



Control TOTAL sobre la Adaptacion

PARA QUIENES SON??

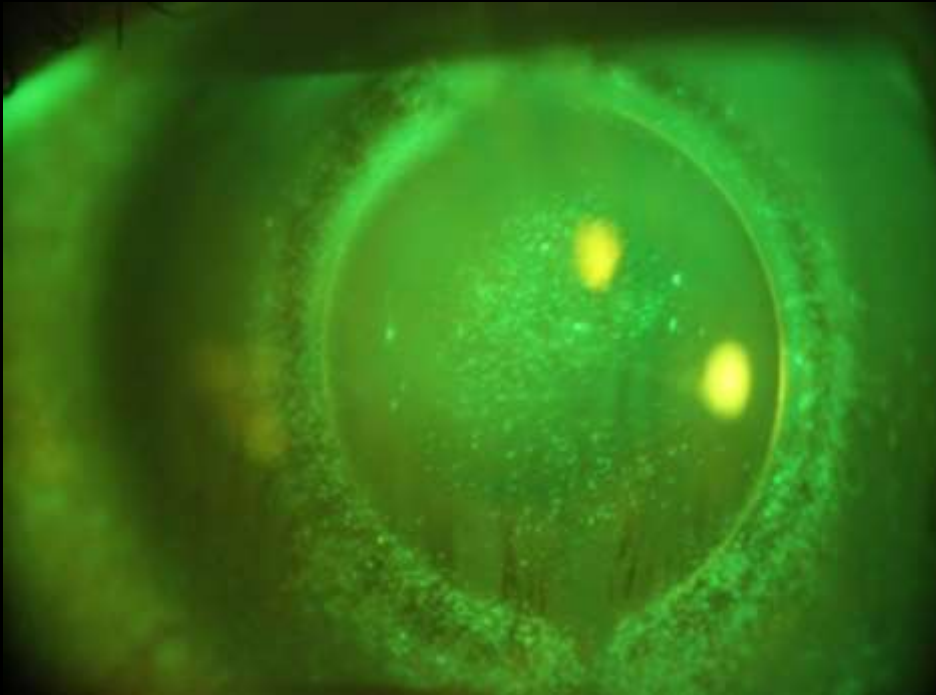
- ECTASIAS PRIMARIAS Y SECUNDARIAS
 - SINDROME DE STEVE-JOHNSON
 - SINDROME DE SJÖGREN
 - QUERATOPLASTIAS
 - POST TRAUMA
 - MALA AV CON LC TRADICIONALES
 - INCOMODIDAD CON LC TRADIUCIONALES
-

PRINCIPIO GENERAL Y ABSOLUTO

- LENTE DE CONTACTO DE APOYO ESCLERAL
- **JAMAS DEBE TOCAR
CORNEA O LIMBO
CORNEO-ESCLERAL**

CUAL ES CLEARANCE IDEAL??

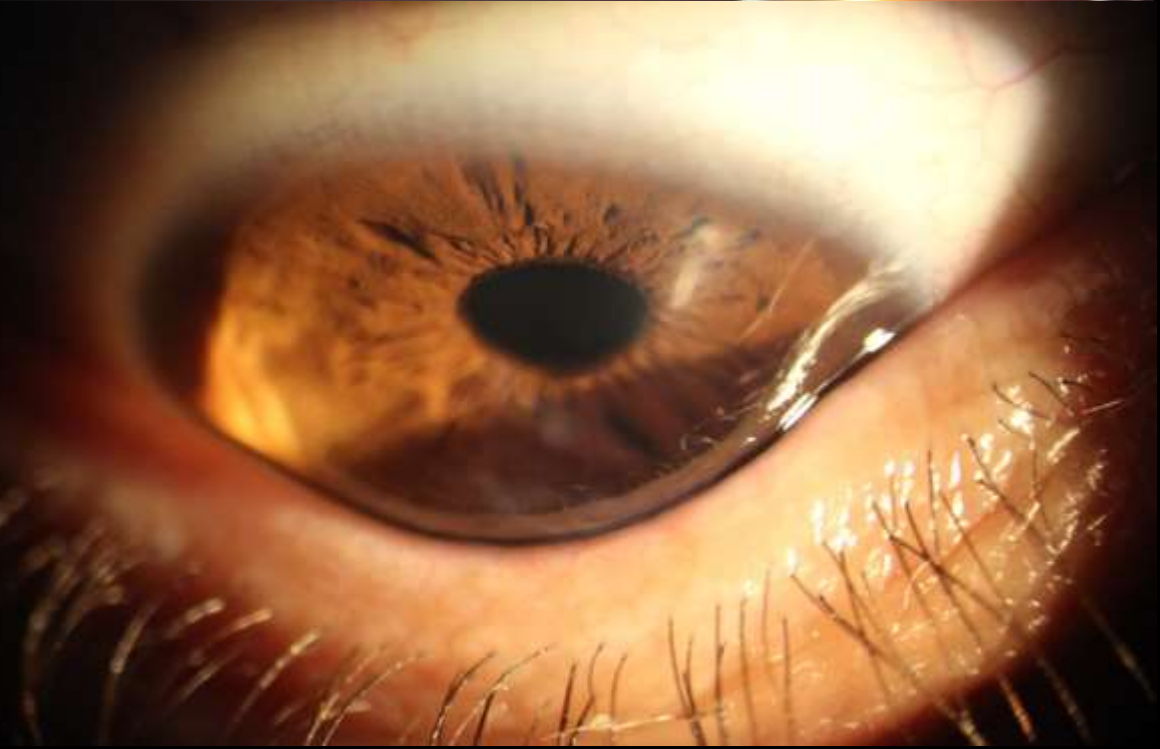
- EL MENOR POSIBLE EN TODA LA ZONA CORNEAL
- INLCUYENDO LIMBO
- OXIGENACION



Entonces???

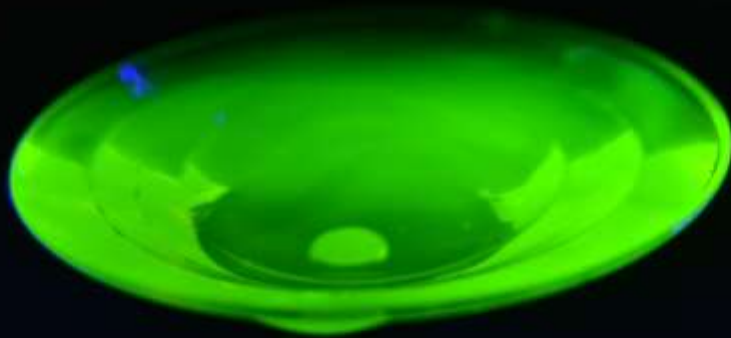
1-ESCOJA EL LC PRUEBA SEGUN SU DIAMETRO

- El lente debe escogerse en funcion del tamaño de la protusion
- Siempre debe usarse lente de prueba
- Mientras mas grande sea el problema (forma), mas grande debe ser el lente
- Usualmente Digiform 16.6 seria ideal
- Sino Digiform 18.0



Lente de Prueba Inicial

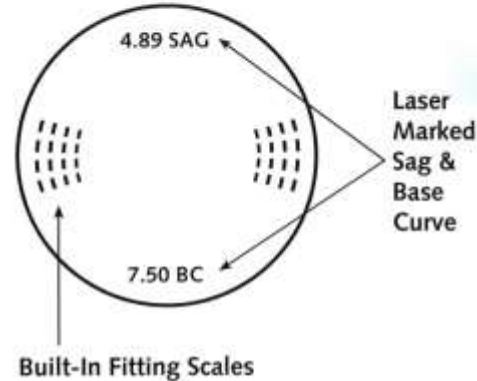
Initial Base Curve Selection	
Keratoconus	1.0 D flatter than average K
Normal Corneas	On Flattest K
Post Lasik	4.0 D steeper than Flat K
Post RK	5.0 D steeper than Flat K



NAFL

DigiForm D16.6 Lens Parameters

LENS#	BC	DIOP	SAG	SHAPE (DEFAULT)
1	6.00	56.25	5.65	Prolate
2	6.25	54.00	5.49	Prolate
3	6.50	51.92	5.35	Prolate
4	6.75	50.00	5.22	Prolate
5	7.00	48.21	5.10	Prolate
6	7.25	46.55	4.99	Prolate
7	7.50	45.00	4.89	Prolate
8	7.75	43.55	4.80	Prolate
9	8.00	42.19	4.72	Oblate
10	8.25	40.91	4.64	Oblate
11	8.50	39.71	4.56	Oblate
12	8.75	38.57	4.50	Oblate
13	9.00	37.50	4.43	Oblate
14	9.25	36.49	4.37	Oblate
15	9.50	35.53	4.31	Oblate



INITIAL BASE CURVE SELECTIONS	
Keratoconus	1.0 D flatter than average K
Normal Corneas	On Flattest K
Post Lasik	4.0 D Steeper than Flat K
Post RK	5.0 D steeper than Flat K

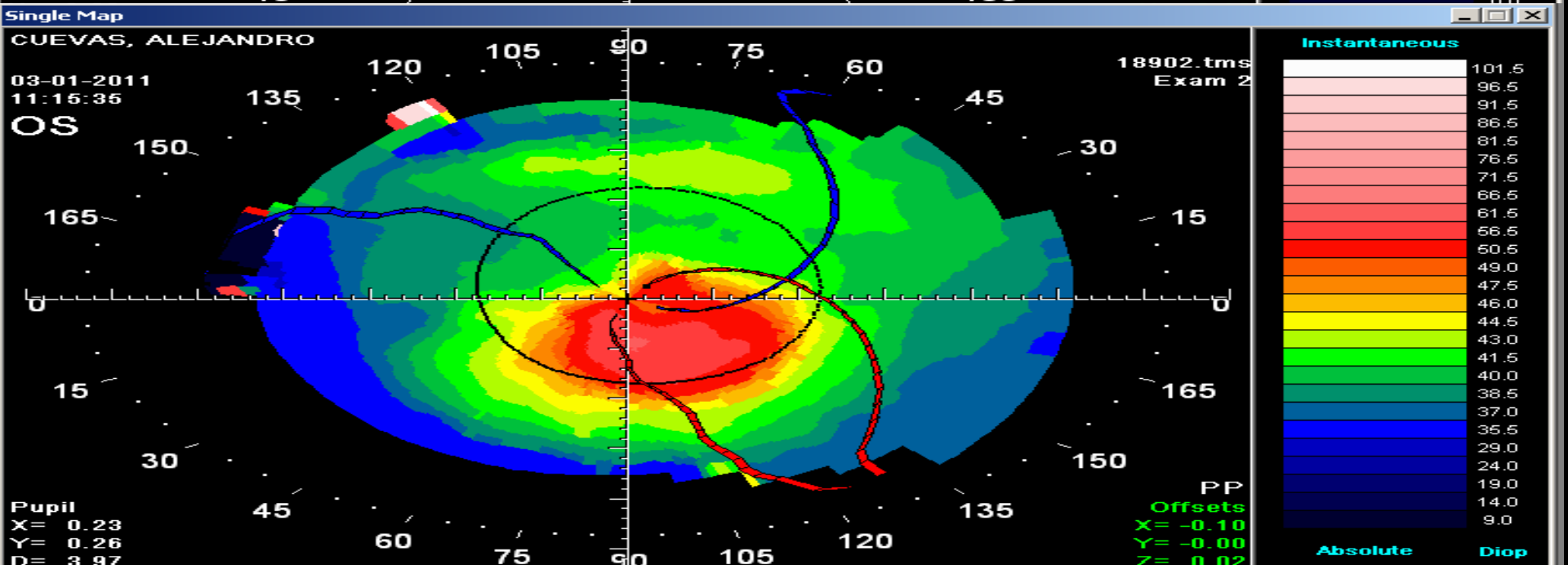
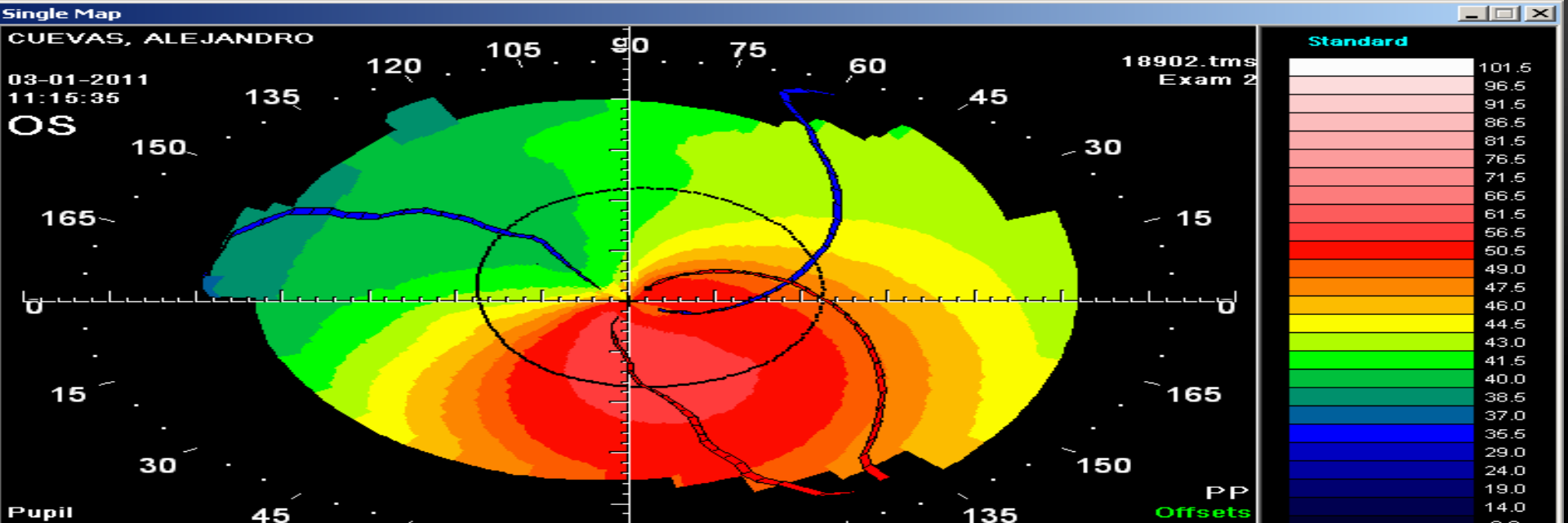
DigiForm 16.6 Featuring:

- One Diameter/One Set for all corneal conditions
- Built-in fitting scales - creating predictable fitting
- Quadrant specific & toric options
- Bifocal options



2- VOLTEAR LA CORNEA

- Cuidado con la altura sagital seccion optica
- Mientras mayor la protusion; mayor sagita se necesitara
- No debe haber toque en cornea; NUNCA; ni en limbo
- De no disponer mayor diametro, habra que jugar con la CB

