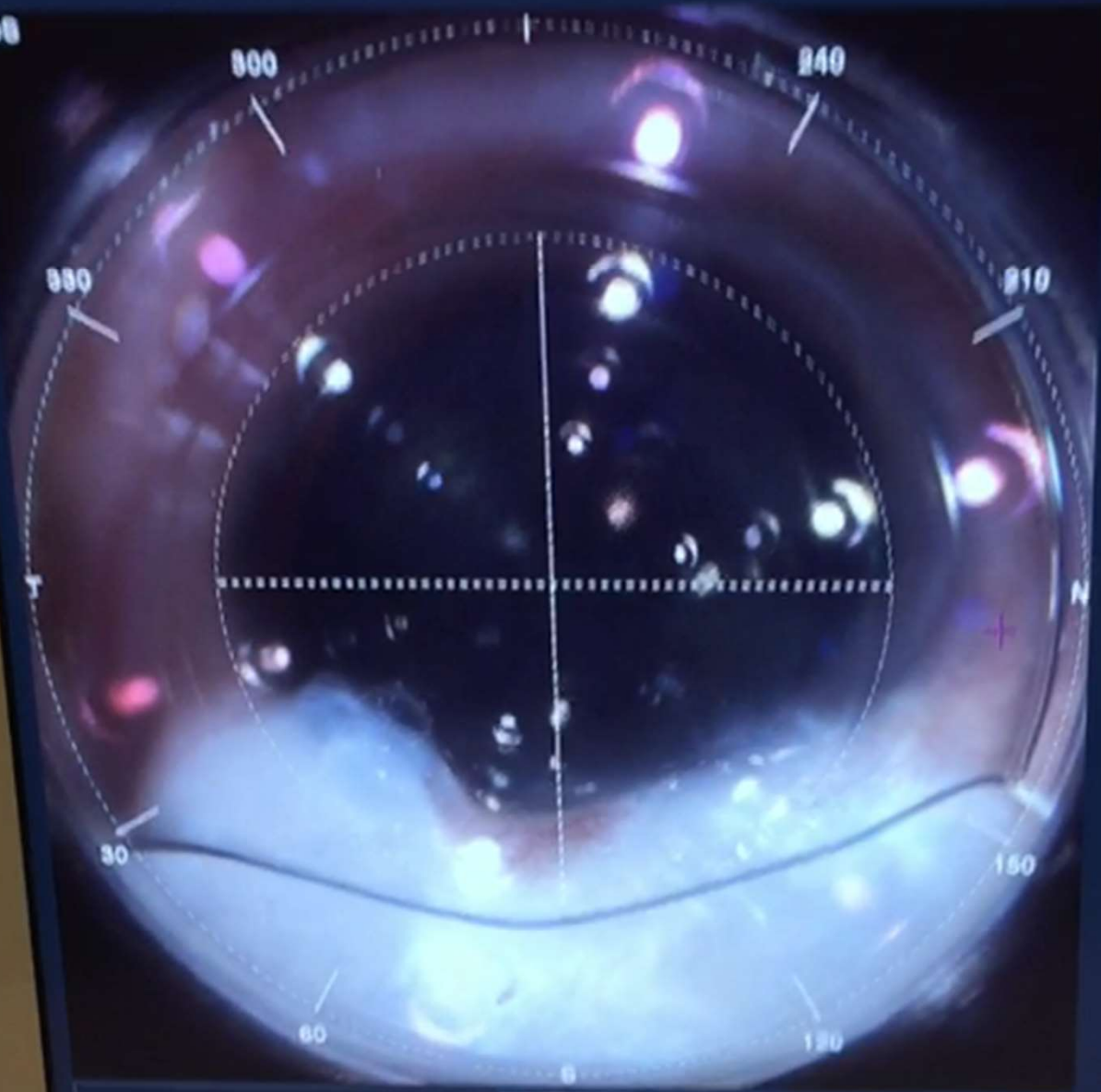
Filtering Bleb-OCT



Methods

- Design: Retrospective case series of 24 consecutive patients that underwent FLACS
- Pre- and post-operative information regarding visual acuity, refractive error, astigmatism, demographic information, bleb morphology, intraocular pressure (IOP), and complications were recorded

