

# ASIA-PACIFIC EyeWorld

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## Tipping points

**Pearls for tipping difficult cataract cases  
in favor of you and your patients**

### Cover feature:

#### Challenging cataract cases

- Challenging cases — page 8
- The best tools for the job — page 10
- Refractive lens placement — page 12
- Ocular misalignment — page 14
- Spectacle independence — page 16
- Viscoanesthesia — page 18
- CME and NSAIDs — page 20
- Retained nuclear chips — page 22
- Before refractive or cataract surgery — page 23

### Special Updates:

- Combined cataract and glaucoma
- The world going gray — page 29
- Latest research in IOL materials and design
- GRADOLs — page 33

### Meeting reporter:

- IMACRS 2009 — page 31
- ESCRS 2009 — page 32

### REFRACTIVE SURGERY

- Eccentric grafts — page 27
- Alternate approach, new slide — page 28

### TOOL TIME

- Excimer and femtosecond lasers — page 34

### PHARMACEUTICAL CORNER

- Steroids — page 36
- Fluoroquinolones — page 37

Complete table of contents — page 4 and 6

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## Letters from the Editors



Dear Friends

**T**he featured theme in this issue of *EyeWorld Asia-Pacific* is the management of challenging cases in cataract and intraocular lens surgery.

The challenge of cataract surgery extends beyond the management of technically difficult surgery and includes issues such as the positioning of refractive IOLs and the prevention of post-op CME, which, together with many other challenges, are discussed by international surgeons as well as our own experts from the Asia-Pacific region. Indeed, when one considers the complexities of modern cataract surgery, it highlights the apparent lack of appreciation of the complexity of the procedure by government bodies and health funds who contribute to the financial reimbursement of patients undergoing cataract surgery.

Currently in Australia, there has been a 50% reduction proposed in the fee for cataract surgery on the basis that the operation has become a simple procedure. Similar forces have reduced cataract reimbursement in the US and Europe and I suspect that surgeons in the Asia-Pacific region will be faced with similar efforts from funding agencies attempting to improve their overall budget by minimizing the training, skills and effort which are required to ensure that patients receive the outstanding results available with modern cataract surgery.

Surgeons have a role to play in ensuring modern cataract surgery continues to be recognized by politicians and bureaucrats as a technically demanding procedure. Widespread advertising, focusing on the commercial aspects while minimizing the significance and risks of the procedure are not helpful.

I hope that the experience and advice from experts on how to manage some of the challenges we face in modern cataract surgery are helpful and remind us of the complexities and sophisticated nature of the procedure, which otherwise is often taken for granted.

Warmest regards

Associate Professor Graham Barrett, MD  
President, APACRS  
Chief Medical Editor, *EyeWorld Asia-Pacific*



Dear Friends

**W**ith great pleasure, I welcome you all to this edition of *EyeWorld Asia-Pacific*. The cover feature for this issue is "Challenging Cataract Cases". As we all know, more than any other

branch of medicine, the science and art of ophthalmology is driven by skill as well as technology. In the last decade, there has been an exponential increase in both, with modern phacoemulsification and refractive procedures being safe and free of complications in 99% of cases. However, there are always some cataract cases that are more challenging than others. This issue highlights the management of various challenging situations in cataract surgery, optimum placement of refractive lenses and the ideal tools for phacoemulsification. There is an increased patient expectation for spectacle independence after cataract surgery for distance and near. Understanding presbyopia correcting IOLs such as multifocal and accommodating IOLs is the need of the hour. The gradient refractive index IOL (GRADOL) appears to be the most promising option for multifocality in the future.

Descemet's Stripping Endothelial Keratoplasty (DSEK) has emerged as the procedure of choice for endothelial dystrophy compared with full-thickness penetrating keratoplasty. However, the increased rate of primary graft failure and endothelial cell loss due to tissue manipulation during DSEK is a major concern. Use of new instruments for donor insertion has been shown to enhance post-op survival of endothelium versus the taco fold technique.

The role of bevacizumab in prevention of proliferative vitreo-retinopathy in severe uncontrolled uveitis has been described in recent studies. This could provide a fresh ray of hope in this potentially sight-threatening disease when conventional medications do not work.

*Vinaikkan vinaiketal ompal vinaikkurai*

*Tirntarin tirntanru ulaku.*

-Thirukkural, Kural 612, chapter 62

Beware of leaving any work unfinished;  
for the world does not care.  
For a person, who fails to complete his  
allotted task.

I hope the discussion of various ophthalmic situations in this issue will be an interesting and informative read for everyone.

With warm regards

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