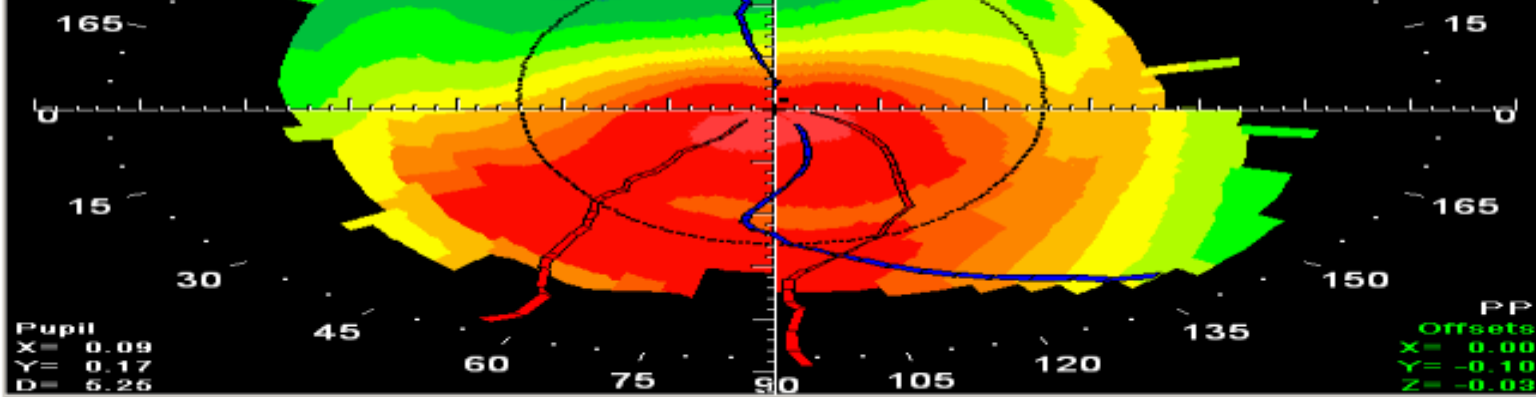


Ks: 50.15 @ 75° **Kf: 46.47 @ 165°** **MinK: 46.44 @ 160°**
AveK: 48.31 **Es: 0.90 / Em: 0.82** **CYL: 3.69**
SRI: 1.04 **PVA: 20/30-20/40** **SAI: 5.75**