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GAMMA **LIVE OCT**

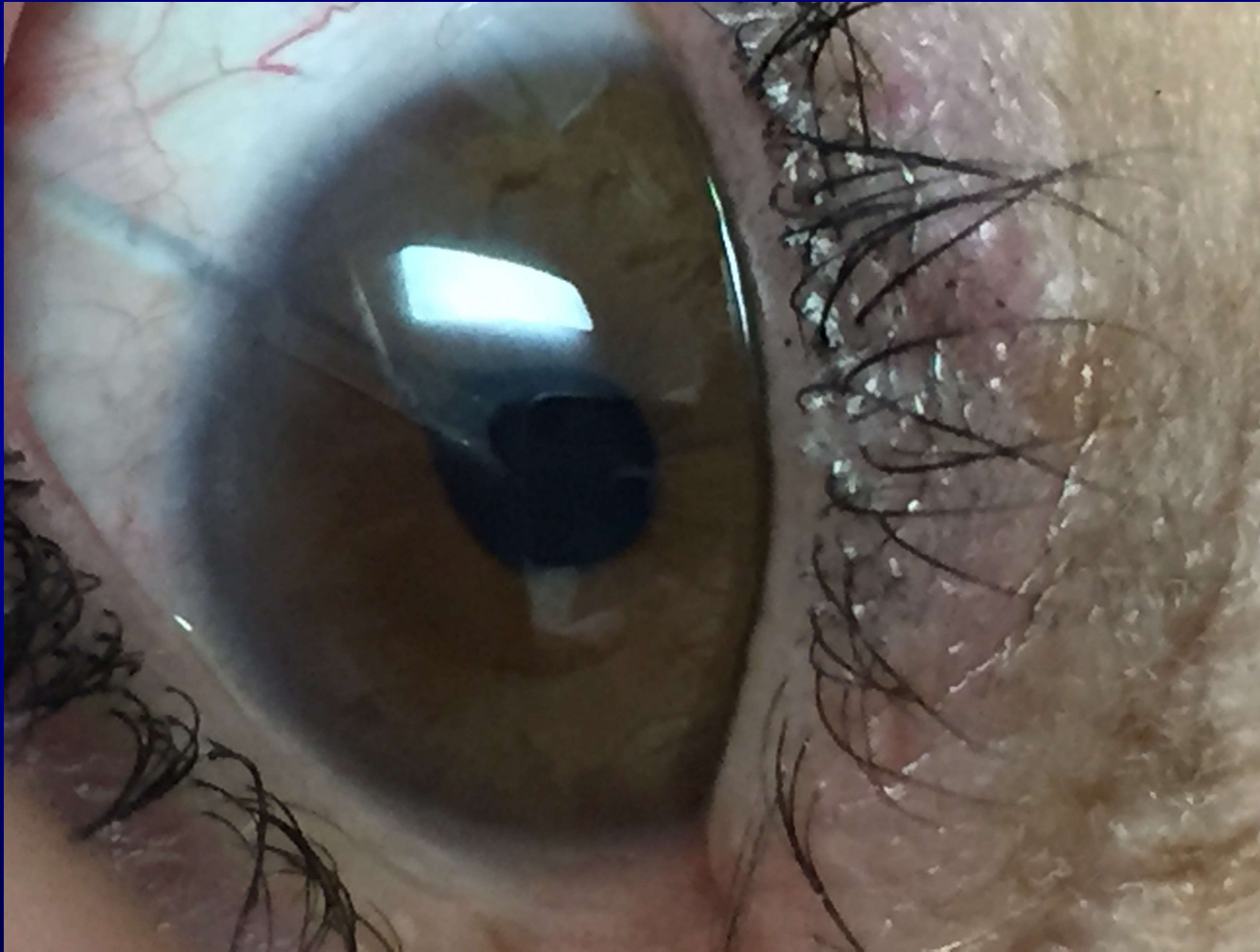
Results

- Femtosecond laser portion of the surgery was successfully completed in all 24 cases.
- Mean pre- and post-operative visual acuity was 20/60 and 20/25 respectively.
- Mean pre and post-operative IOP was 14.3 mm Hg and 15.5 mm Hg respectively.
- There were no cases of intraoperative or post-operative bleb leak

