New perspectives in non-invasive keratoconus treatment: Single or combined surgical strategy to improve vision through cornea reshaping

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Corneal collagen cross-linking (CXL) is being used worldwide as a first-line treatment for keratoconus, pellucid marginal degeneration, and post-LASIK ectasia. CXL has been shown to be both safe and effective and nowadays patients as young as 10 routinely undergo this form of treatment when they are first diagnosed with keratoconus. As expected, CXL in the early stages of disease is more successful than in the advanced stages. Treatment may help prevent the corneal thinning and apical scarring typical of advanced keratoconus. After CXL, many patients can resume wearing their contact lenses in a few days or a few weeks. Their vision gradually improves weeks to months after treatment, as the cornea undergoes remodeling. In some cases, improvement continues for many years. Evolution of CXL machines alone was incredible and in the near future topography-guided cXL treatment will be available. More than this several procedures that can be actually combined with CXL, such as topography-guided PRK, intracorneal ring segments, and phakic IOLs. The actual target of CXL research is to evaluate various methods of cross linking to provide better option to patients not only for halting keratoconus but, when possible, to improve corrected and uncorrected visual acuity.

Biography
Miguel Rechichi has completed his training in ophthalmology and his PhD from Magna Graecia University and Diploma of Specialist Superior in Ophthalmology from University of Lugano (Switzerland). He’s actually founder of corneal and refractive Surgery service of Eye Center Clinic in Catanzaro, Italy. He was a pioneer of crosslinking clinical application and actually is involved in developing new accelerated cXL protocols and topography guided crosslinking for which he’s invited as opinion leader to several meetings. He has published several papers in reputed journals and has been serving as an editorial board member of repute.

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