beltran, valeria
18145924-7
06-07-2011
09:45:06

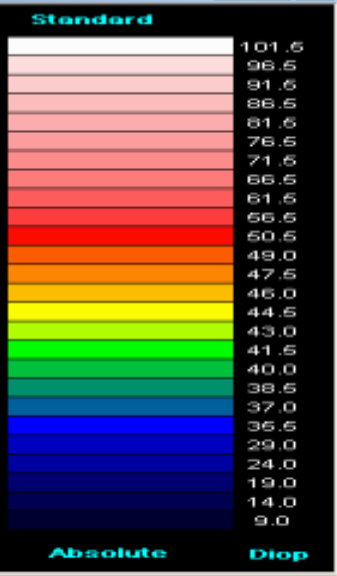
22702.tms
Exam 2

OS



Pupil
X= 0.09
Y= 0.17
D= 6.26

PP
Offsets
X= 0.00
Y= -0.10
Z= -0.03



Ks: 51.24 @ 13°
AveK: 49.40
SRI: 1.32

Kf: 47.56 @103°
Es: 0.96 / Em: 0.65
PVA: 20/30-20/40

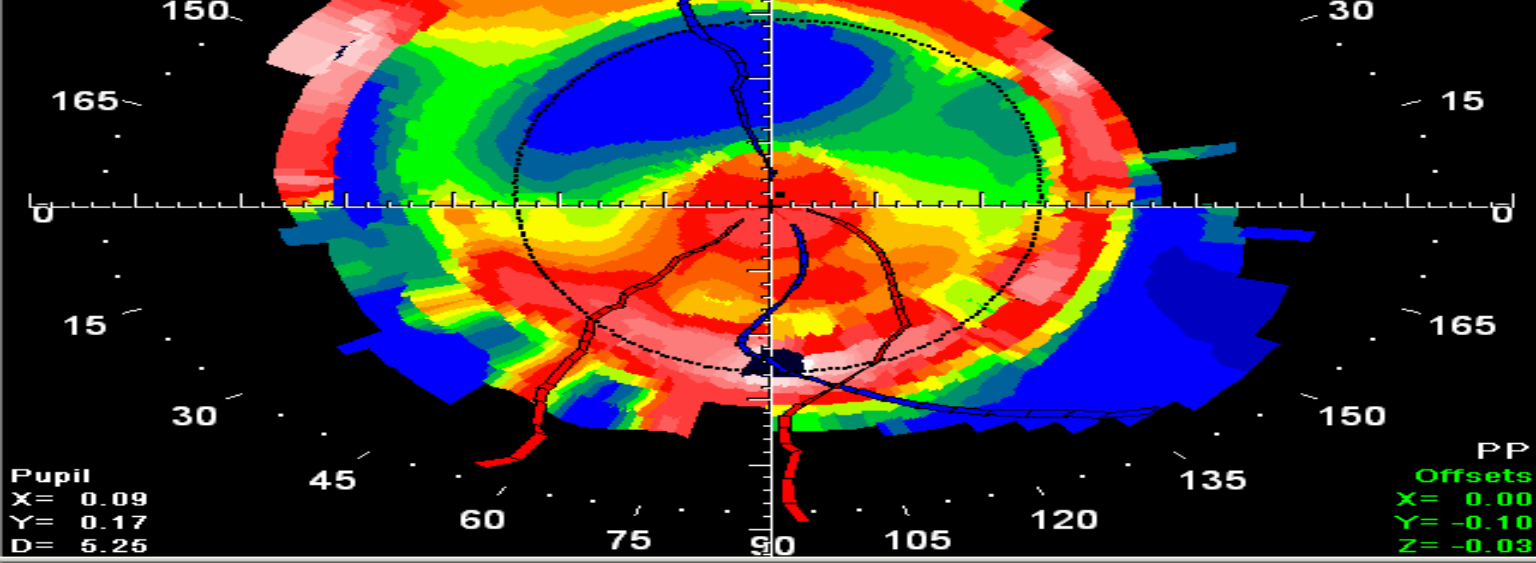
MinK: 47.55 @100°
CYL: 3.69
SAI: 2.93

TOMEY
Version 3.5E

06-07-2011
09:45:06

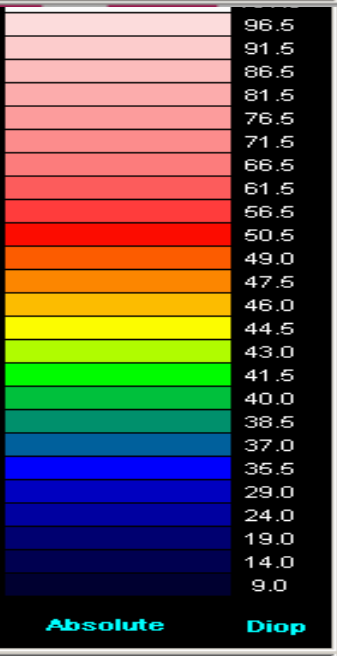
OS

Exam 2



Pupil
X= 0.09
Y= 0.17
D= 5.25

PP
Offsets
X= 0.00
Y= -0.10
Z= -0.03



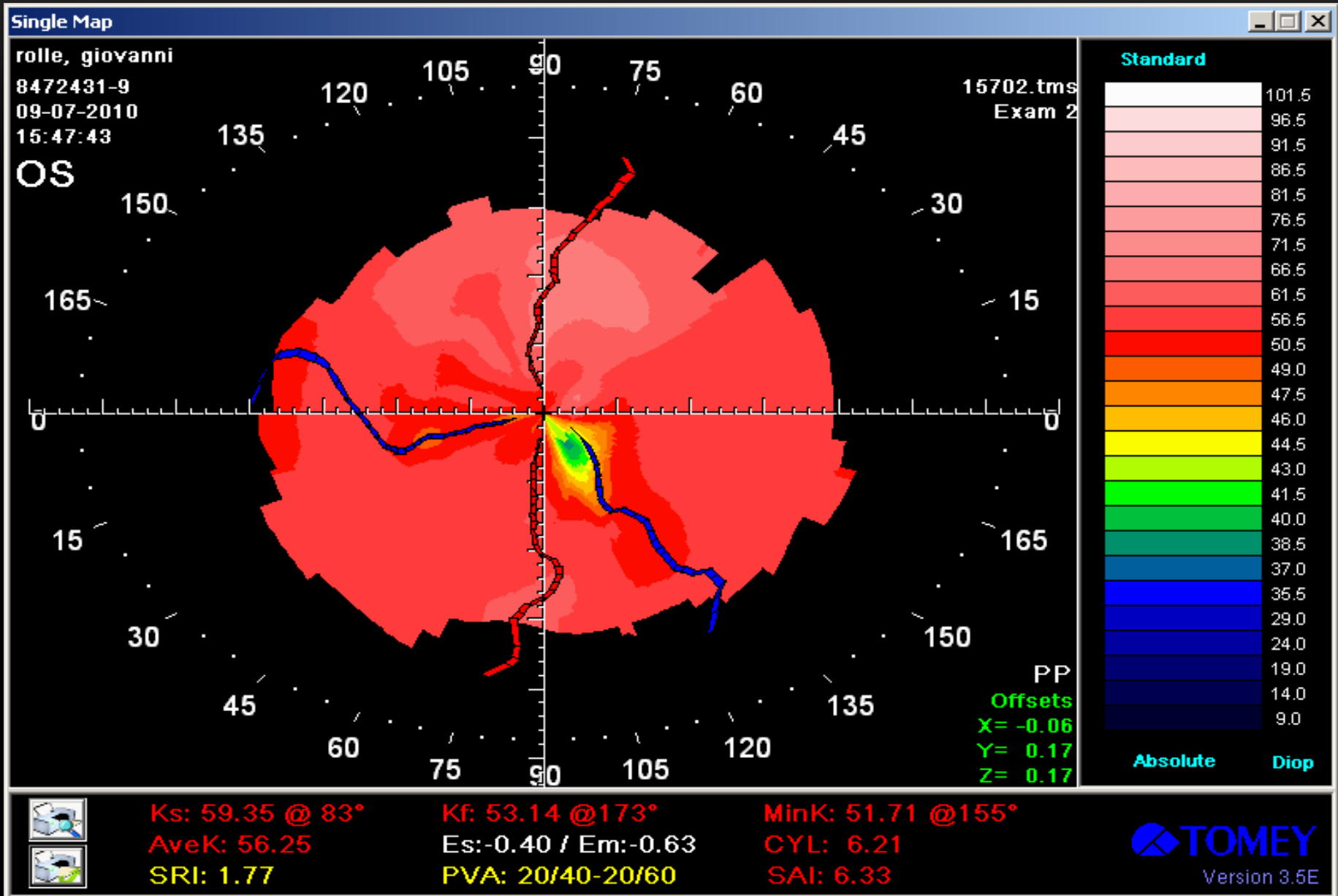
Ks: 51.24 @ 13°
AveK: 49.40
SRI: 1.32

Kf: 47.56 @103°
Es: 0.96 / Em: 0.65
PVA: 20/30-20/40

MinK: 47.55 @100°
CYL: 3.69
SAI: 2.93

TOMEY
Version 3.5E

QUERATOGLOBOS



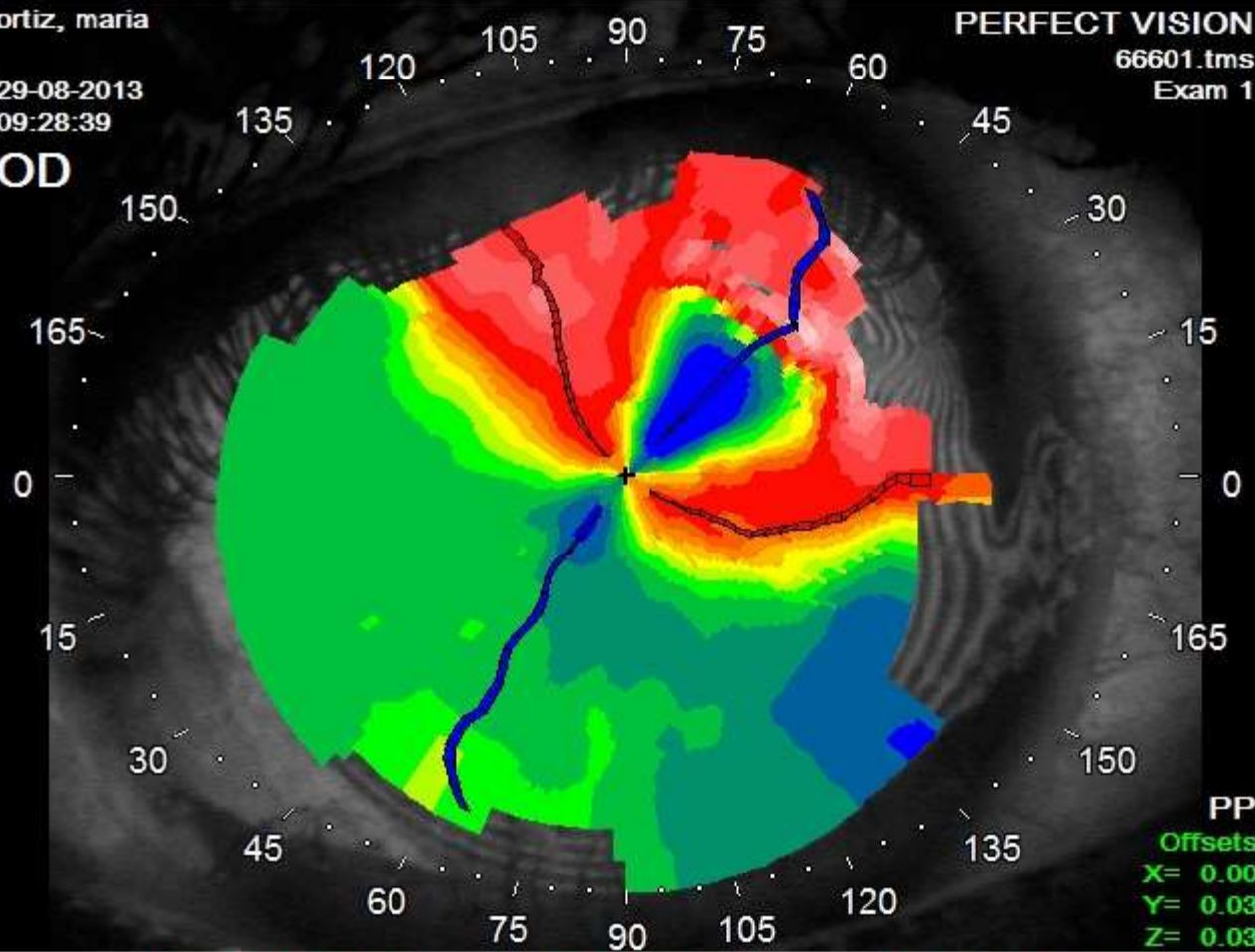
ortiz, maria

29-08-2013
09:28:39

OD

PERFECT VISION

66601.tms
Exam 1



Instantaneous



Absolute Diop

PP

Offsets
X= 0.00
Y= 0.03
Z= 0.03



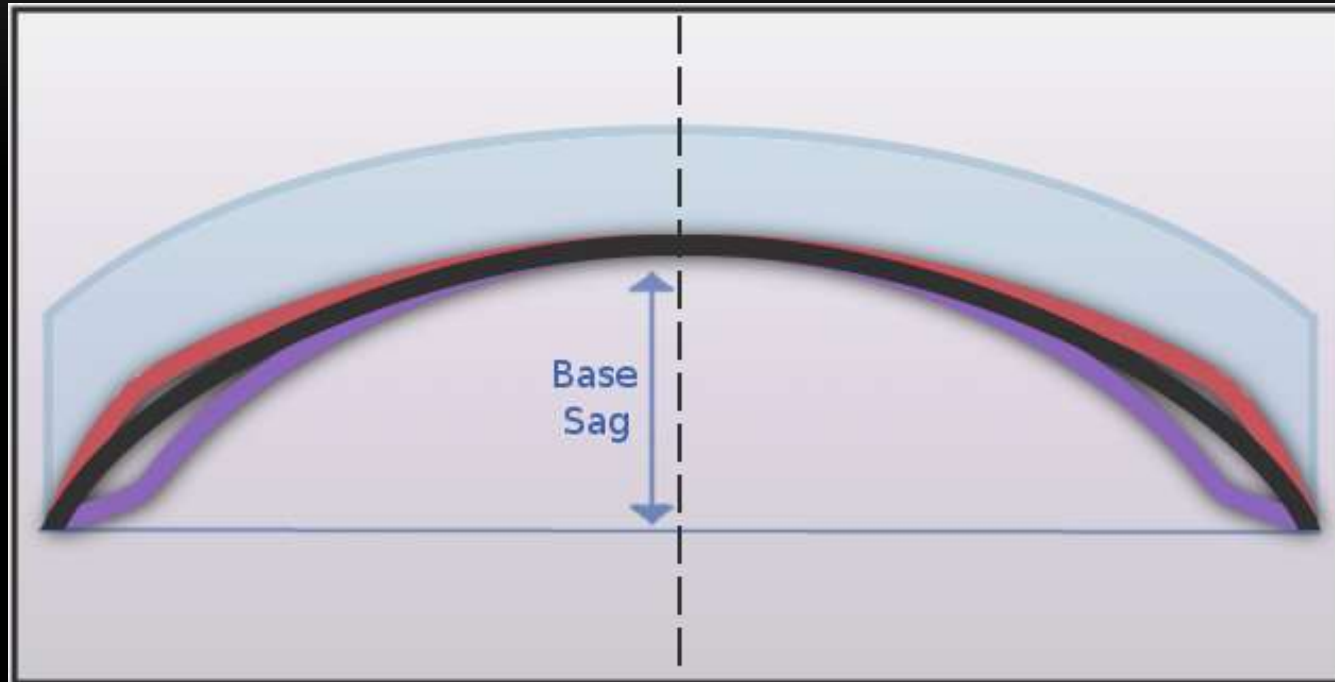
Ks: 50.11 @138°
AveK: 42.33
SRI: 1.87

Kt: 34.54 @ 48°
Es: 0.94 / Em:-0.81
PVA: 20/40-20/60

MinK: 34.53 @ 46°
CYL: 15.57
SAI: 1.80

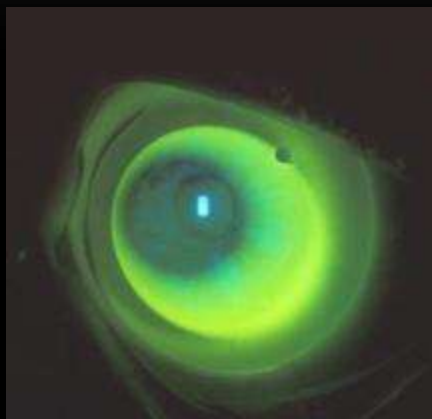
TOMEY
Version 4.3A

HOWEVER...CAN WE ONLY LOOK AT SAG?

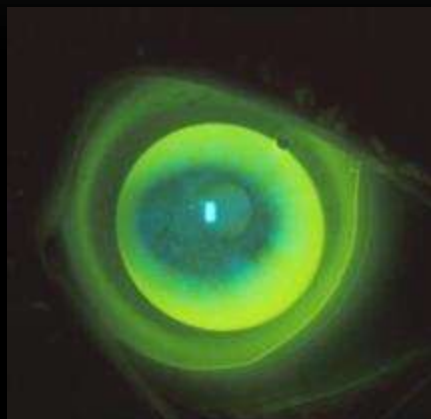


- 3 lentes
- Diferentes Curvas Base
- Todas hechas con la misma Sag
- Adpataciones muy diferentes en precision

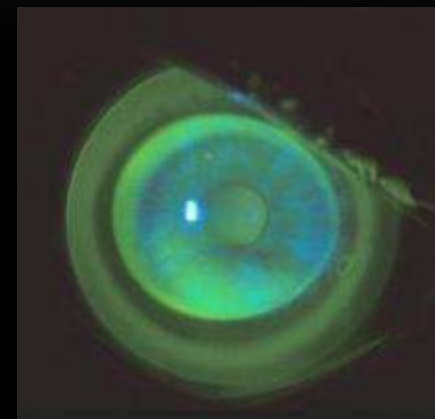
MINI-SCLERAL FIT



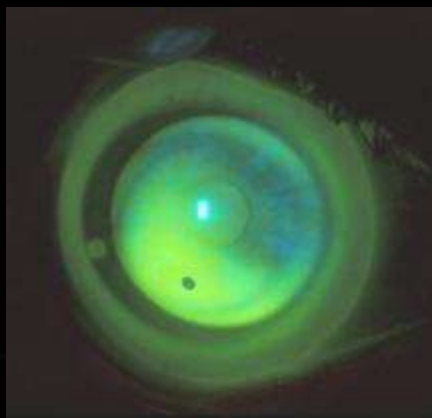
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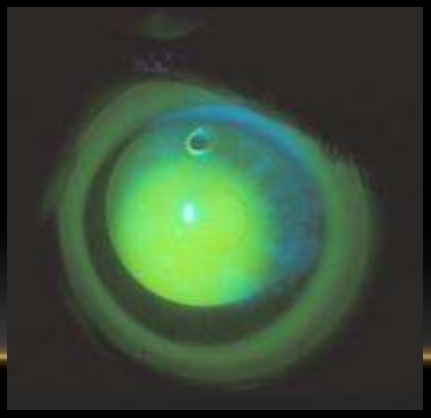
42.00



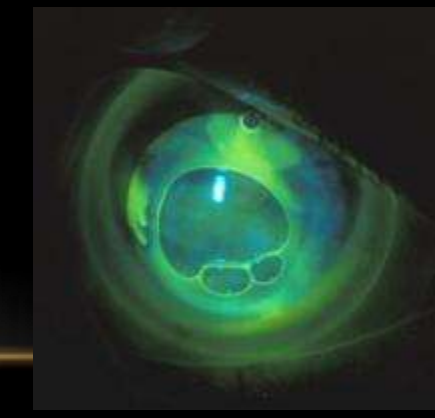
44.00



46.00



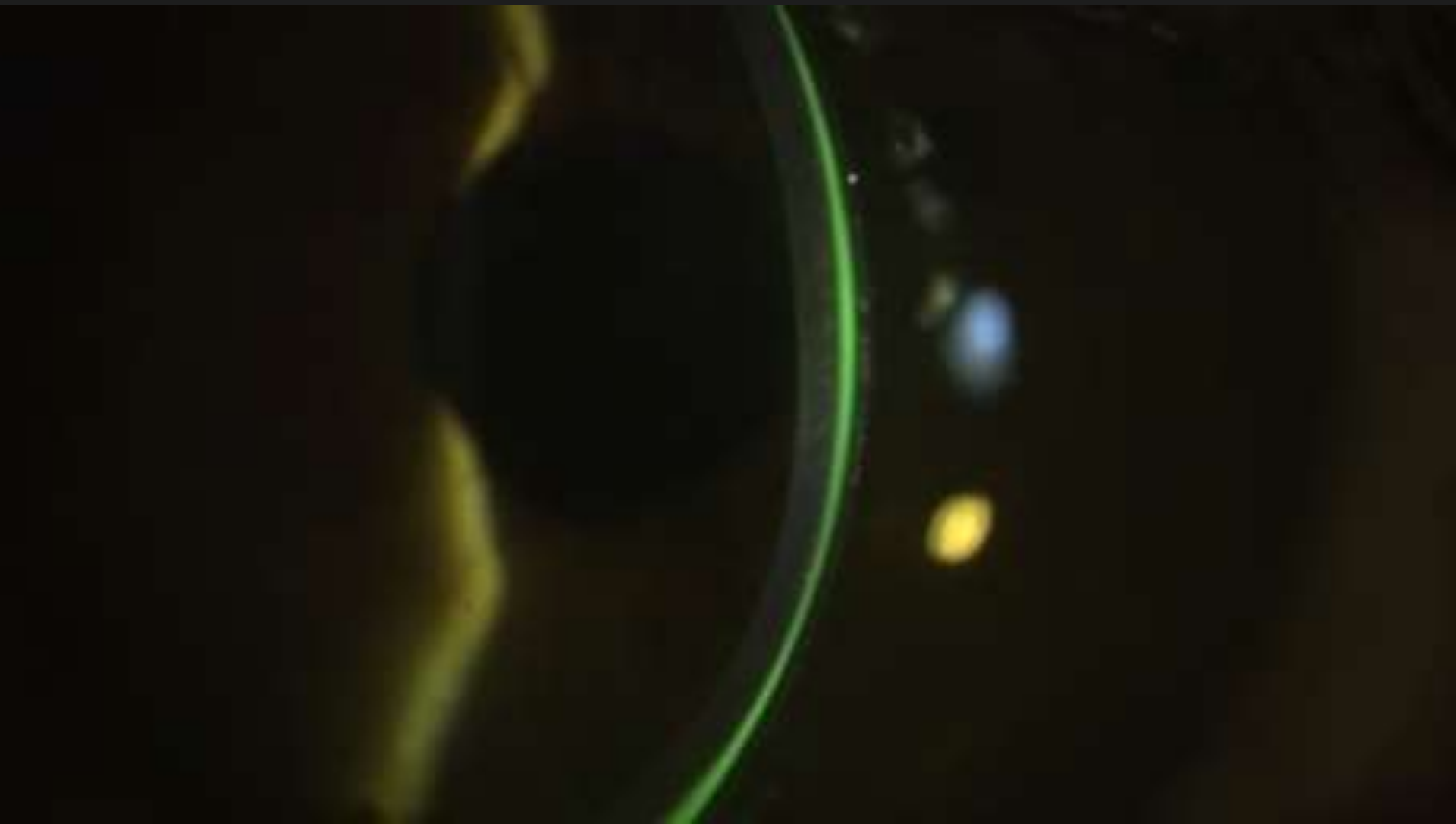
48.00



50.00

3 EVALUAR

- LC prueba no tiene demasiada relacion con la K como con la adaptacion tradicional con RGP corneales
- Esperar al menos 20 Minutos
- Evaluar desde el centro a la periferia
- El clearance ideal debe ser el menor posible
- Evaluar con seccion optica 45°-60°
- Luz blanca con fluoresceina
- Compare con el espesor corneal para determinar valor clearance



3- EVALUAR

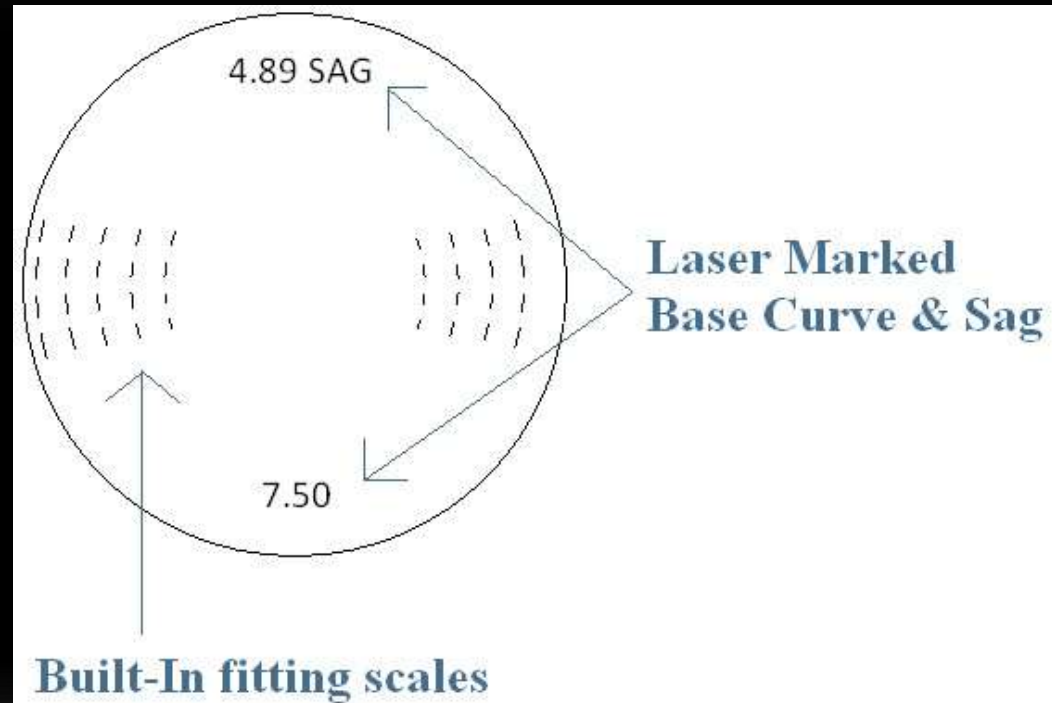
- Muy importante es tener clearance en cornea y limbo para evitar daño células basales
- Si el clearance es muy inadecuado cambie LC
- Recuerde que el cambio debe ser en función del mismo diámetro escogido de acuerdo a la severidad del problema
- Una vez volteado el problema de cornea sin toque.....