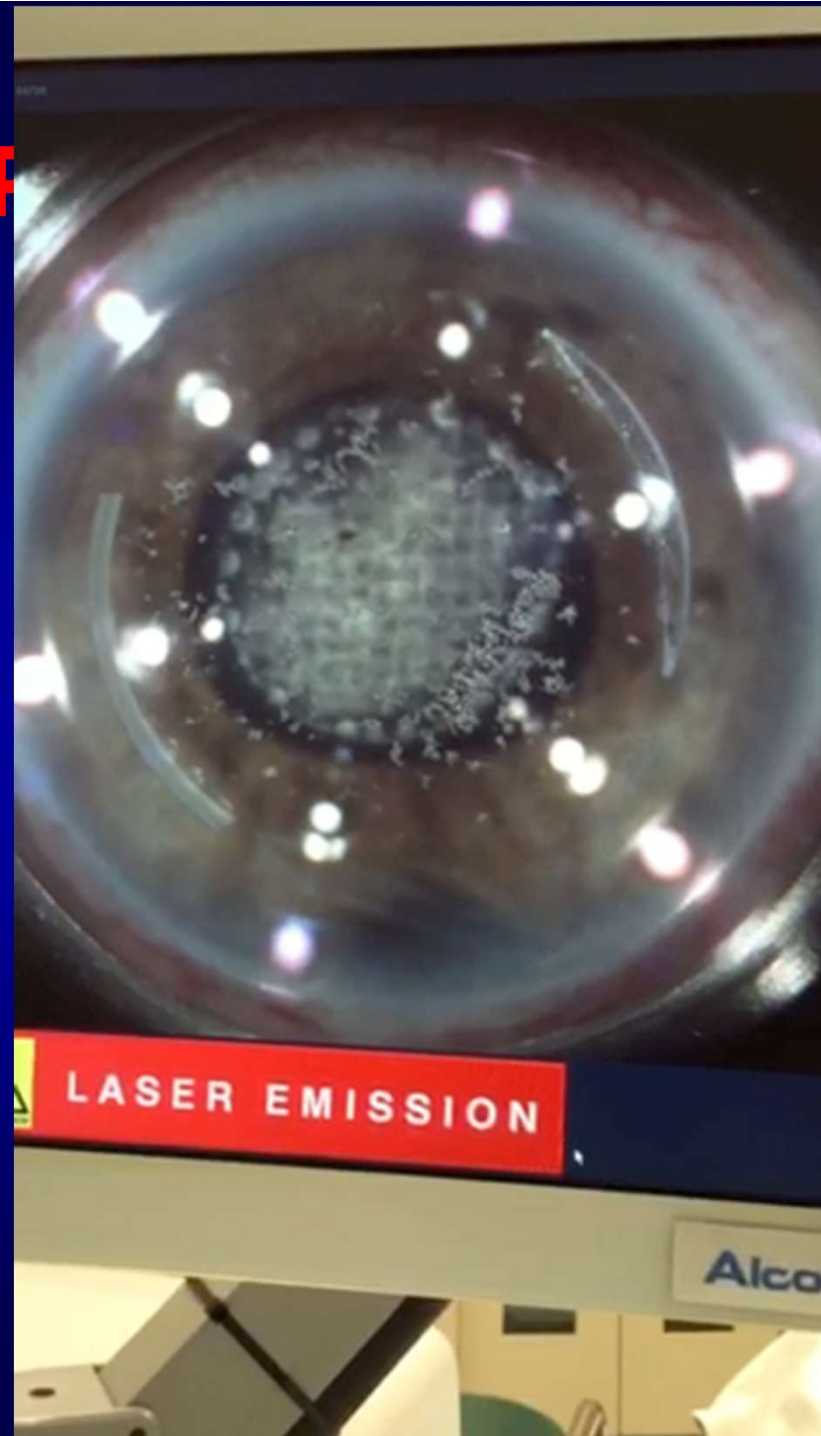
Results

- Two eyes required bleb needling post-operatively.
- There were no cases of long-term post-operative bleb failure.
- The most common post-operative complication was subconjunctival hemorrhage, occurring in 50% (12/24) of patients.
- There was no apparent glaucomatous progression in any patient following the procedure.

