

XVIII Congresso Internacional de  
Catarata e Cirurgia Refrativa

II Congresso Latino Americano em Oftalmologia  
IV Congresso Latino Americano de Cirurgia em Oftalmologia  
II Curso de Acomodogramas - Certificação para Auxiliar de Cirurgia - AACCR

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# HOW TO CHOOSE THE ICRS

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# FERRARA RING NOMOGRAM

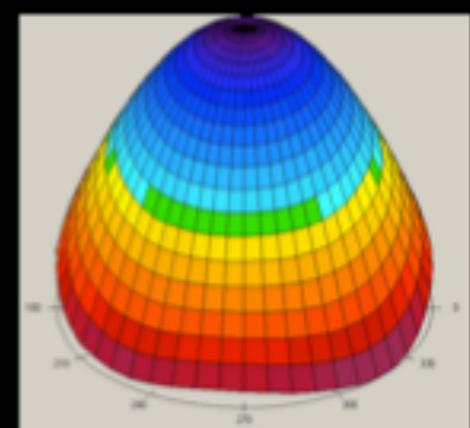
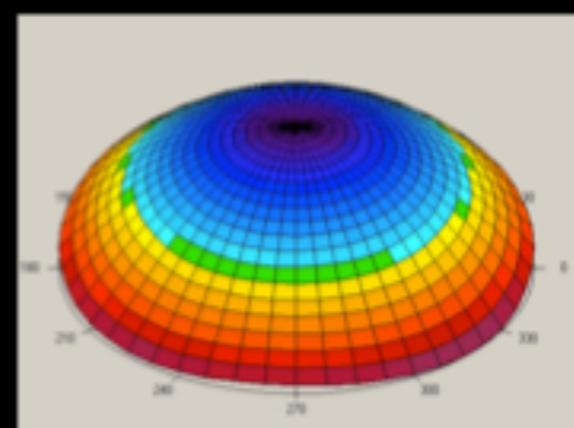
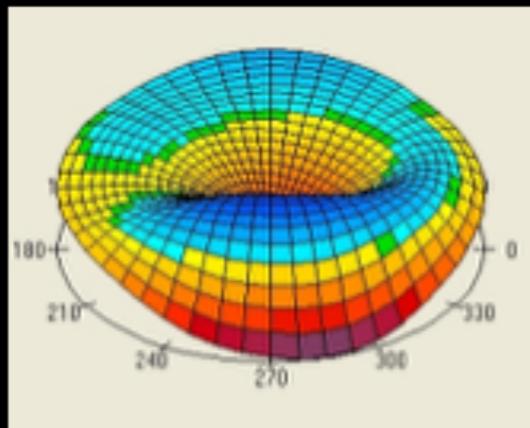
## Evolution of the Nomogram

(criteria for ring selection)

- First generation (1997 - 2002): keratoconus grade
- Second generation (2002 - 2006): spherical equivalent
- Third generation (2006 - 2009): topographic astigmatism
- Fourth generation (May 2009 to 2018): asphericity (Q)
- Fifth generation (2018): posterior elevation

# ASPHERICITY (Q)

- Corneal asphericity (Q) – corneal shape;
- Oblate ..... Prolate;