FACIL RECONOCER ZONA A MODIFICAR

Diseño:

- Zona Optica central CB 8.0mm
- 5 curvas adicionales
 - 8-10mm, 10-12mm, 12-14mm, 14-15.8mm, 15.8-16.6mm
- Lente grabado con laser

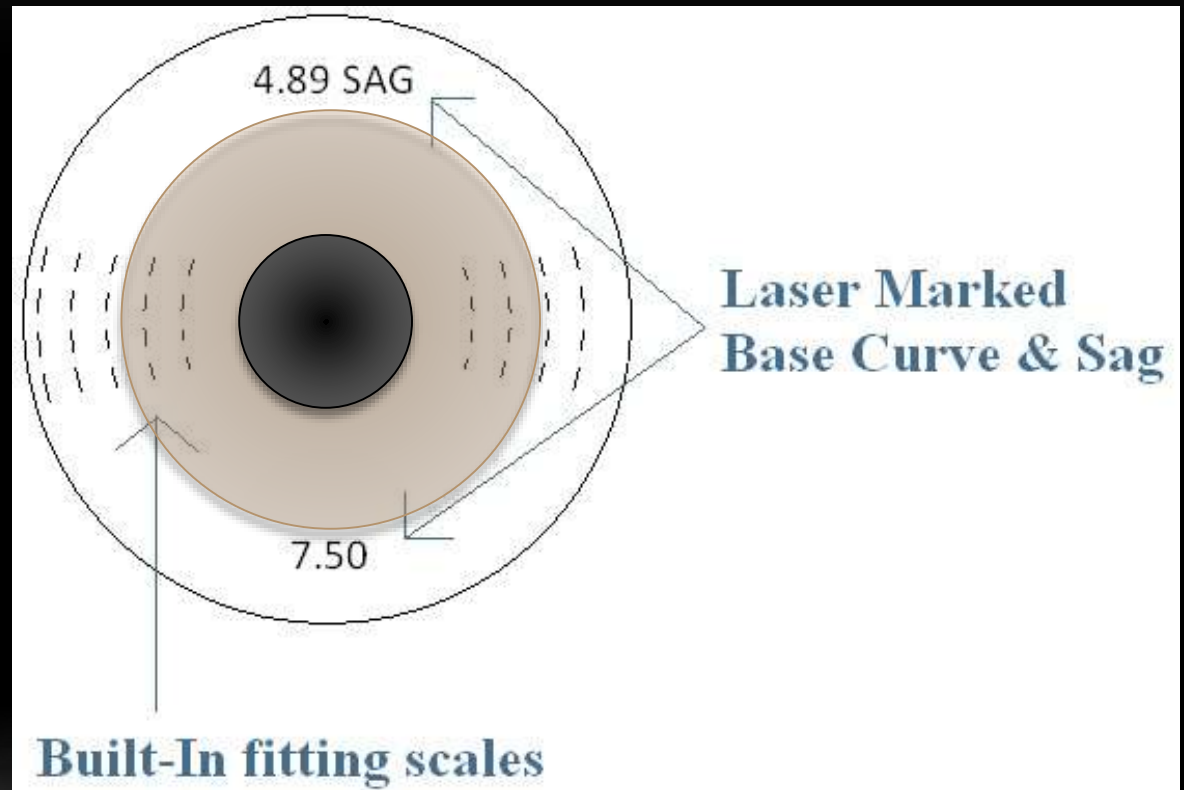


MODIFIQUE CADA ZONA CON PRECISION TOTAL

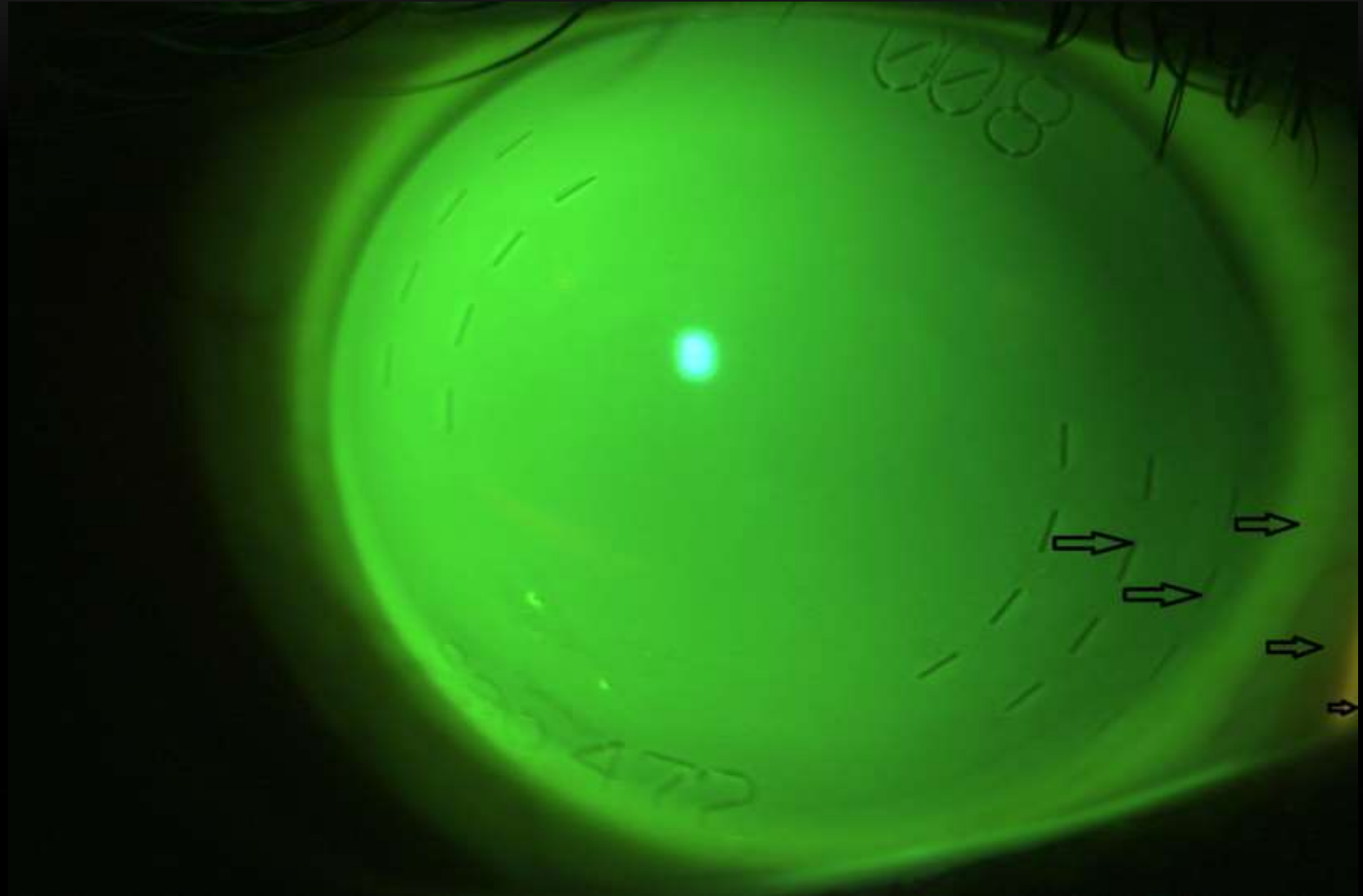
Marcas:

- Partiendo DHIV

- Menor a 3 marcas = <12.0mm
- Mayor a 3 marcas = >12.0mm
- Cada marca es = 1mm en cada lado

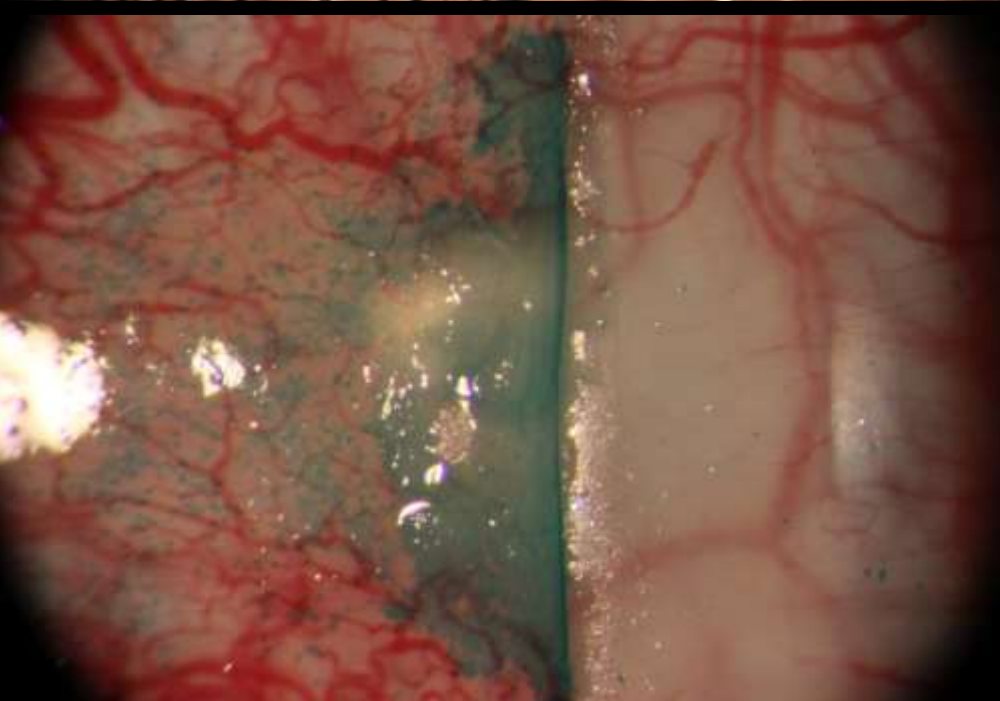
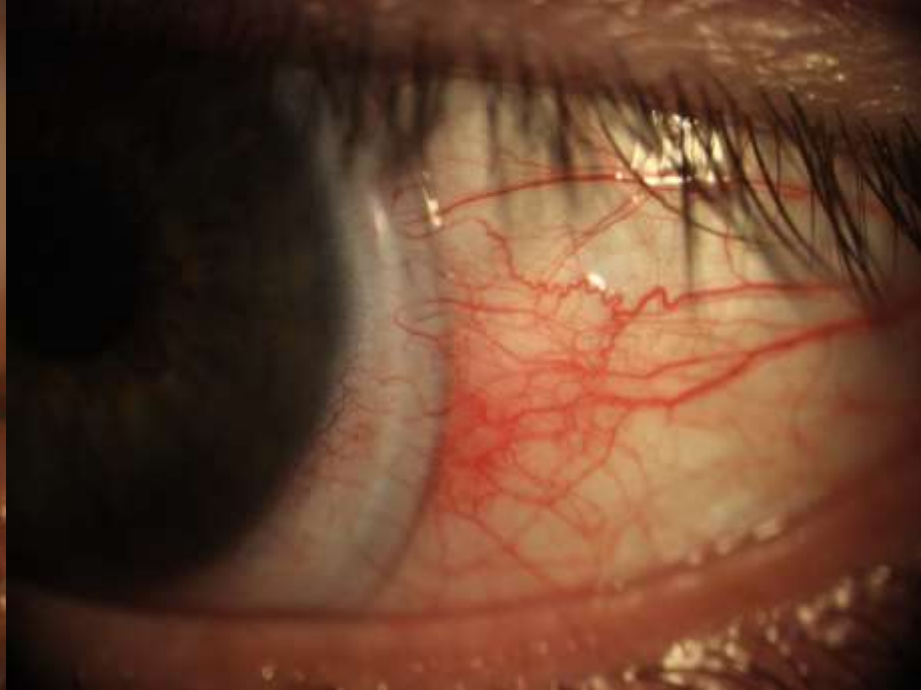


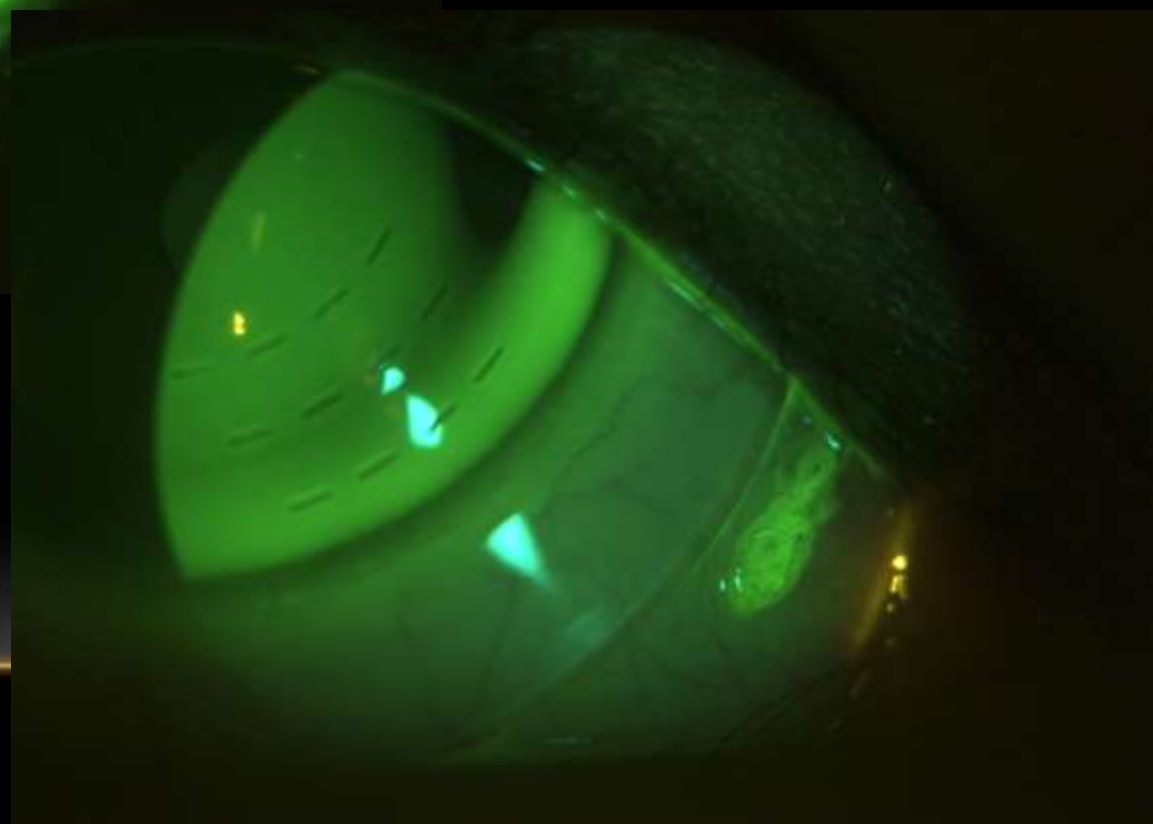
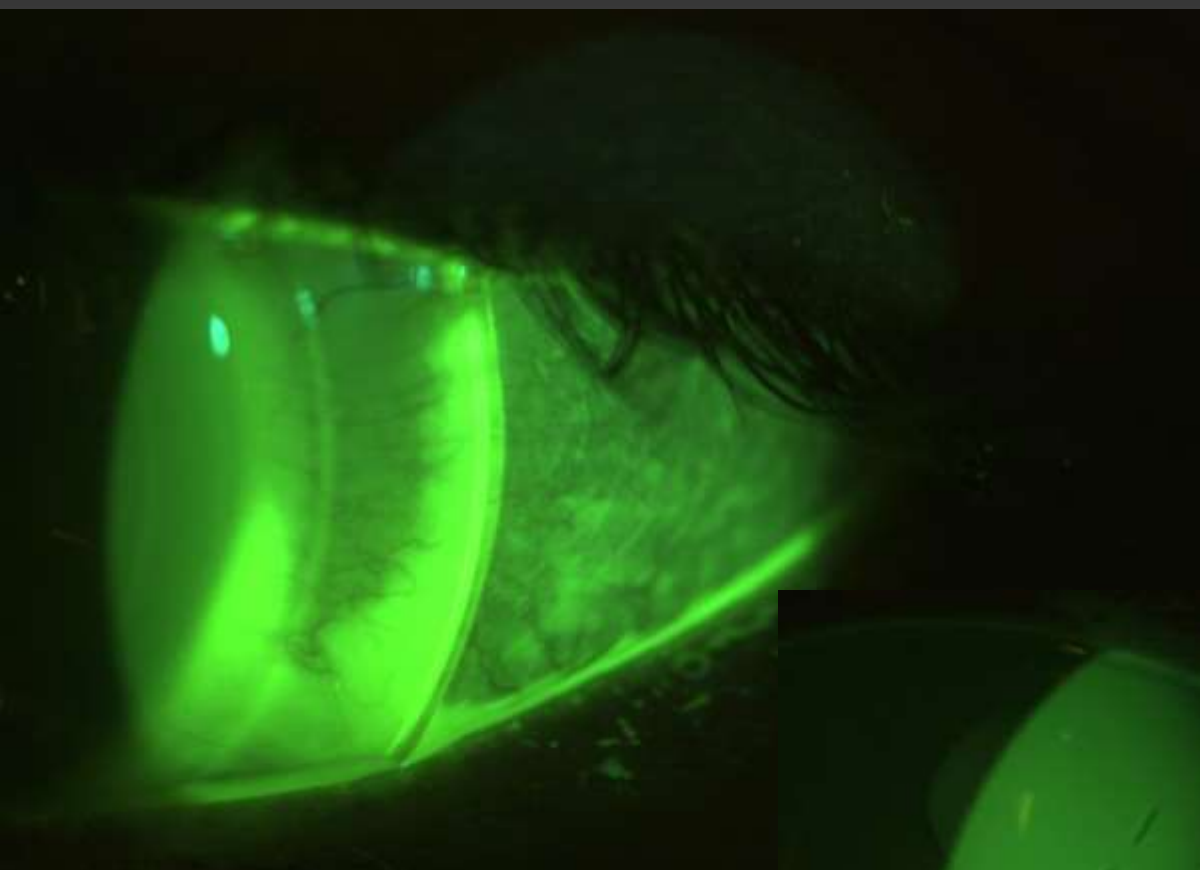
EVALUAR TODAS LAS ZONAS CN PRECISION DIAGNOSTICA DIGIFORM