Pre-existing Tube



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Femtosecond Laser Cataract Surgery Concerns and the Glaucoma Patient

- ◆ IOP elevation
- ◆ Cost-safe harbor
 - Refractive IOLs
 - Astigmatic incisions
- ◆ Trauma to conjunctiva

Procedures to do in Combination

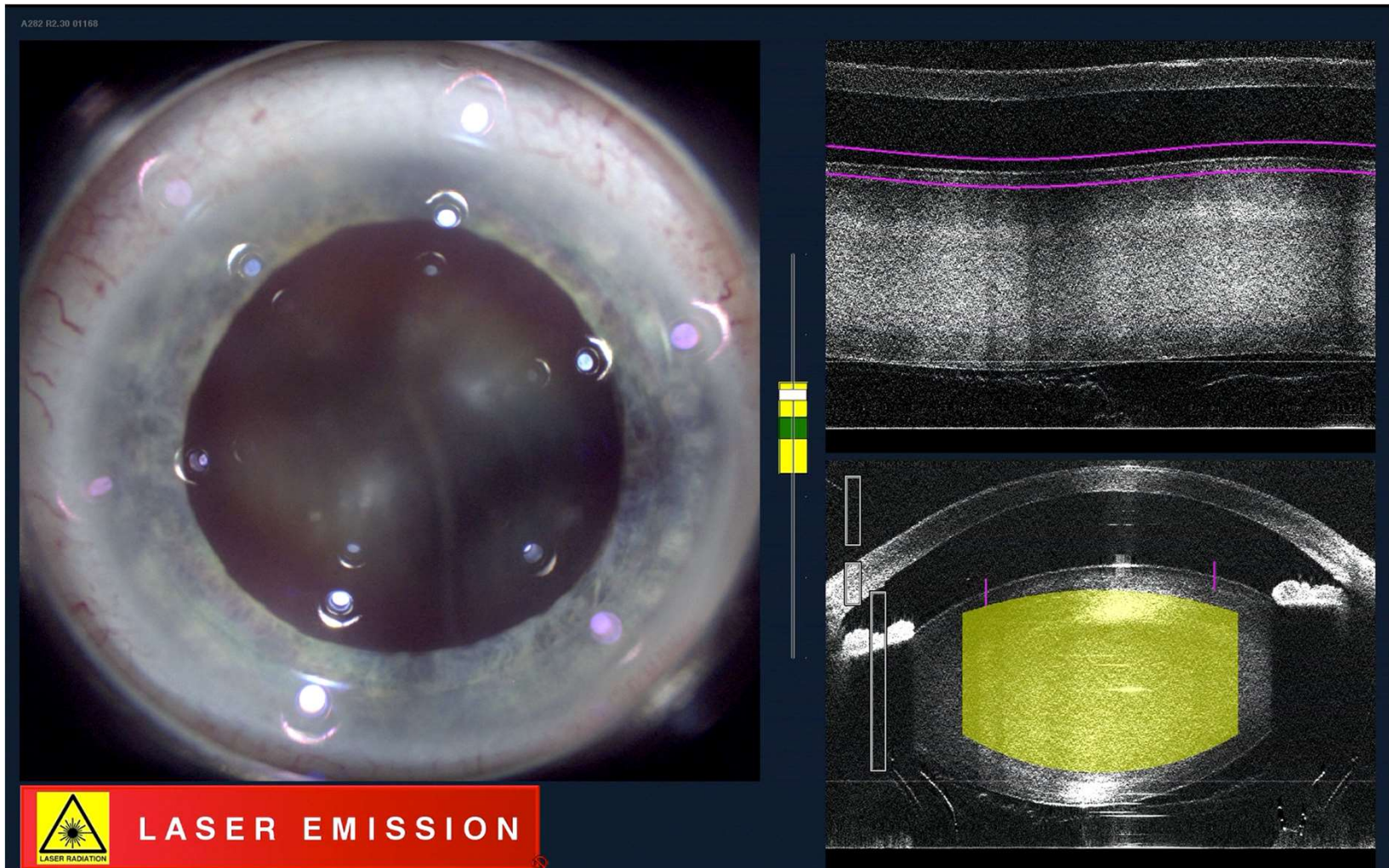
