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Scleral prosthetic lenses

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The case study begins with the fifty-one years-old-patient with double corneal transplant in right eye. First corneal transplant in 1993. Rejected transplant in few months. Cornea turned into leukomatous. Second corneal transplant by the end of 1993. Successful transplant until 1999, when patient started losing vision, cornea became totally leukomatous and irregular. Started with deformation of corneal limbus and the eyeball descended to lower eyelid (keratoglob). In 2016, I met the patient for the first time with ophthalmologist diagnosis of eyeball evisceration. Thus the patient was with deep depression. Due to the irregular and deformed cornea, neither an ocular prosthesis nor soft prosthetic lens could be adapted. So, I tried with a scleral lens. In the first test, the general condition of her irregular cornea improved considerably, permitting a good tear film flow between the cornea and the lens. I checked again her cornea and there was neither vision nor light reflection. I used a Scleral lens Atlantis by X-Cell with high permeability and adhered in the internal face a soft lens with black pupil and iris hand painted. Thus, the landing in the sclera was improved and was not ejected. I adapted a scleral lens X-cell Atlantis, base curve 7.50, diameter 17.5 double flap. The patient felt very comfortable, with improved quality of life, could insert herself at work again and now her life has completely changed for the better.

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