EVALUAR ZONA ESCLERAL

- Muy importante (LC apoyo escleral)
- LC debe quedar semi sellado; sin movimiento
- Sin excesiva presión o separación
- Excesiva presión se traduce en Blanching; modificar CPP
- Cualquier modificación de CPP podría tener efecto en la sagita; salvo por.....





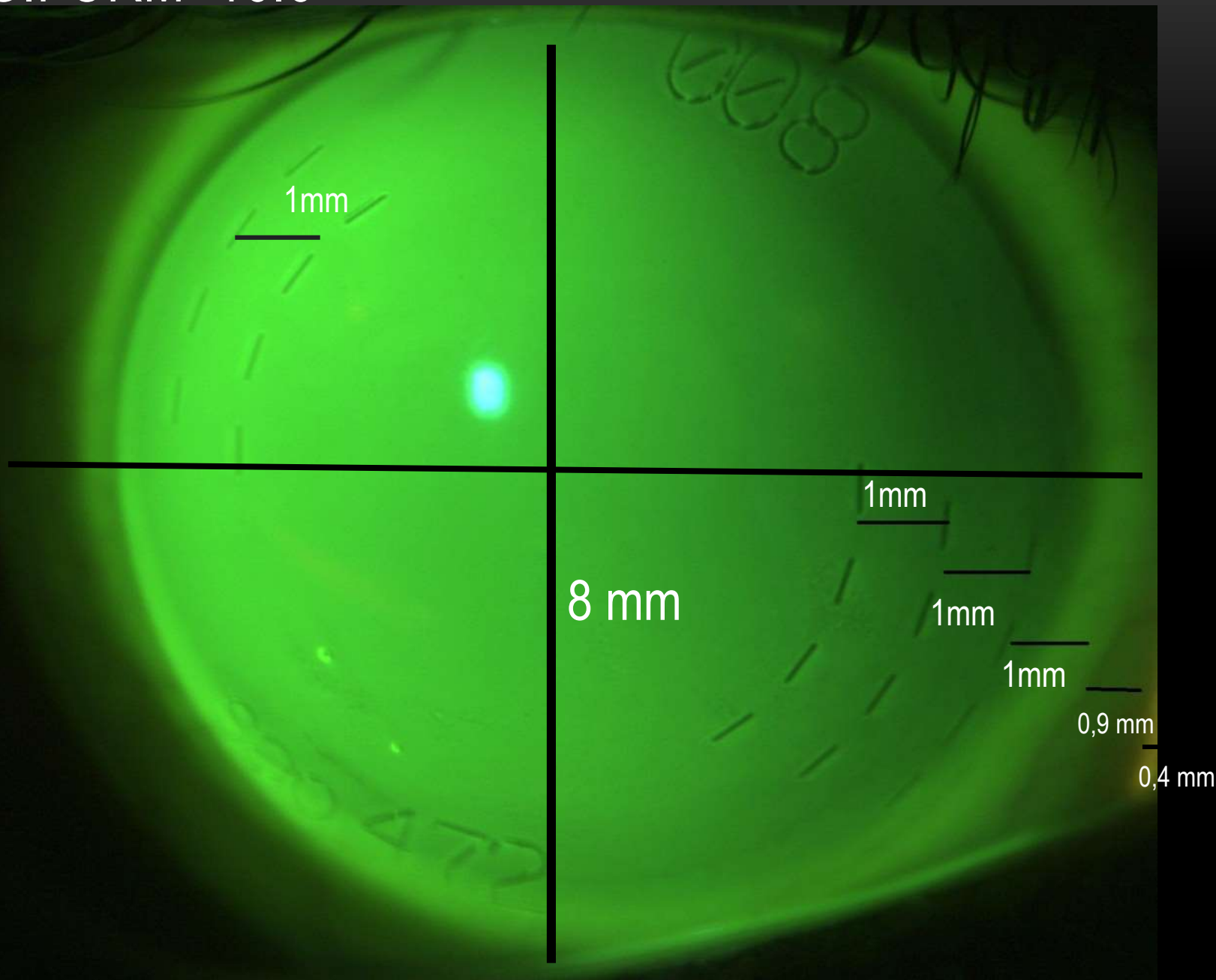
NOTCH O MUESCAS A MEDIDA DE FABRICA



ATERRIJAJE

- Evaluar en los 360 grados
- Determinar si se necesita Toricidad
- 0 modificacion por Cuadrante; Precision Total

DIGIFORM 16.6





OD	CB 8,0	8-10	10-12	12-14	14-15,8	15,8-16,6	
0	-100			-100	+50		
90					+50	+300	
180		-200	-100		+50		
270					+50	+300	

MODIFICACION DE CADA CUADRANTE EN CADA
SECCION DE 1 MM, EN MICRAS

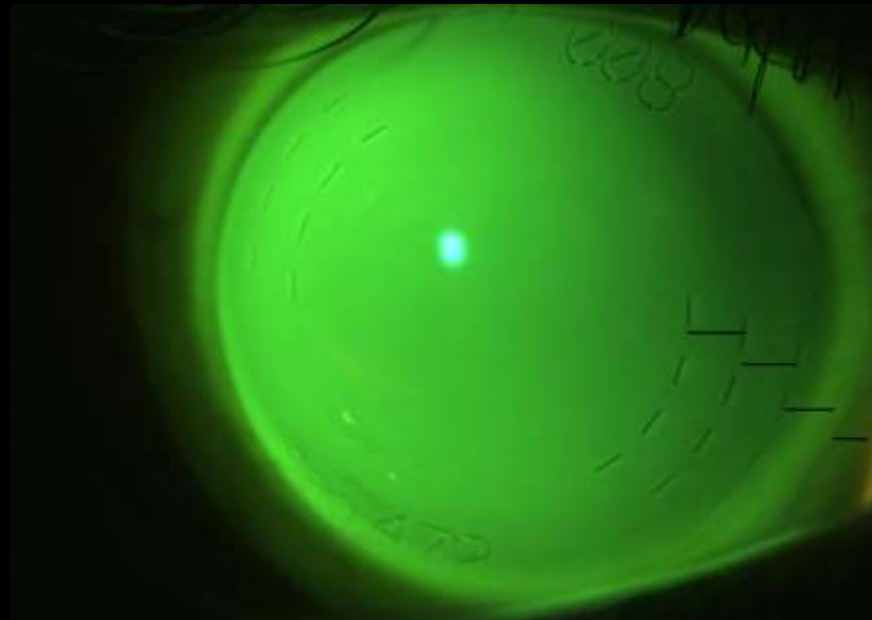
CONTROL TOTAL

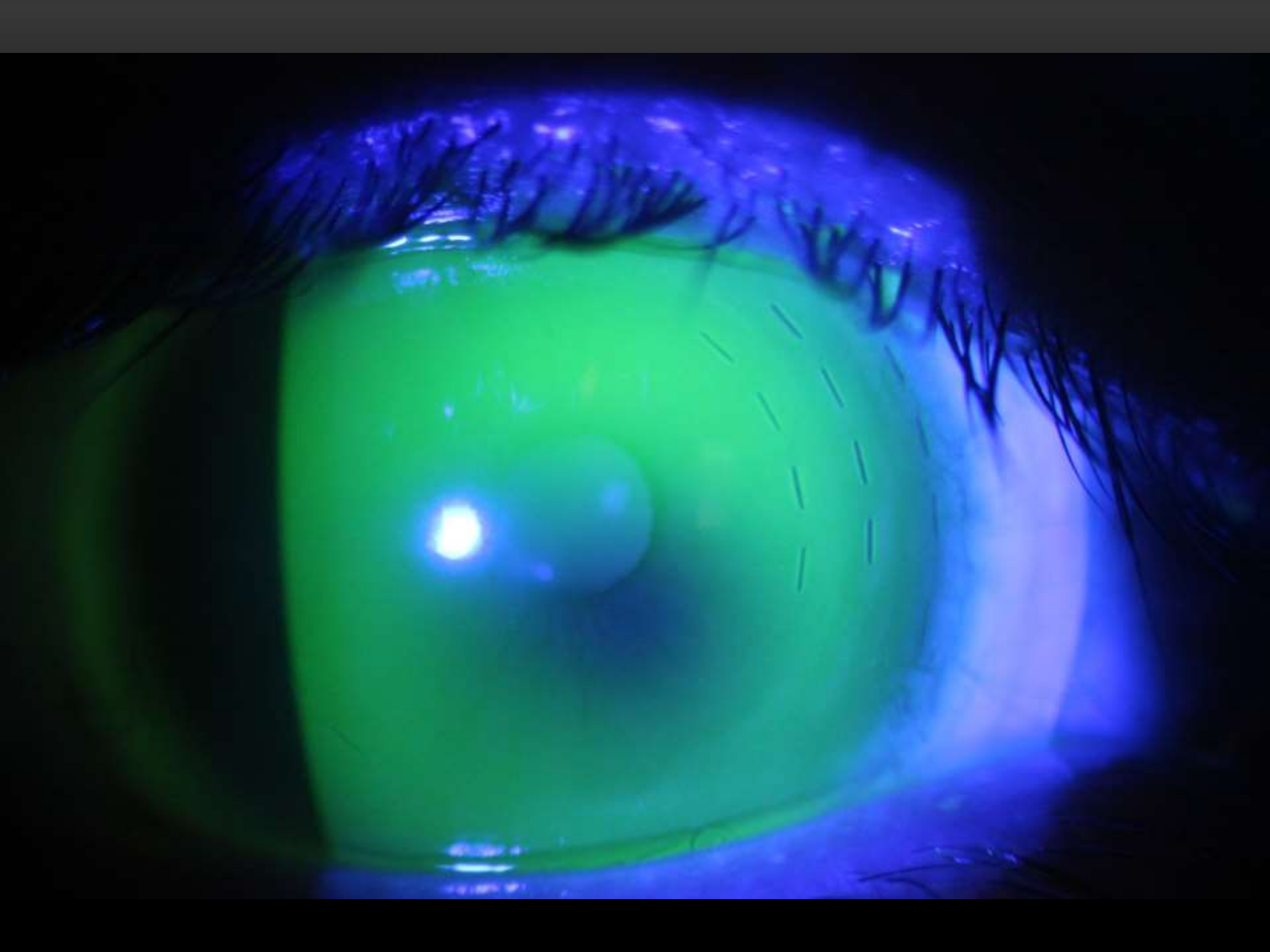
CONTROL TOTAL

Modificacion en lentes

- Hechos en Unidad de Micras

- Cambios Minimios: 25-50 μ m
- Cambios Medianos: 75-150 μ m
- Cambios Abgresivos: >200 μ m





4- SREC

- Recien nos preocupamos de la vision
 - Queratometria sobre LC; lecturas esfericas
 - Lecturas cyl... aumentar espesor
 - Cyl con k esferica requerira toricidad frontal
-

OSCILLATING TOOL TECHNOLOGY (OTT)

- Supports base curve torics in multiple zones as required
- Toric optic zones in aspheric curves
- Front toric
- Bi-toric
- Atoric
- Spherical
- Crescent slab-off geometry
- Double slab-offs
- Prism ballast software
- Points files
- Quad symmetrical
- Front surface weighting
- Toric blends
- Circular or elliptical optic zones

FACIL ADAPTAR FACIL COMUNICACION LAB

12.5 mm cornea

Por que es importante definir DHIV?

