

HIGH MYOPIA

Shortsightedness, or myopia, can come in a wide range of prescriptions.

You can tell how shortsighted you are by testing how far in front of you objects start to get blurred.

When you are highly shortsighted, this focal point can be less than 12 centimetres, meaning your prescription is over -8.00 dioptres. For the purposes of refractive surgery this is important, because laser vision correction does not perform well above this level.

The best surgical options for people with high myopia involve the use of intraocular lens implants. These lenses can correct your vision with a high degree of predictability, including any astigmatism as well.

There are two possible ways to do this.

The first is to implant an intraocular collamer lens implant (ICL). This is a very thin lens that sits behind the pupil, but in front of your natural lens. This means that your natural lens continues to work normally, allowing you to see both in the distance and up close as needed. However, like many of us, once you reach your forties you will still need to consider reading glasses for near vision when the time comes.

Another option is to replace your natural lens with an artificial lens. This is called a refractive lens exchange and like ICL surgery, the implant used can correct any astigmatism present.

Both of these procedures are performed under light sedation in a day surgery setting and recovery is rapid.

Age plays a factor when recommending one procedure over the other.

Retention of the natural lens using ICL implants maintains reading vision in younger people and is preferred.

Whereas in older people, lens replacement surgery, or refractive lens exchange, is more suitable.

Typically 50 years old is the transition age, but this depends on individual circumstances.

People over 40 years of age having intraocular lens implant surgery and anyone undergoing refractive lens exchange, need to consider the implications for their near vision. No longer will there be a near focus point less than 12 centimetres. Most people choose to wear reading glasses, but another option is to create blended vision, where one eye sees for the distance and the other for near. This is achieved by carefully planning the power of the lenses to be implanted.

Once you reach 40 years of age you start to lose the ability to adjust your focus between near and far. Termed presbyopia, this is an inevitable fact of life but has important implications for laser vision correction in shortsighted people as you will likely give up some reading ability to gain better distance vision.

A strategy used with laser vision correction to minimise the effects of presbyopia is to create blended vision where one eye is left slightly shortsighted to give near vision and the other is corrected for the distance. This can be very satisfactory for many people but it is not suitable for everybody. There are pre-treatment tests that can help you decide whether this approach would be suitable for you.

For further assistance, or to take the next step in your visual journey, please don't hesitate to book a Pre-Assessment Tele-Consultation or an in-house appointment during which we can further assess your individual eye health and refine your options.

We're here to help you see the possibilities.