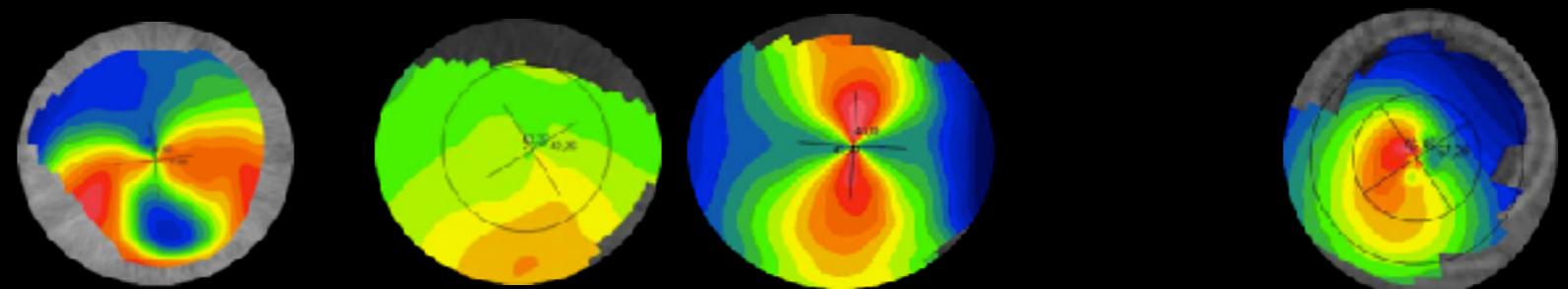
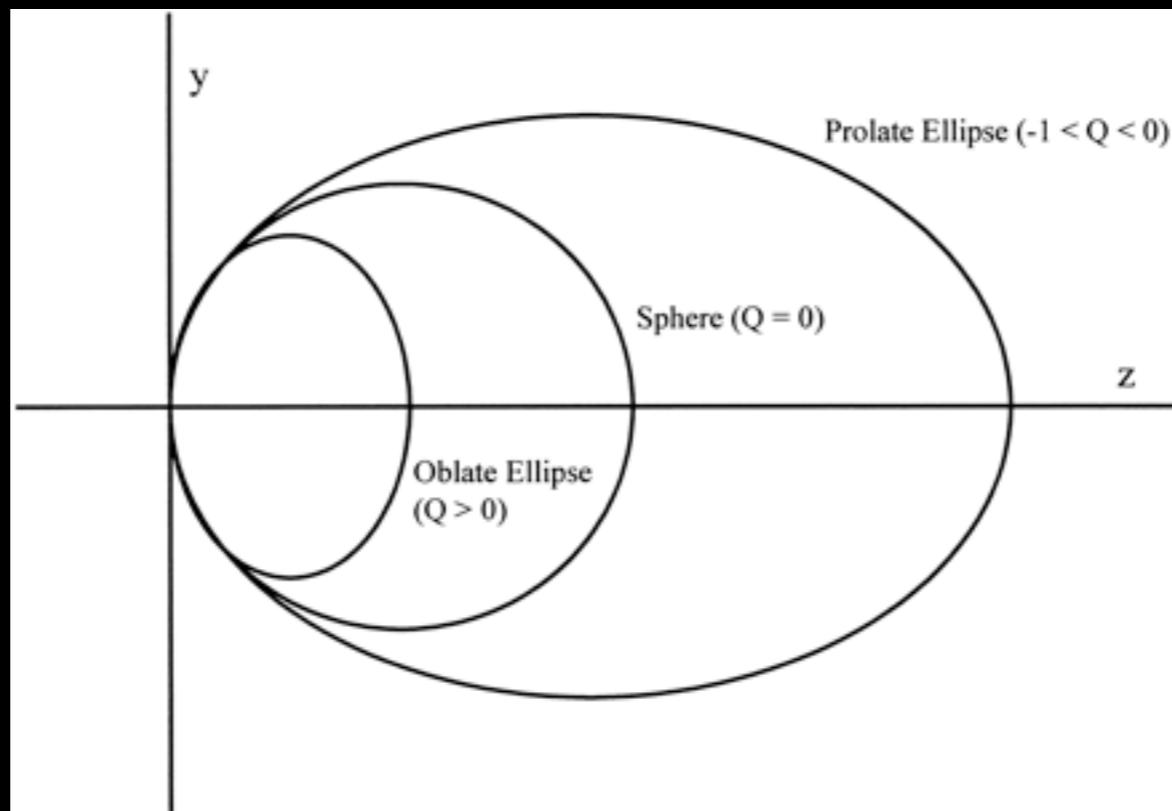


- “Normal”: mild prolate
- Normal Q value: - 0.23<sup>1</sup>

Keratoconus: hyper prolate cornea;

1. Yebra-Pimentel E, González-Méijome JM, Cervino A, et al. Asfericidad corneal en una población de adultos jóvenes. Implicaciones clínicas. Arch Soc Esp Oftalmol 2004; 79:385-392

# CORNEAL ASPHERICITY



# NOMOGRAM

- The asphericity is the best parameter, at the present moment, for ring selection;
- There is a tendency to implant “less” tissue to achieve the same (or better) correction than was achieved in the past;
- **Q value = Quality of vision**

