

ICL

IMPLANTABLE COLLAMER LENS INSERTION

DR NIKHIL KUMAR

CATARACT AND REFRACTIVE SURGEON BMED,
GRAD DIP (REFRACTIVE SURG), MPH, FRANZCO
CORNEA/REFRACTIVE FELLOWSHIP
(UNIVERSITY OF TORONTO)



Told laser vision correction is not for you? Don't lose hope, there is another alternative. Find out more about ICL surgery.



Nik has a specific interest in conventional and laser assisted cataract surgery, laser vision correction, alternatives to laser surgery, cornea transplantation, pterygium surgery and the management of keratoconus.

What are implantable collamer lenses (ICL)?

An ICL is an extra lens inside your eye used to correct your vision. It does not replace the natural lens inside your eye. The lens is soft, flexible (like a contact lens), however the crucial difference is that it is implanted inside your eye, as opposed to contact lenses which is worn on the surface of the eye.

It is a highly biocompatible micro-thin implant that works by changing the way light is bent in the eye, similar to how glasses and contact lenses correct your sight, except without all the fuss!

Am I a suitable candidate?

Individuals between the ages of 21 and 45 with healthy eyes who do not qualify for laser vision correction would most likely benefit from ICL surgery instead. If you have a high level of short-sightedness, thin corneas or severely dry eyes, you may be an excellent candidate for ICL surgery. The ICL can also correct for long-sightedness and astigmatism. Your prescription must also be stable.

To find out whether an ICL is the best option for you, schedule a consultation today.

Nik graduated in Medicine from the University of Newcastle in 1998, then completed an ophthalmology residency at the Sydney Eye Hospital and undertook subspecialty fellowship training in Cataract, Cornea and Refractive Surgery at the University of Toronto in 2009.

Nik is a Clinical Senior Lecturer in Cataract, Refractive and Cornea Surgery at the Australian School of Advanced Medicine, Macquarie University.

He is a member of the Australian, American and European Societies of Cataract and Refractive Surgery and Cornea Societies. He has published numerous peer-reviewed papers and book chapters involving his specialty interests.

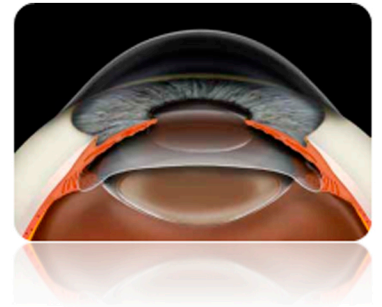


Is it permanent?

The ICL is designed to be permanent, however it can be easily removed if necessary and therefore has the advantage of being reversible. The ICL can be removed if there is a significant change in prescription or as the patient ages and decides to have cataract surgery. In this last example, the ICL will be removed along with the cataract and a new intraocular lens will take its place.

How does it differ to other laser correction procedures?

Unlike other laser vision correction procedures such as LASIK/ASLA/SMILE, this procedure does not remove any tissue from the cornea (front surface of the eye). Rather than re-shaping the cornea to allow the eye to focus more clearly, an ICL is implanted inside the eye (just behind the iris – the coloured part of your eye). As the cornea is virtually unaffected, this procedure is more suitable for those with significant dry eye syndrome or those with somewhat irregular shaped or thin corneas who do not qualify for laser procedures that modify the cornea (LASIK/ASLA/SMILE). Since no tissue is removed or reshaped, the ICL provides an optimal alternative to laser eye surgery, maximising quality of vision. The Visian ICL procedure is not associated with dry eye and thinning of the cornea.



How is the procedure done? What can I expect on the day?

Once you have been prepared for surgery, your eye will be fully dilated and anaesthetised using a series of topical drops. A micro-incision is made at the side of the cornea. The incision is minuscule and there are generally no sutures required as it will recover naturally on its own. The ICL is then inserted. You will arrive at the hospital and be discharged that very same day. The procedure itself will only take about 20 minutes but you will remain at the hospital for several hours. You will be comfortable as you will be attended to by the anaesthetist prior to surgery. You will need to arrange for someone to take you home as you will not be able to drive. You will also need to attend any follow up appointments with Dr Kumar to check your healing and progress.

What type of ICL lens is used and what is it made from?

STAAR Surgical uses the Visian Implantable Collamer Lens (ICL) made from Collamer. This is an advanced lens material that is biocompatible with the eye (this means the body will not recognise it as a foreign object). The ICL is available to correct short-sightedness, long-sightedness and astigmatism. Over 200,000 Visian ICLs have been implanted around the world and the procedure exhibits an excellent safety profile. The ICL has UV protection characteristics, thus assisting to prevent the development of UV related ocular problems.

Recovery and visual outcomes from ICL surgery

After the ICL is implanted, patients will likely only need a day or two to recover, with little to no side effects. It is advised to rest and avoid strenuous physical activity after the procedure, but most patients resume normal daily activities within a week. Noticeable vision improvement will occur almost right away, while the lens remains invisible to others, as it's positioned behind the iris. You will also need to use anti-inflammatory and anti-bacterial drops to prevent inflammation and infection for several weeks after the procedure.