- DHIV define cual curva del lente estara sobre limbo
 - <12.0mm 2nd curve is the limbal curve
 - >12.0mm 3rd curve is the limbal curve
 - Allows lab to make best adjustment to address limbal issues vs edge issues

3rd hash= 12mm



OPTIMIZED OPTICS

Un solo Set de Prueba para todo diseño:

- Spherical
- Front-Toric
 - Markers of one dot or two dots at 12 o'clock
- Multifocal optics:
 - Similar to fitting soft multifocal lenses
 - Center near design
 - Control zone size and add power





Base Curves	4.25mm-10.00mm
Sagittal Depth	7940 μ m-4208 μ m
Power	-30.00 - +30.00 diopters
Options	<ul style="list-style-type: none"> • Fit: bi-toric changes, quadrant specific changes, notching • Optics: Spherical, front-toric power, center-near multifocal
Materials	Optimum Extra (<u>available with tangible hydroPeg</u>), Tyro 97, Boston XO, Boston XO ₂ , Menicon Z, HDS 100

OPTIMUM



tangible™

HYDRA-PEG

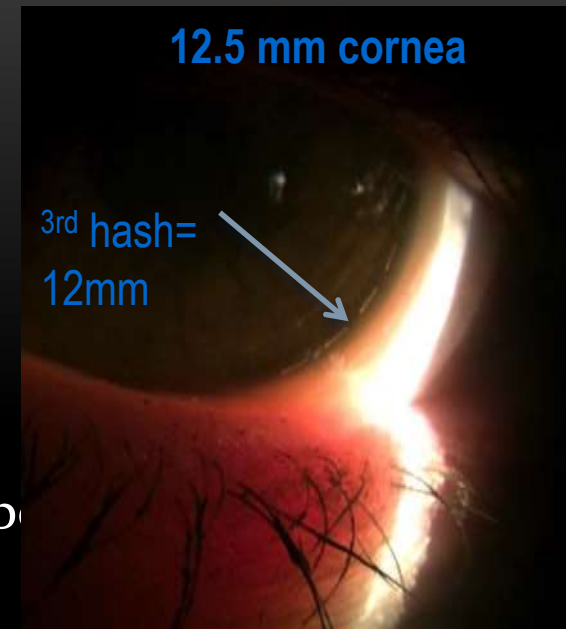
- 30-40nm coating of Polyethylene Glycol (PEG) polymer
- Improves surface wettability and reduces lens deposits
 - Increases tear break up time and helps with dryness issues
- Warranted 1 year against non-wetting

*Clean with non-abrasive/ alcohol free cleaners such as peroxide bases systems or Unique PH

- Avoid Boston, Lobob or Progent cleaners

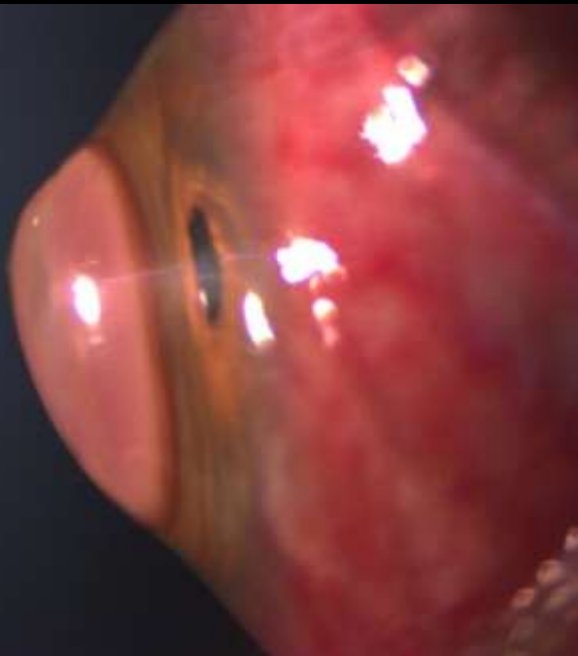
Tips para el exito

- Mida el DHIV
 - Ayuda a definir cual curva estara sobre el limbo
- Escoja el mejor lente desde la caja de prueba
- Deje el lente de prueba puesto unos 30 minutos a fin de que se asiente bien
- Chequee 360 grados para evaluar aterrizaje