## WHAT IT IS THE ROLE OF POSTERIOR ELEVATION IN THE NOMOGRAM?

- To identify map patterns that correlates with sagital anterior maps;
- Easier pattern (posterior elevation) classification when compared with sagital anterior maps;
- Better reproducibility;
- **Better agreement in surgical planning among doctors.**

# POSTERIOR ELEVATION MAPS

## GEOGRAPHY LANDMARKS

### LAGOON

is a shallow body of water separated from a larger body of water by barrier islands or reefs



### ISTHMUS

is a narrow piece of land connecting two larger areas across an expanse of water by which they are otherwise separated



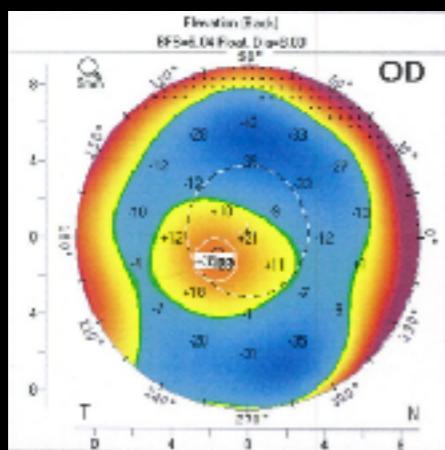
### PENINSULA

is a piece of land surrounded by water on the majority of its border, while being connected to a mainland from which it extends.