◆ Minimal effect on astigmatism

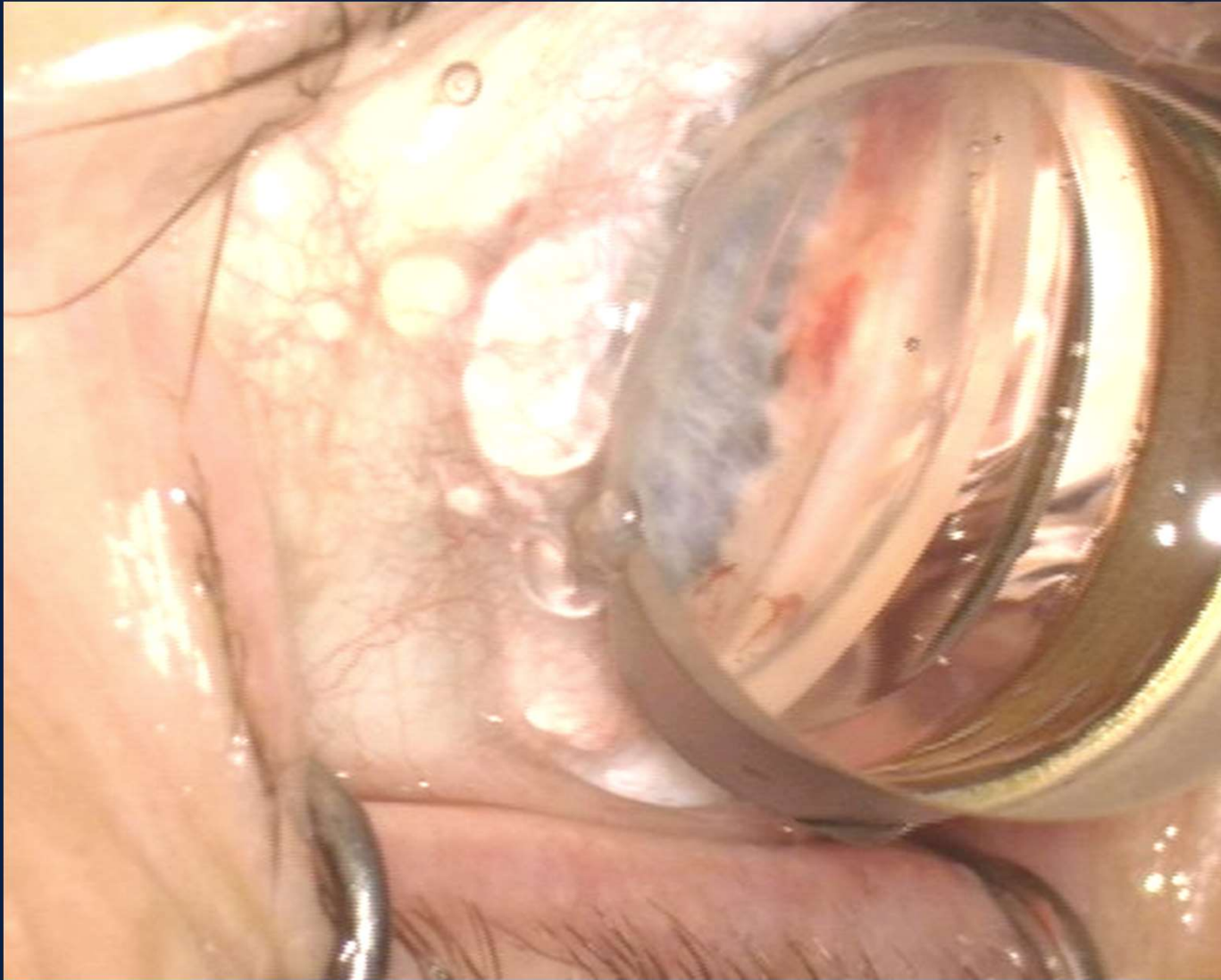
- Istent
- ECP
- Ab Interno Trabeculomy
- Visco canalostomy
- Modified Express
- Tubes

Potential Downsides of Combined Glaucoma Surgery

- Increased inflammation
- IOP spikes
- Changing the refractive outcome
- Slower visual recovery
- More patient discomfort
- Bleeding

