

OPHTHALMIC SURGERY. 1993; 24:612-616

Prilocaine: An Old Anesthetic Agent and a New Ophthalmic Procedure

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ABSTRACT: We present a new local anesthetic for ophthalmic surgery that reduces the risks associated with retrobulbar and peribulbar anesthesia. This method uses topical proparacaine plus 1.5 mL of prilocaine (3%) with felypressin injected into the subconjunctival (sub-Tenon's) space. Of 5210 consecutive adult patients in whom the

technique was used, all demonstrated adequate analgesia. Sixty-three (1.2%) of the eyes required supplemental analgesia, provided by a single injection of prilocaine (0.5 mL). Ecchymosis and subconjunctival hemorrhage developed in 63 (1.2%) of the eyes. There were no instances of ptosis.

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REFRACT. CORNEAL SURG. 1993; 9:452-458

Intrastromal Corneal Ring - One-Year Results of First Implants in Humans: A Preliminary Nonfunctional Eye Study

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ABSTRACT. Background: The Intrastromal Corneal Ring (ICR) is a new investigational medical device designed to alter corneal curvature without surgical intervention in the central cornea. The ring is inserted between the layers of the stroma in the cornea's periphery at two-thirds depth through an approximately 2-millimeter incision. **Methods:** To investigate the safety and refractive effect of implanting an ICR of a given thickness (0.30 mm) and outer diameter (7.70 mm) into human corneas, an ICR was implanted into one nonfunctional eye of each of three patients during the period of March to May, 1991. One predesignated ICR was successfully explanted 5 months after implantation to evaluate the feasibility of ICR removal and to observe the effect of ring removal on corneal curvature. Patients were followed for 1 year after the initial implant procedure.

Results: The three implant procedures and postoperative courses proceeded without any significant complications. Approximately 2.00 D of central corneal flattening was achieved in all eyes. No adverse reactions or other medically significant complications were observed over a 1-year follow-up period. The patient who underwent ICR, removal experienced no perioperative complications, and the patient's cornea has remained stable with a return to its preoperative curvature. **Conclusion:** Although this study is preliminary and limited in scope, we have demonstrated that the ICR can be tolerated safely in the human cornea and results in a flattening of the corneal curvature that is stable for up to a year after insertion. The successful removal of the ICR begins to establish reversibility of the procedure and induced refractive effect.

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AM. J. OPHTHALMOL. 1993; 116:648-649

Lithium-induced Downbeat Nystagmus in a Patient with Arnold-Chiari Malformation

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SUMMARY. Downbeat nystagmus was observed in a 58-year-old woman, who was taking lithium carbonate for treatment of depression. Lithium was discontinued and the symptoms improved markedly, but a magnetic resonance image revealed an Arnold-Chiari malformation.

Over the last ten years several authors have reported lithium as a cause of downbeat nystagmus. Lithium probably affects nuclear structures in the cervicomedullary region, the area disrupted by other causes of this type of nystagmus such as Arnold-Chiari malformation, cerebellar degeneration,

demyelinating disease, and infarction. Our case shows that lithium not only can be the cause of the nystagmus, but also can have an additive effect with other conditions that damage neuronal structures at the cervicomedullary junction by different means such as the mechanical compression in Arnold-Chiari malformation. Although lithium is included in the differential diagnosis of downbeat nystagmus, other causes should be considered, and appropriate investigations should be performed, even when the nystagmus seems to be temporally related to the introduction of lithium therapy.

OPHTHALMIC SURGERY 1994; 25(1): 57

A Modification of Cryosurgery for the Management of Elevated Bled

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ABSTRACT. Elevated blebs may be very troublesome to patients, especially those with only one eye. I describe a technique that can

be used to reduce the size of the bleb without diminishing its function, and, as in the case presented, resolve corneal dellen.

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J. AMERICAN MEDICAL ASSOC. (JAMA). 1994; 271:304-307

Ocular Toxoplasmosis an Old Disease Revisited

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