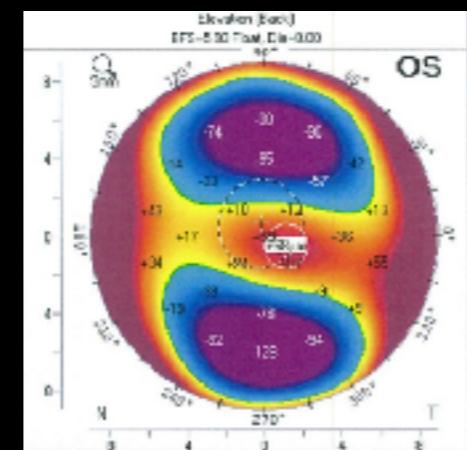


# POSTERIOR ELEVATION MAPS

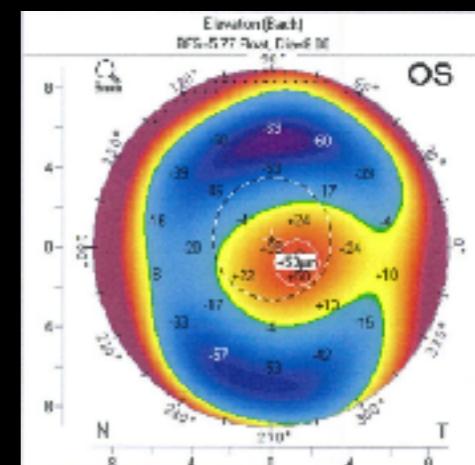
LAGOON



ISTHMUS

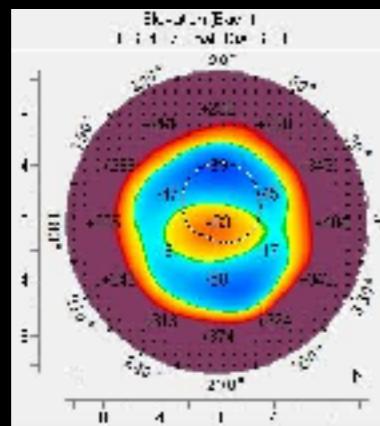


PENINSULA

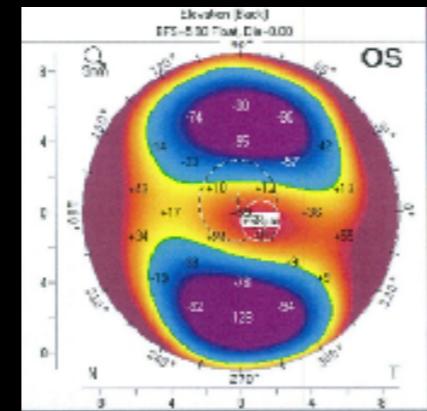


# POSTERIOR ELEVATION MAPS

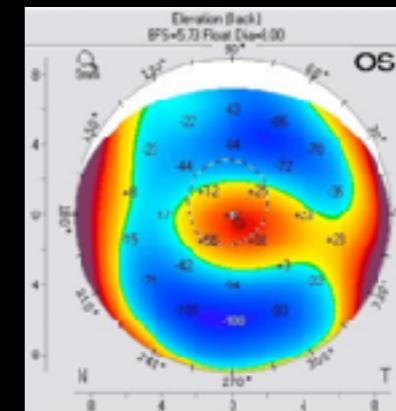
LAGOON



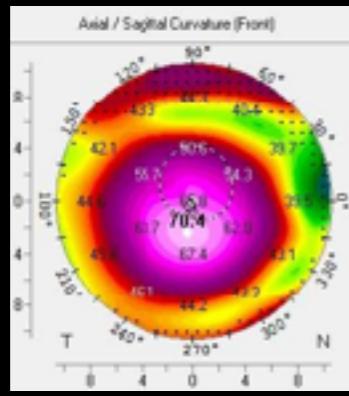
ISTHMUS



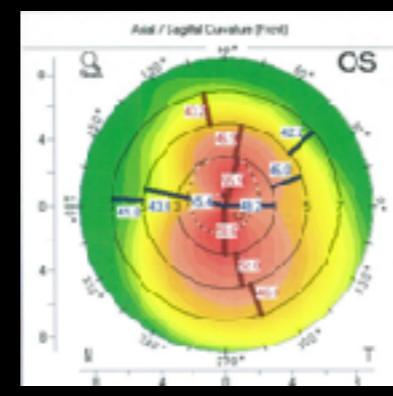
PENINSULA



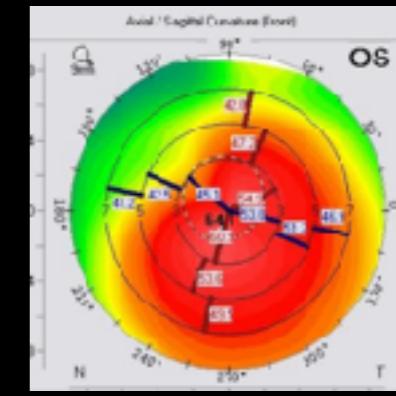
NIPPLE



BOW-TIE / ASTIGMATIC

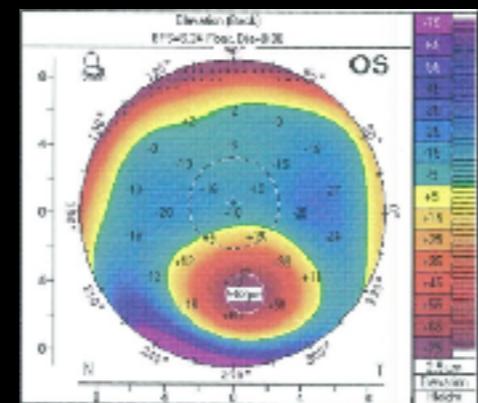


oval

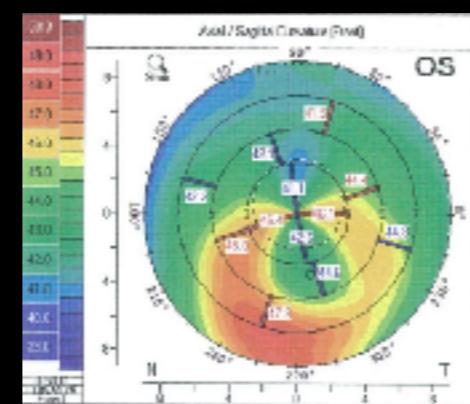


# POSTERIOR ELEVATION MAPS

## DECENTERED LAGOON



PMD / PMD "LIKE"