Combined Use of ab Interno Trabecular Micro-Bypass Stent With Femtosecond Laser-Assisted Cataract Surgery in Patients With Glaucoma and Cataracts

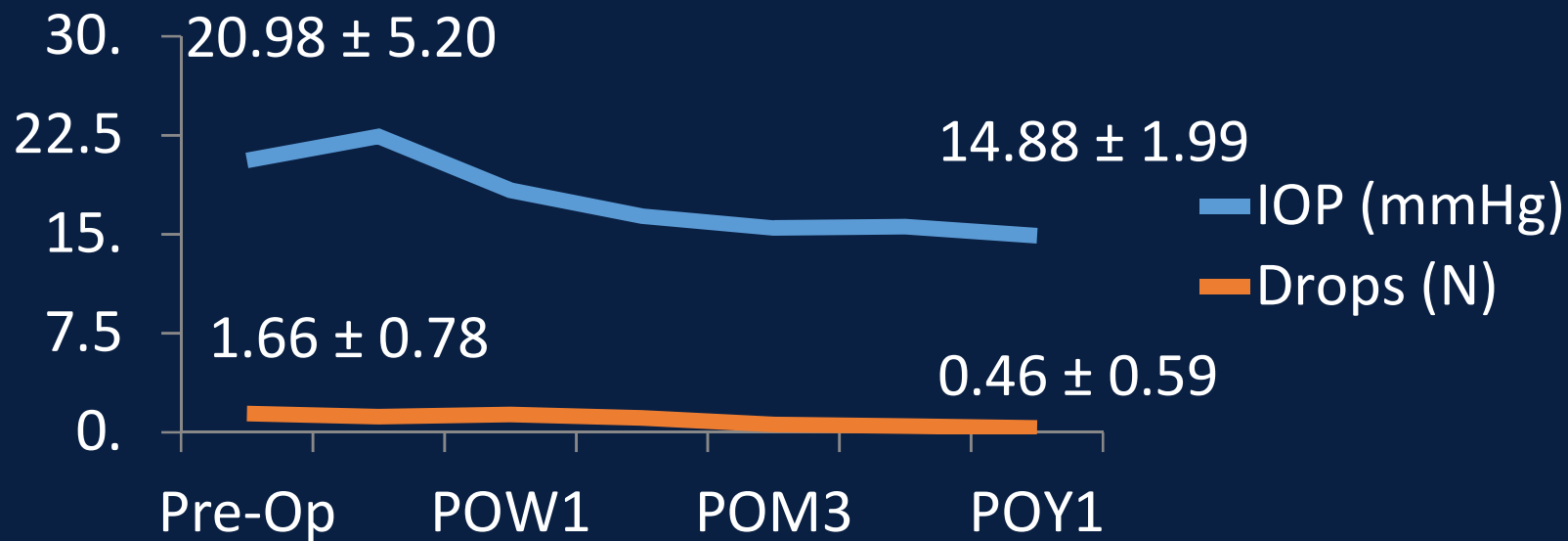




Yale

Results

- 6.1 mmHg (31.1%) reduction in IOP (p=0.03) and 1.2 med reduction (p<0.001) at 1 year