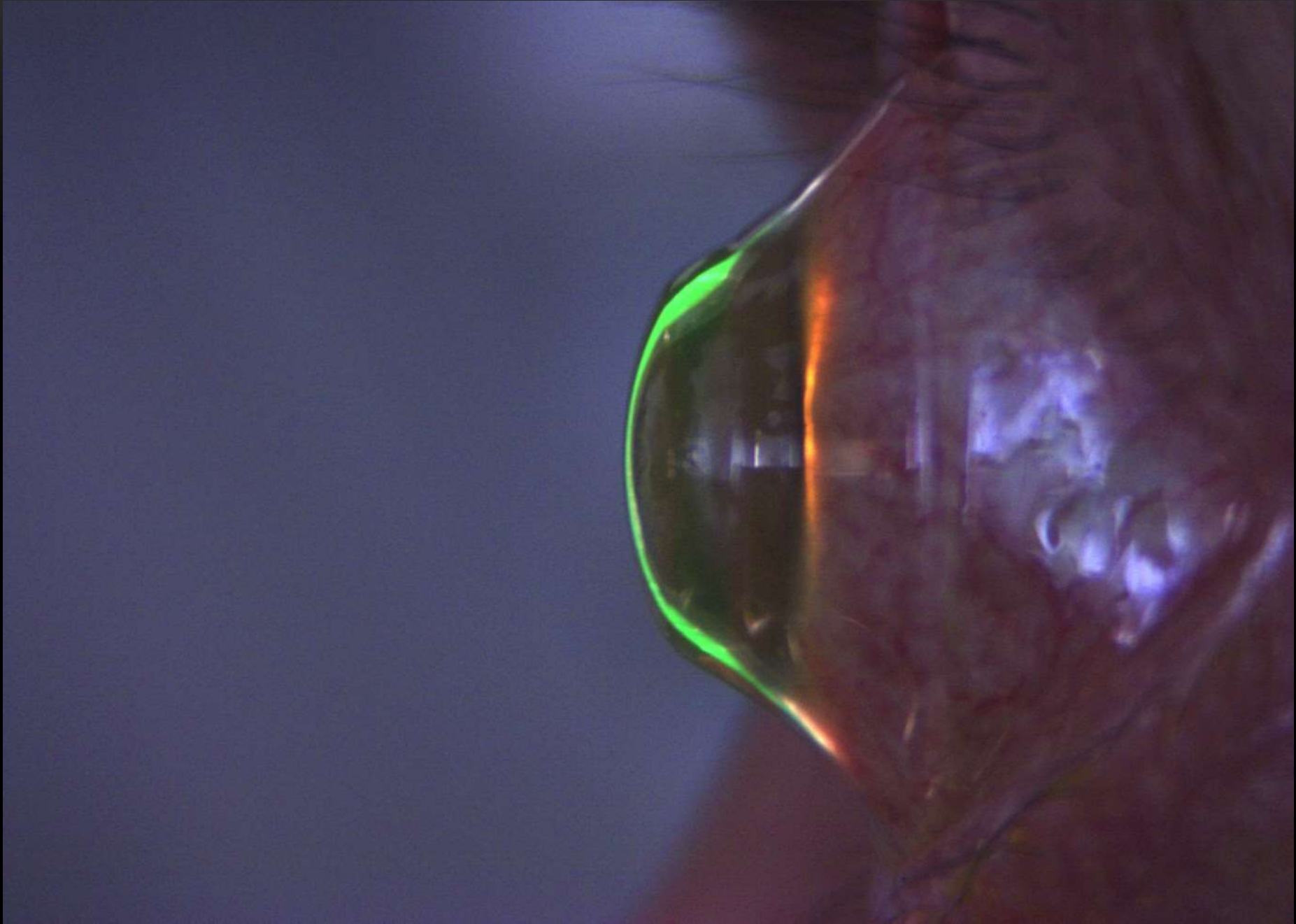


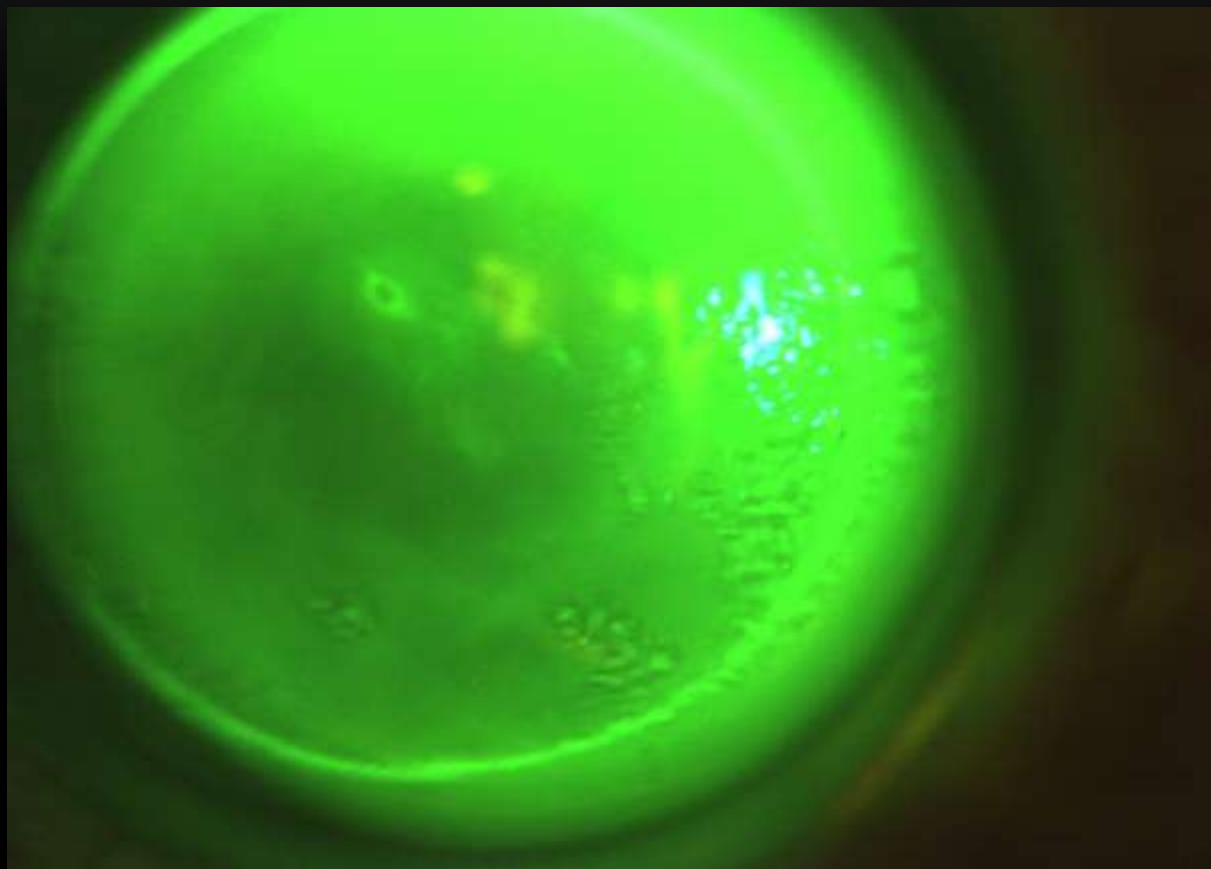
QUERATOGLOBO EXTREMO

- Irrefractable
- Ojo unico

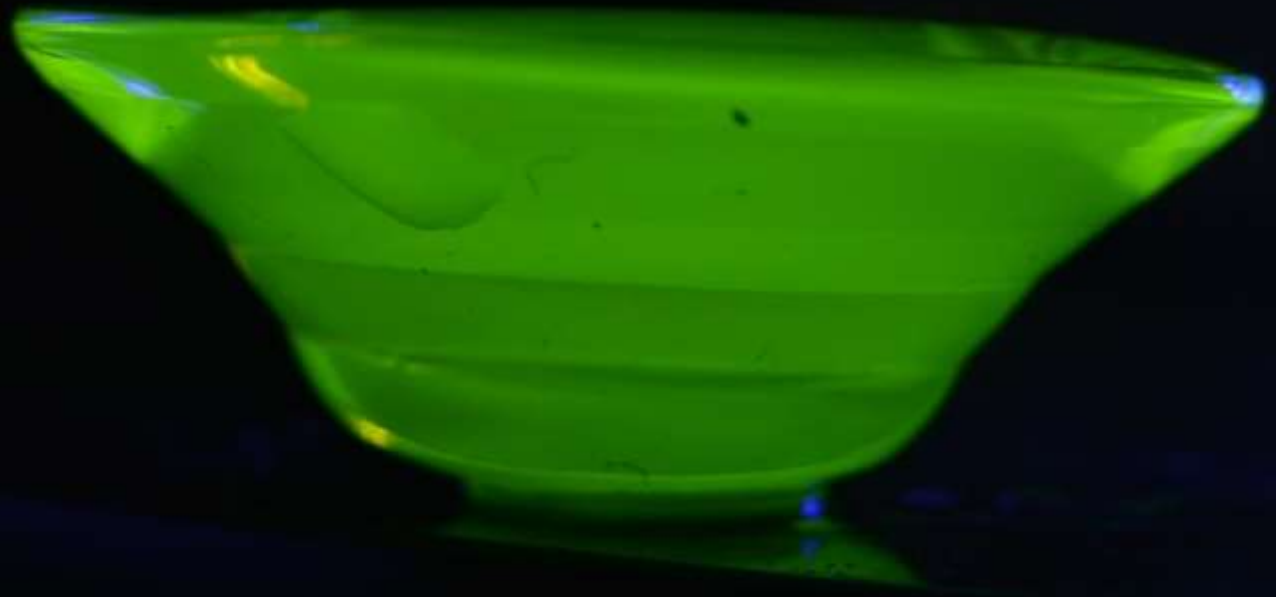








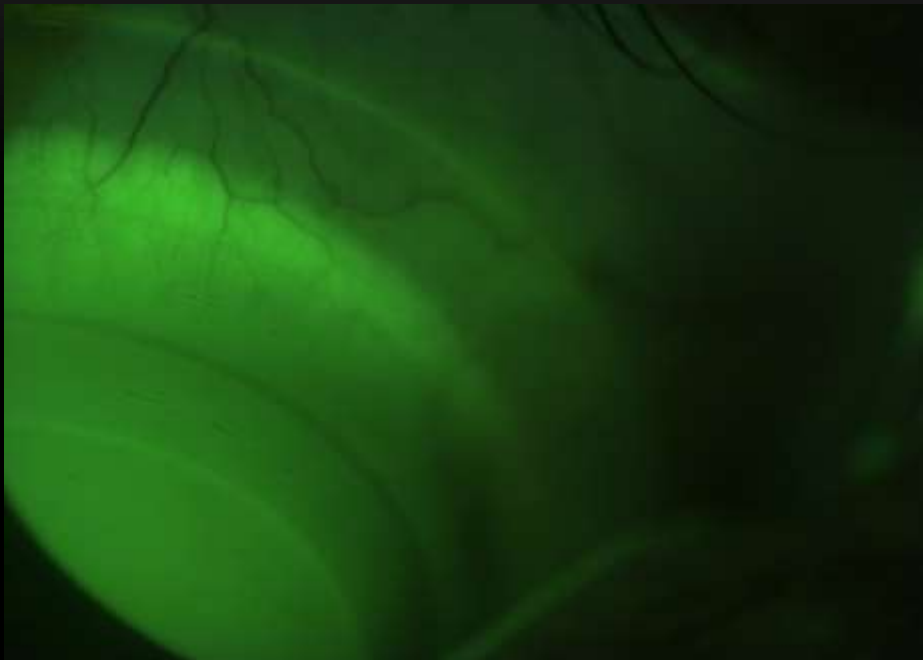
DIGIFORM 18.0 CB 4,97 (67,98) -39,25

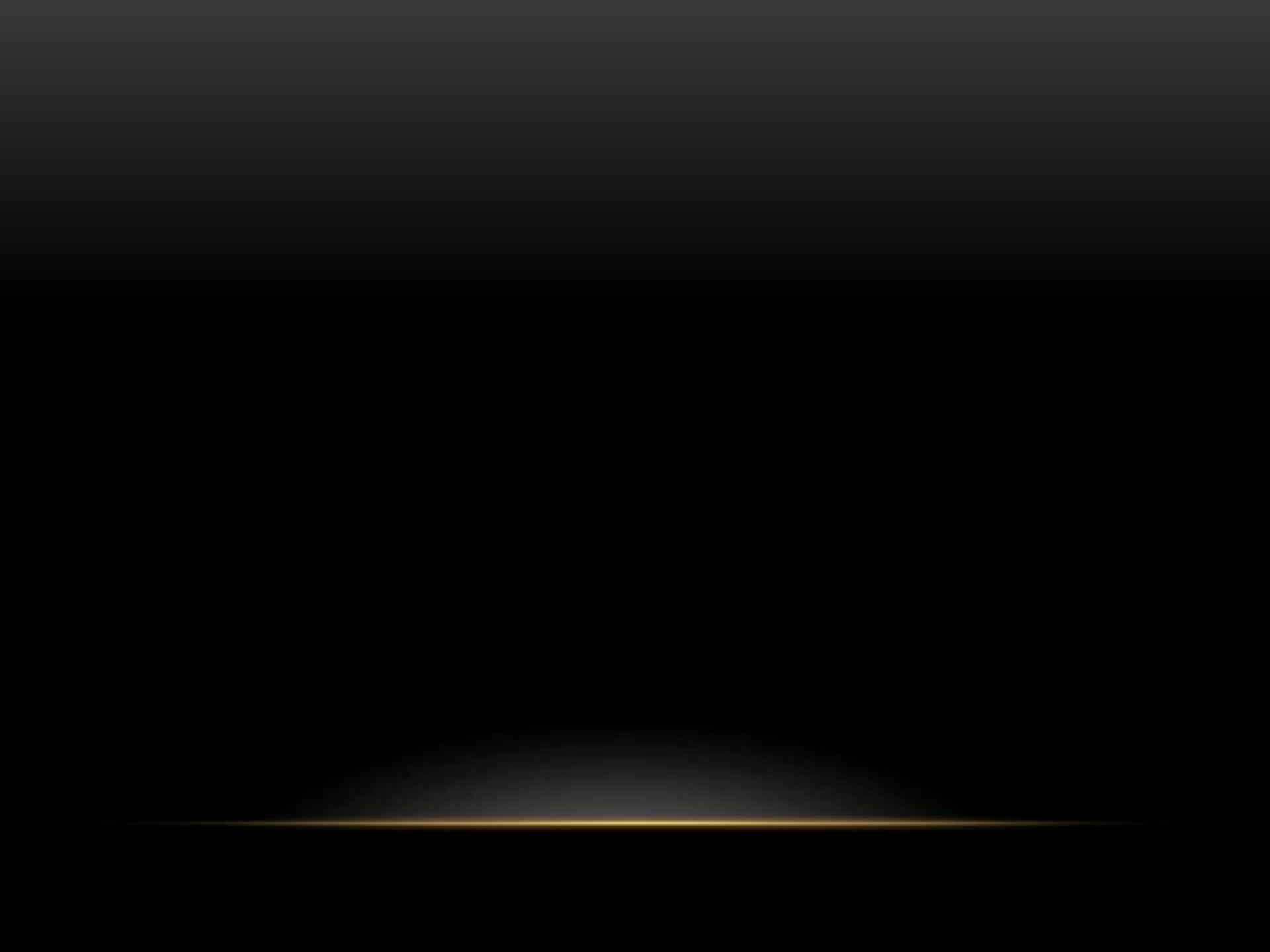


B A DMP SEVERA

- Mejor RX OD -10,00 -4,00 90 av 20/100 OS -10,00 -4,00 100 av 20/70
- Usuaría desechables
- Luego esclerales hace 4 años
- Ahora diseño personalizado Digiform 16.6
- 50,00 -22,50 -1,25 10 16,6 av 20/40+
- 46,55 -15,50 16,6 av 20/20
- LP perfecto en ambos ojos

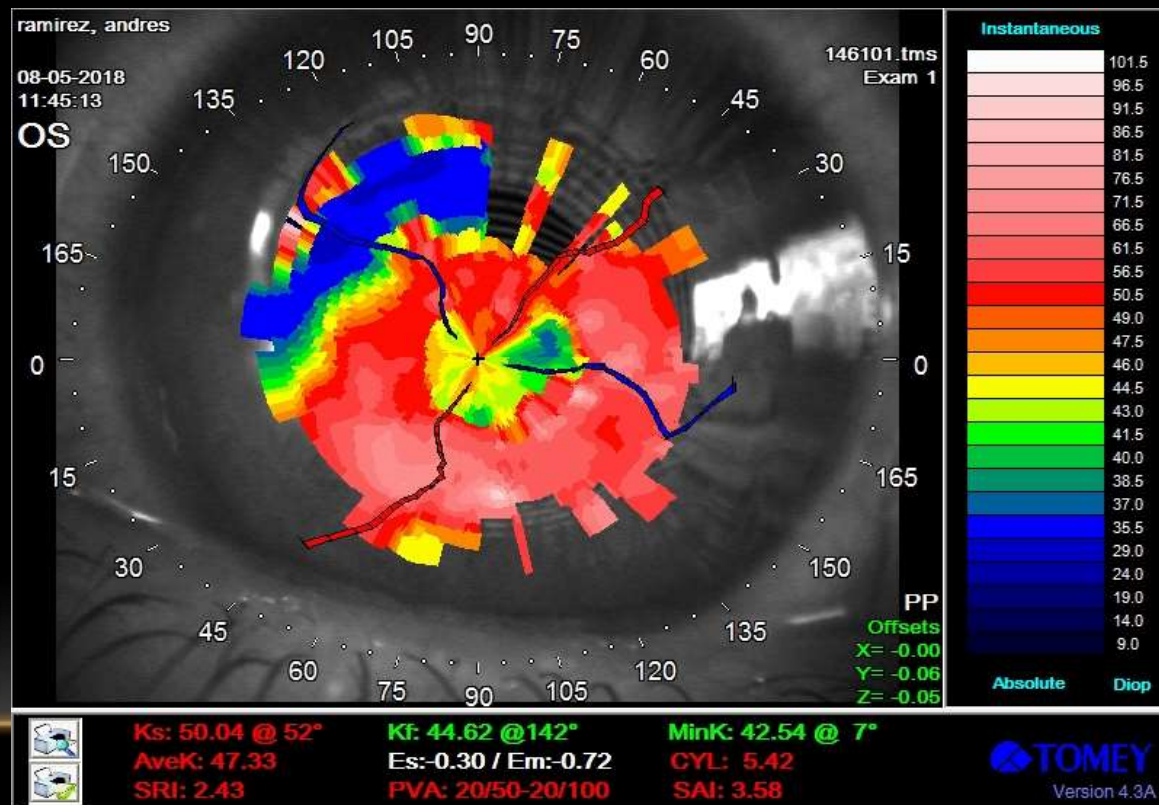
DMP

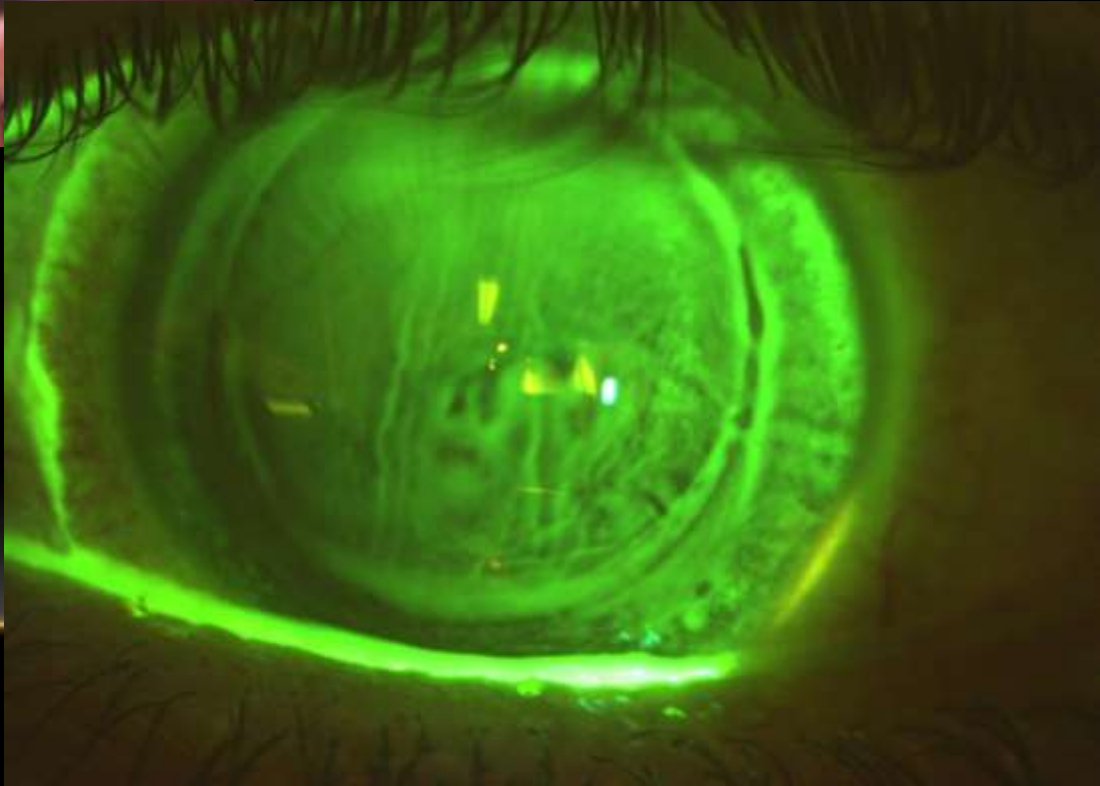


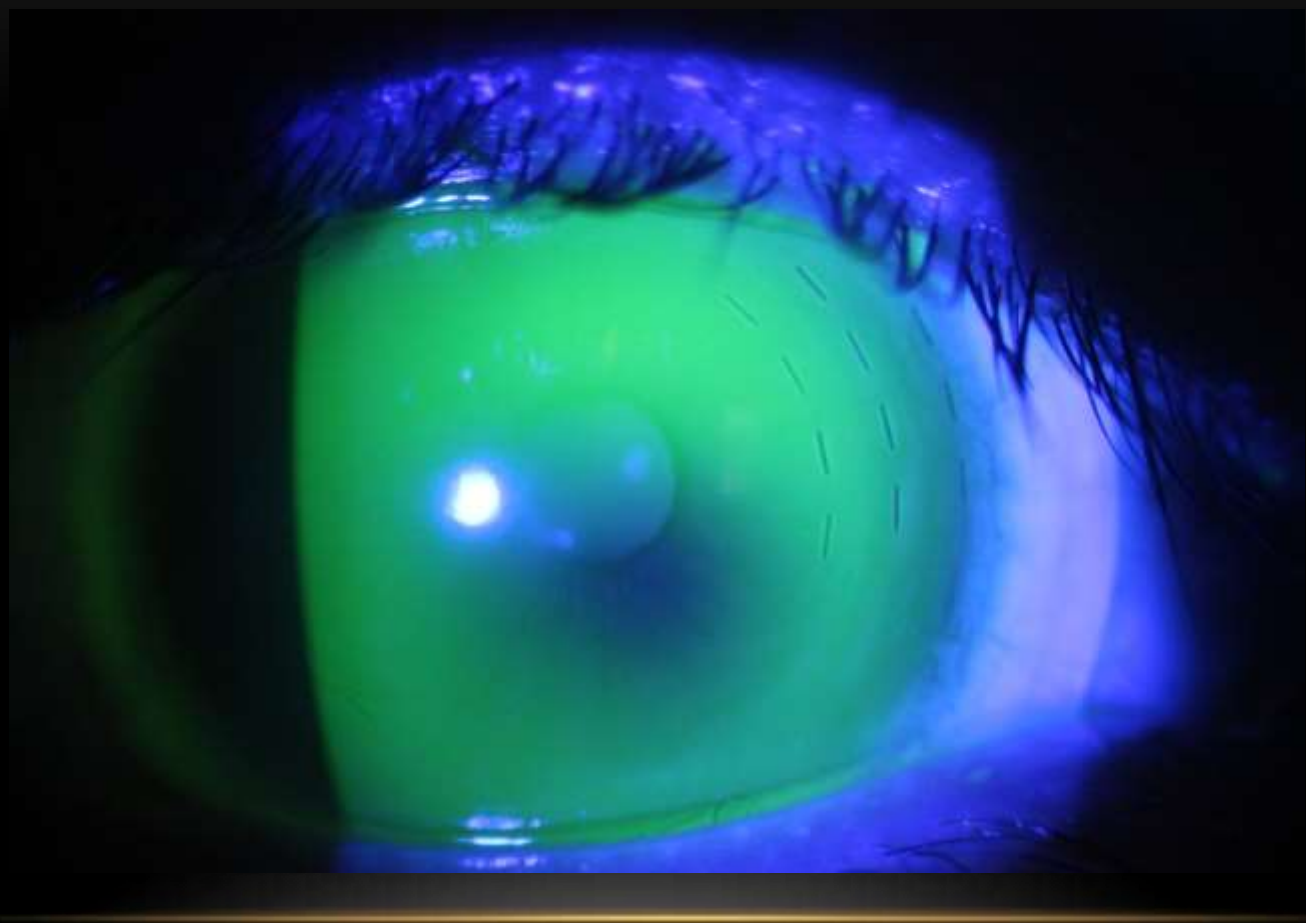


AR ECTASIA SECUNDARIA LASIK;??