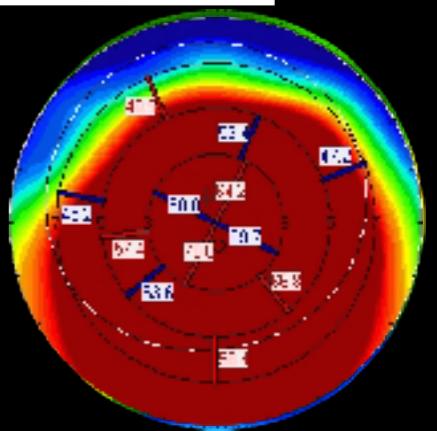


# ASPHERICITY X KERATOMETRY X ASTIGMATISM

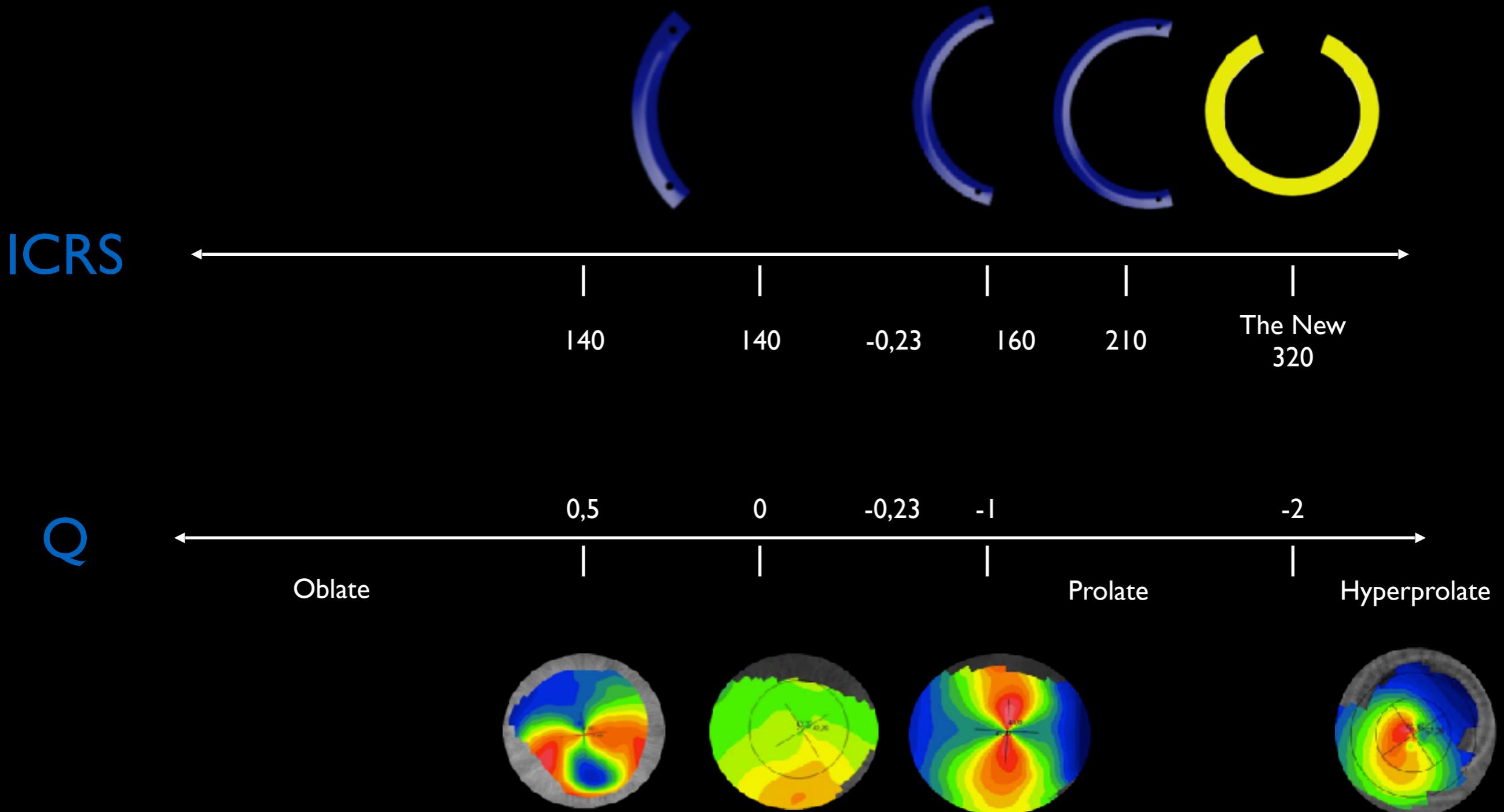
	Q	K	Cyl
140 (arc)	↑	↓	↓↓↓
160 (arc)	↑↑	↓↓	↓↓
210 (arc)	↑↑↑	↓↓↓	↓
<b>320 (arc)</b>	<b>↑↑↑↑</b>	<b>↓↓↓</b>	<b>↓↓</b>