Results

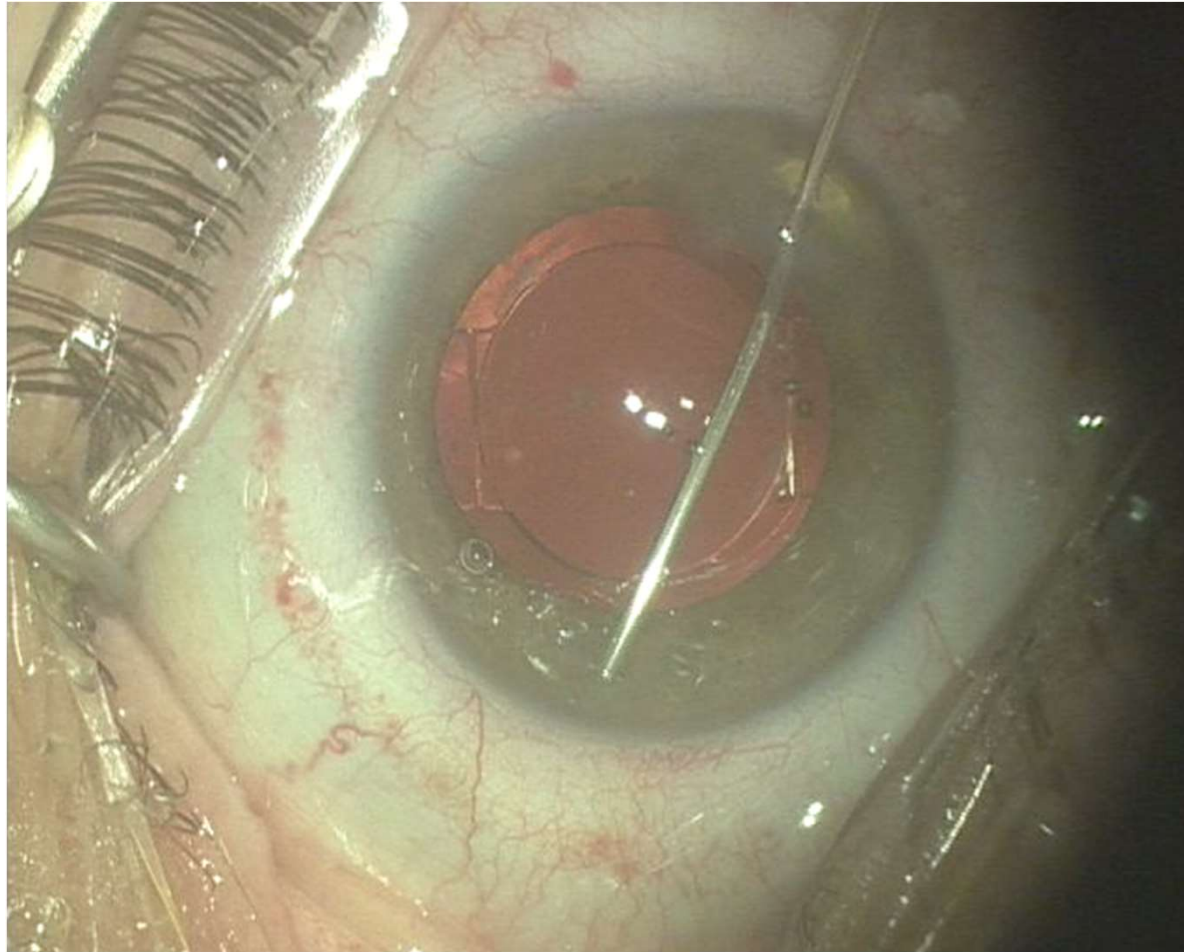
- Minimal impact on vision and refractive outcome
 - Pre-op LogMAR: 0.33 ± 0.25
 - Post-op LogMAR: 0.12 ± 0.17
 - -0.15 ± 0.7 D difference from predicted
 - IOL Calculation – Spherical Eq.
- Need for more prolonged use of anti-inflammatory medications
 - 4.20 ± 2.58 weeks

Results

| Complications | N (%) |
|----------------------|----------|
| Hypotony | 0 |
| Hyphema | 16 (42%) |
| Choroidal detachment | 0 |
| Early Corneal Edema | 8 (24%) |
| Endophthalmitis | 0 |

- There was minimal effect on visual acuity ($p=0.37$)
 - Pre-op: 0.24 ± 0.18
 - POM 6: 0.19 ± 0.20

Femto iStent



Femto Laser Issues for iStent Use

- Presence of arcuate incisions
- Tighter primary incisions
- Incision location may be more variable
- Bubble formation in anterior chamber
- More lens debris at beginning of case
- Higher expectation of femto patients

IOP/Meds (Means)

| Pre-op | ! day | 1 week | 1 month | 3-6 months | 1 year |
|-----------------|----------------|----------------|----------------|----------------|----------------|
| 21.5 (+/- 2.3) | 17.5 (+/- 1.8) | 18.4 (+/- 1.5) | 17.3 (+/- 1.6) | 16.4 (=/- 1.2) | 16.9 (+/- 1.5) |
| 1.4 | 1 | 1.1 | 0.9 | 0.9 | 0.9 |

