

## **Bladeless LASIK – What’s the hype?**

If you’ve been thinking about having LASIK eye surgery, you’ve probably heard about bladeless or all-laser LASIK. For many people, the thought of any eye surgery inevitably raises the fear of losing their sight. Advertisements for bladeless LASIK eye surgery promote its safety features and superior results versus traditional LASIK in hopes of quelling these anxieties. Even though LASIK is one of the safest and most effective surgical procedures performed, it is widely believed that of the millions of LASIK candidates in the United States, many of them choose not to have surgery because of the fear of vision loss or complications. But as with most new technology, bladeless LASIK usually carries an additional cost at most surgeons’ practices. Is it worth the extra cost?

First, let’s review the differences between standard custom LASIK and bladeless LASIK. The discussion of standard LASIK versus bladeless LASIK surrounds the first step in any LASIK procedure, the creation of a hinged corneal flap. Traditionally, the eye surgeon creates the flap using a bladed microkeratome instrument. In bladeless or all-laser LASIK, this hinged flap is created by a femtosecond laser, an FDA approved sophisticated laser technology. The femtosecond laser uses tiny, rapid pulses of laser light to create a layer of bubbles just beneath the surface of the cornea, making the hinged flap. In both procedures, the excimer laser is then used to precisely shape the cornea according to each patient’s prescription.

Since the exact specifications for flap size and thickness are preprogrammed into the laser by the eye surgeon, bladeless LASIK may allow some high risk patients to be treated more safely. This flexibility may benefit patients with thin corneas or high prescriptions, and may also qualify some patients for surgery after other factors have disqualified them as candidates for traditional LASIK eye surgery. Complications with either LASIK or bladeless LASIK are extremely rare (far less than 1%), but most complications that do occur involve the flap creation using a microkeratome. There are advantages and disadvantages to each surgery, your doctor will guide you in this regard.

Clinical studies and research show that the long term visual outcomes of both LASIK and bladeless LASIK are very similar. Some patients may experience a slightly slower healing time after undergoing bladeless LASIK than standard LASIK. Additionally, bladeless LASIK takes a little more time than LASIK using a microkeratome.

Good candidates for either LASIK surgery at least 18 years old with stable vision, are not pregnant or nursing, do not suffer from an autoimmune disorder, as well as other considerations. Your candidacy for standard or bladeless LASIK can only be determined by your eye doctor.

There is no doubt that the debate will continue about the advantages and disadvantages of bladeless or all-laser LASIK. Our belief is that each technique has its unique set of risks and benefits, there is no one-size-fits-all solution. As with any procedure, the technology is only as good as the surgeon using it. To achieve the best possible result with either LASIK or bladeless LASIK, choose a qualified surgeon you trust.

## **Our Refractive Surgeons**

**Dr. Michael Hodkin** is board-certified ophthalmologist and fellowship trained cornea specialist trained in cornea, cataract and refractive surgery. Dr. Hodkin practices in Fort Wayne, IN.

**Dr. Rex Parent** is a board-certified ophthalmologist specializing in cataract and refractive surgery. Dr. Parent practices in Fort Wayne, IN.

**Dr. Michael Scanameo** is a board-certified ophthalmologist and cataract and refractive surgery specialist. Dr. Scanameo practices in Muncie, Marion and Kokomo, IN.

**Dr. Kevin Scripture** is a board-certified ophthalmologist specializing in cataract and refractive surgery. Dr. Scripture practices in Richmond, IN and Greenville, OH.

**Drs. Paul Gill, Richard Mangan, Karen Skurner, James Stewart and Gregory Zink** are medical optometrists specializing in refractive consultations and the pre and post operative care of surgical patients.