160 arc = 32000% asphericity = 100% spherical cornea ("standard" ring)

- Q negative (negative hypermetropic hyperopic cornea)
- High K values give high K values
- High astigmatism gives high astigmatism



# CORNEAL ASPHERICITY x ICRS ARCH LENGTH



# NOMOGRAM

## General Guidelines

IT MUST BE DETERMINED:

1. The type of keratoconus:



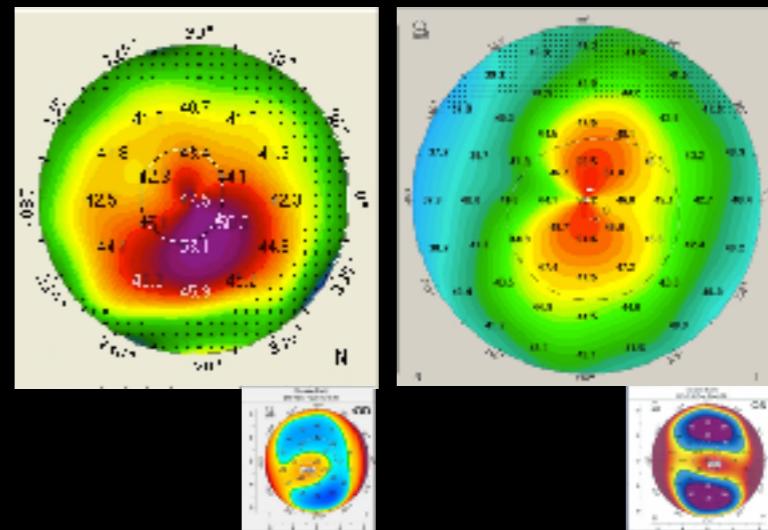
2. The corneal asphericity (Q)