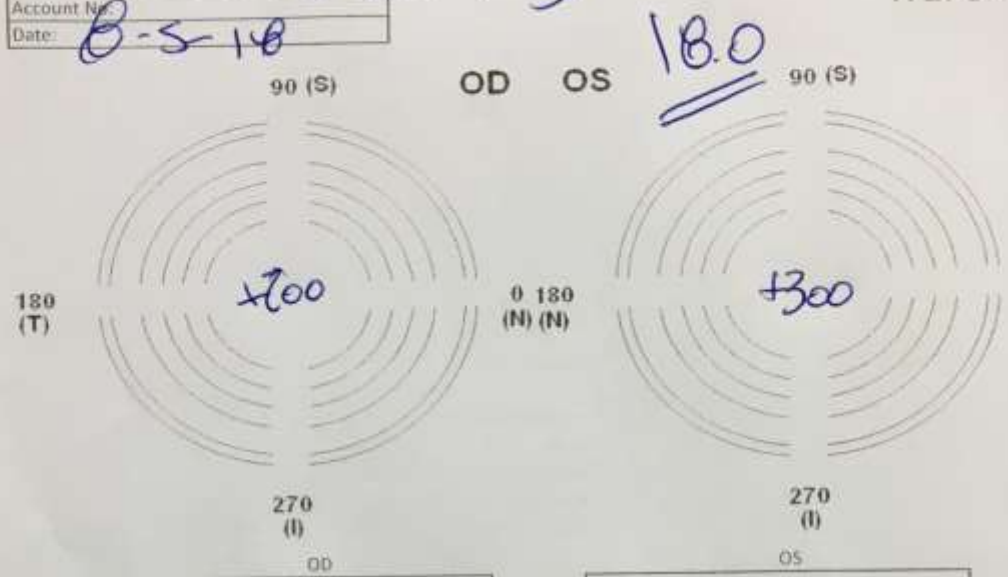
- Asintomatico
- Lasik hace 10 años
- 16 horas diarias
- Hechos en USA 2 años atrás
- irrefractable







Patient Name: Andres Ramirez TruForm 18 Worksheet
 Account No: _____
 Date: 8-5-18



K readings		K readings	
Bc	Pwr	Bc	Pwr
<u>50.00</u>	<u>-9.25</u>	<u>52.00</u>	<u>-11.25</u>
<u>-6</u>	<u>50</u>	<u>-6</u>	<u>50</u>
Trial lens		Trial lens	
O/R		O/R	

OD	Base curve	8mm	10mm	12mm	14mm	17mm	18mm
0	<u>+200</u>						
90	<u>v</u>						
180	<u>u</u>						
270	<u>v</u>						

OS	Base curve	8mm	10mm	12mm	14mm	17mm	18mm
0	<u>+300</u>						
90	<u>v</u>						
180	<u>v</u>						
270	<u>v</u>						

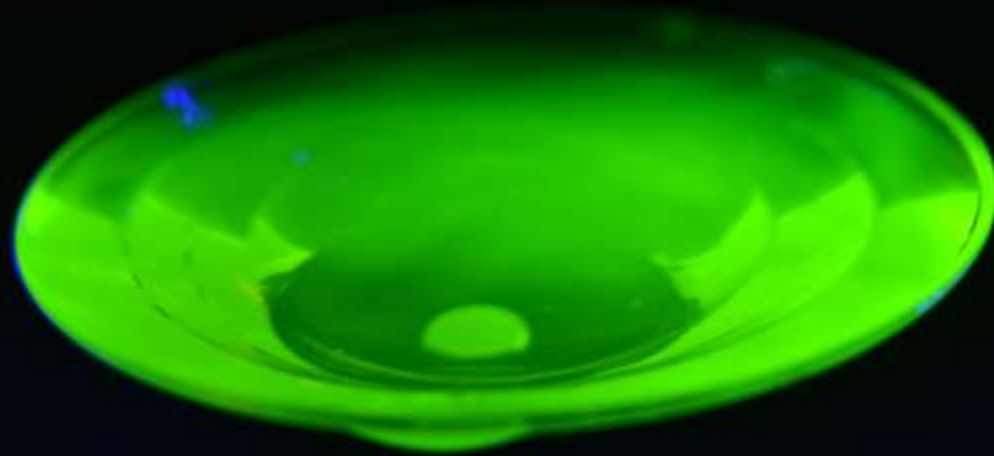
Legend:
 + = Increased Clearance in microns
 - = Decreased Clearance in microns

Example:	Base curve	8mm	10mm	12mm	14mm	17mm	18mm
0	<u>+100</u>			<u>+100</u>			<u>-50</u>
90	<u> </u>			<u> </u>			<u> </u>
180	<u> </u>			<u> </u>			<u> </u>
270	<u> </u>			<u> </u>			<u> </u>

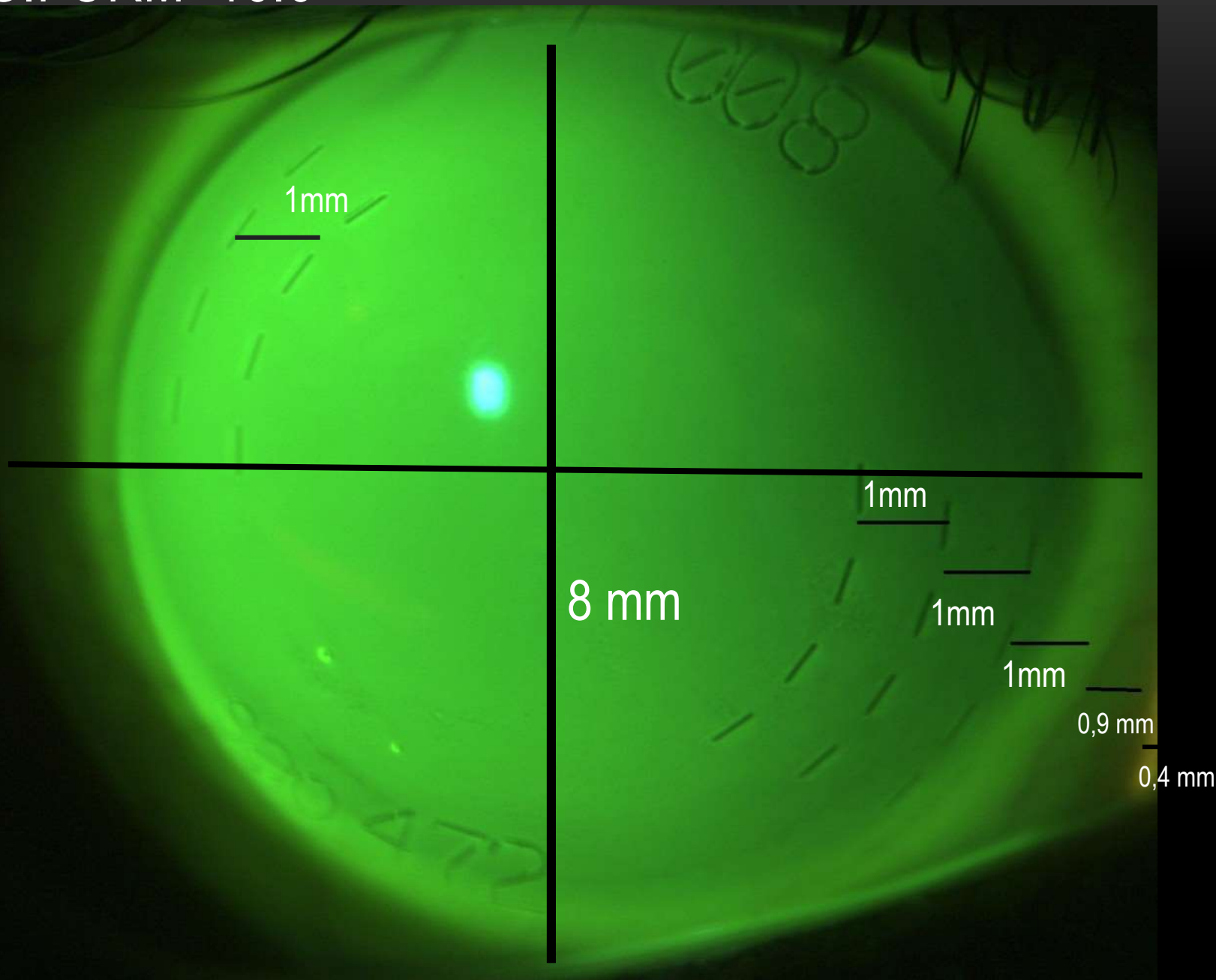
*Note in the above example, the changes are 360 degrees. Base curve is steepened 100 microns. @ 12mm Diameter there is 100 microns more clearance. Curve @ 10-12mm is flattened.

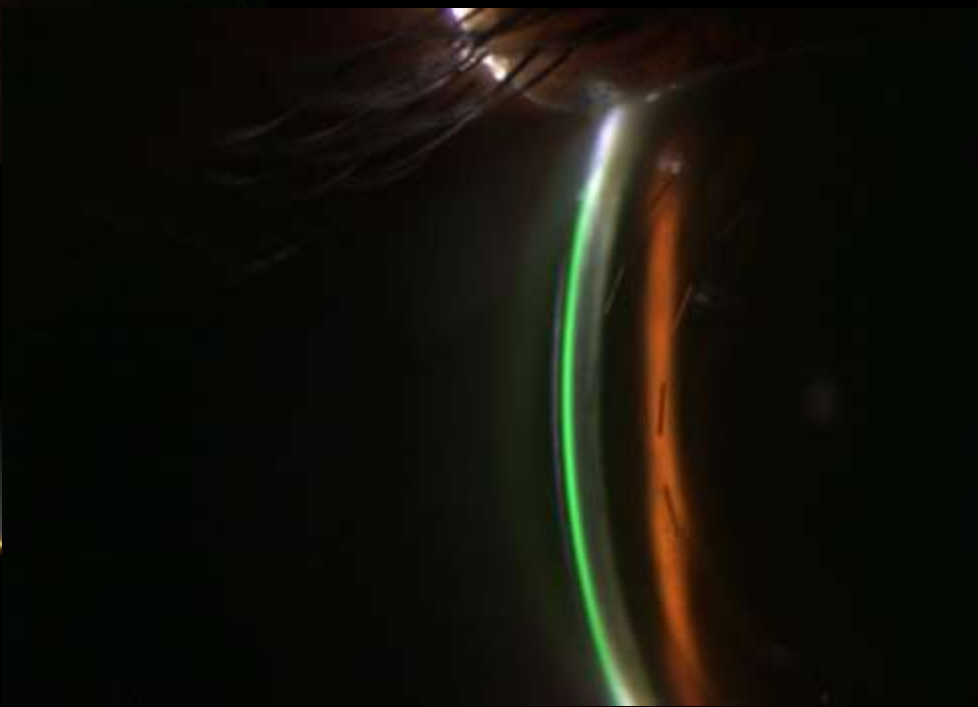
VIDEO ESCLERALES

DIGIFORM 16.6 18.0
TRUEFORM



DIGIFORM 16.6

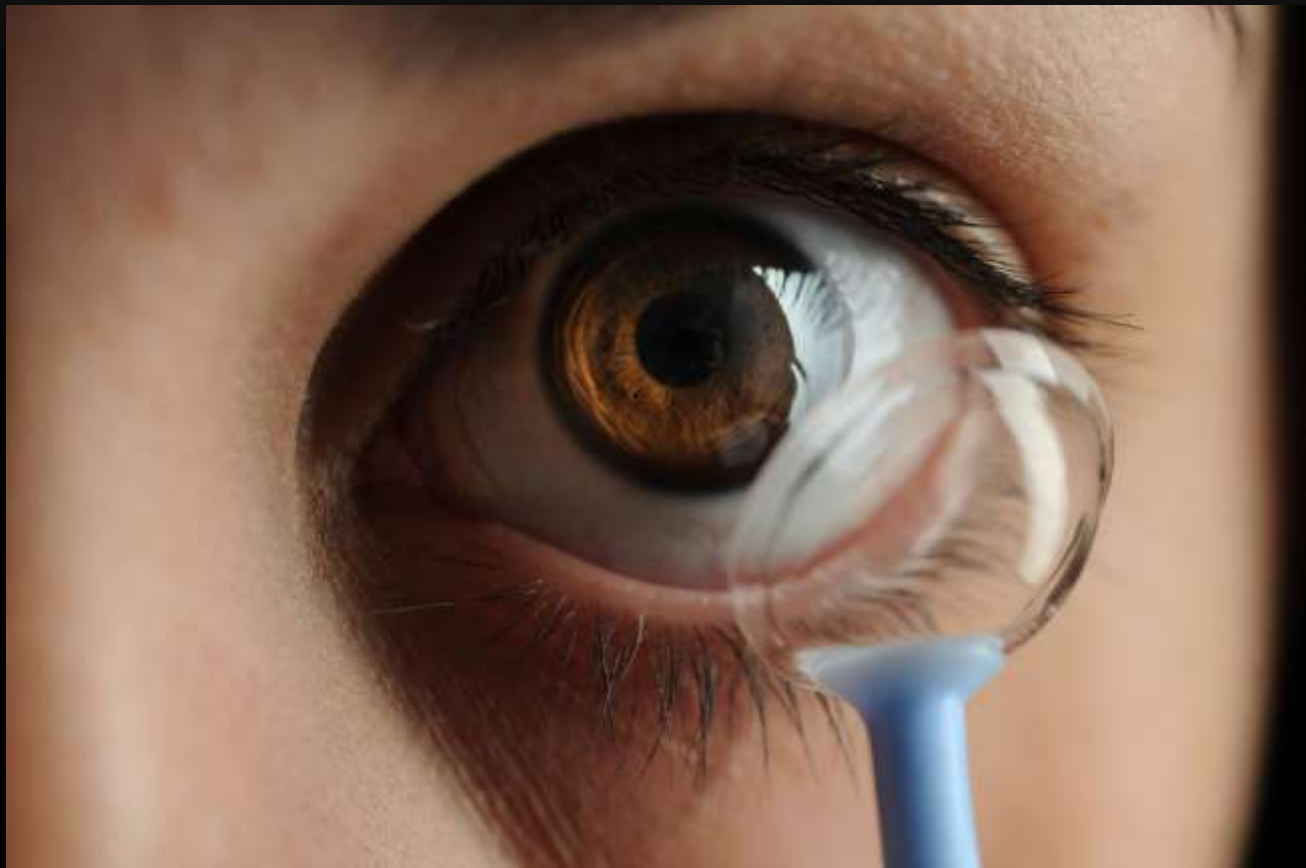




OD	CB 8,0	8-10	10-12	12-14	14-15,8	15,8-16,6	
0	-100			-100	+50		
90					+50	+300	
180		-200	-100		+50		
270					+50	+300	

MODIFICACION DE CADA CUADRANTE EN CADA
SECCION DE 1 MM, EN MICRAS

CONTROL TOTAL



GRACIAS

16.6

digiform™
covering your eye with comfort