Visual Outcomes (Median)

| | Pre-op | Day 1 | Week 1 | Month 1 | Month 3-6 | Month 12 |
|----------|--------|-------|--------|---------|-----------|----------|
| BCVA | 20/50 | 20/30 | 20/25 | 20/25 | 20/20 | 20/20 |
| Cylinder | 1.12 | 0.25 | 0.37 | 0.3 | 0.23 | 0.19 |

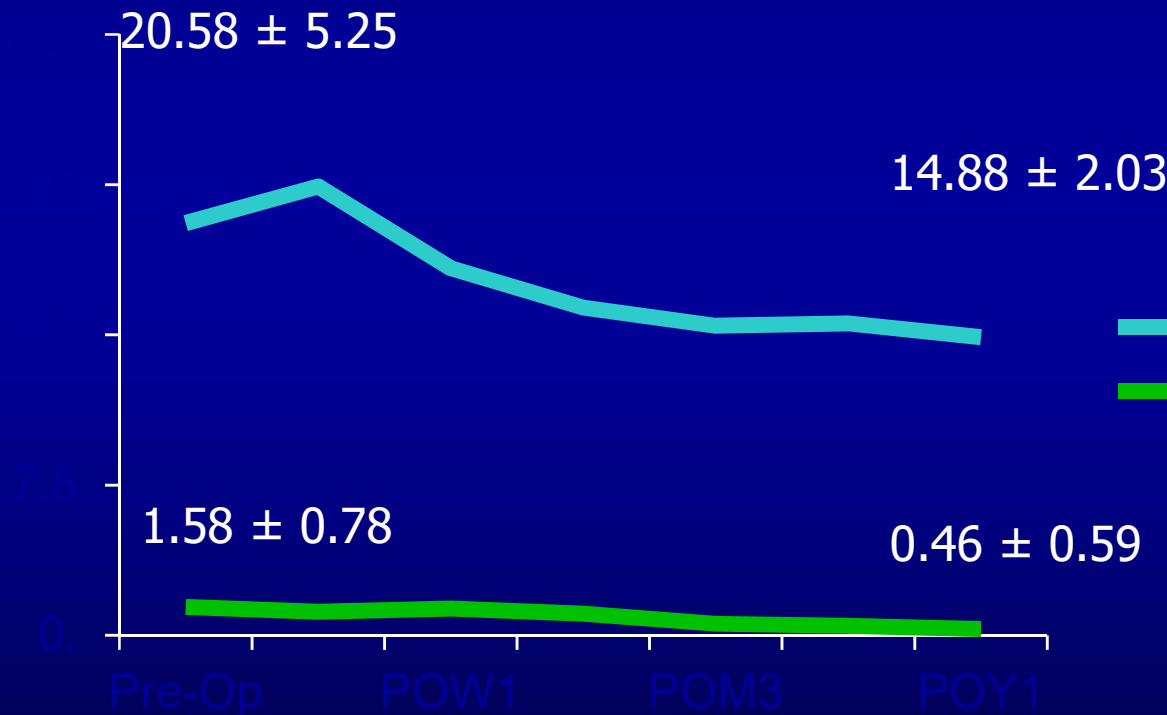
Secondary Measures

- 1 year Mean Spherical Equivalent Error= $-.30$
- Median time until off post-op meds= 1 month
- No serious complications
- Mild hyphema post-op day 1 in 6/30 patients
- IOP spike in 1 patient

Femto ECP

Femto ECP

- ◆ 5.7 mmHg (29.1%) reduction in IOP (p=0.03) and 1.1 med reduction (p<0.001) at 1 year



Femto ECP

- ◆ Minimal impact on vision and refractive outcome
 - Pre-op LogMAR: 0.34 ± 0.27
 - Post-op LogMAR: 0.14 ± 0.18
 - -0.19 ± 0.7 D difference from predicted
 - IOL Calculation – Spherical Eq.
- ◆ Need for more prolonged use of anti-inflammatory medications
 - 5.20 ± 3.18 weeks

Conclusion

Femtosecond Cataract Surgery

- ◆ **Novel technology provides image-guided laser cataract surgery.**
- ◆ **Computer-controlled and laser accurate incisions**
- ◆ **Improved capsulotomies in difficult eyes**
- ◆ **Reduced phacoemulsion time and energy**
- ◆ **May be advantageous in many glaucoma patients needing cataract surgery**