3. The pachymetry at the corneal steepest axis and probable ring track (5 mm optical zone)

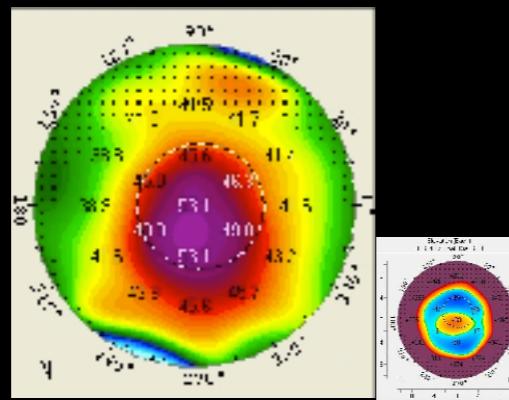
# NOMOGRAM

## 1. Type of keratoconus

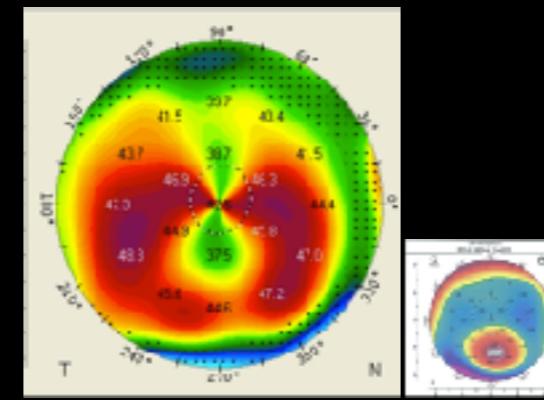
Oval / Bow-tie



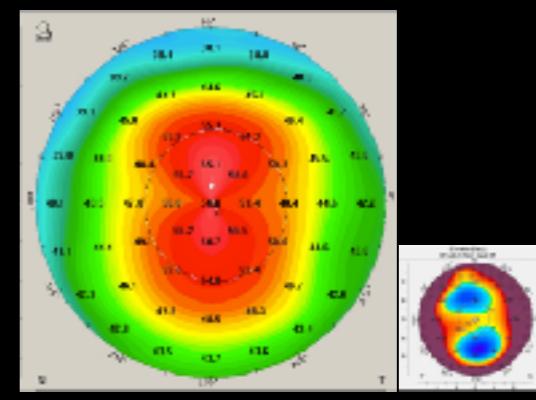
Nipple



PMD



Astigmatic



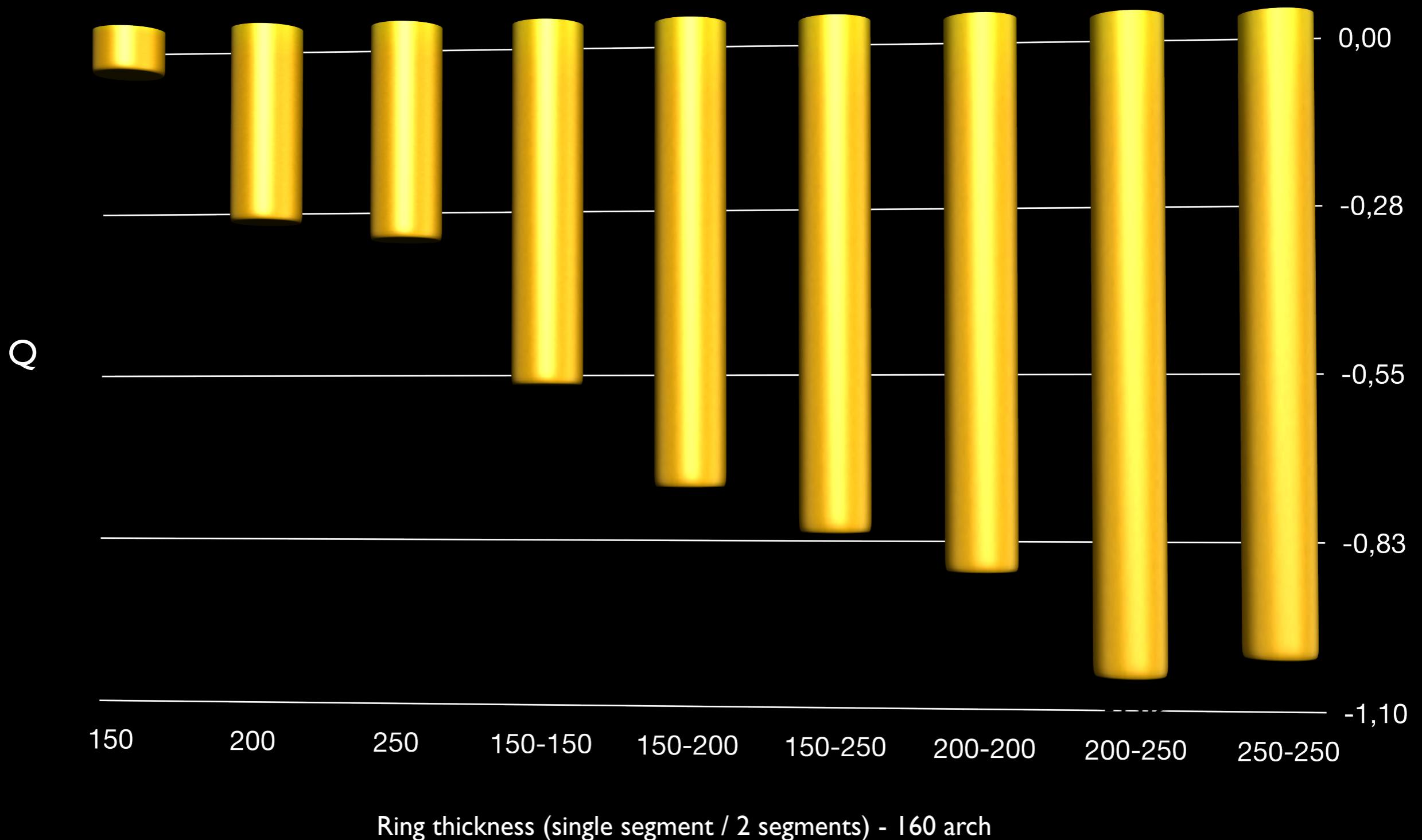
# NOMOGRAM

## 2. The corneal asphericity (Q):

The selected ring for implantation may induce asphericity changes with a final result close to “normal” values ( $-0.23 \pm 0.08$ )

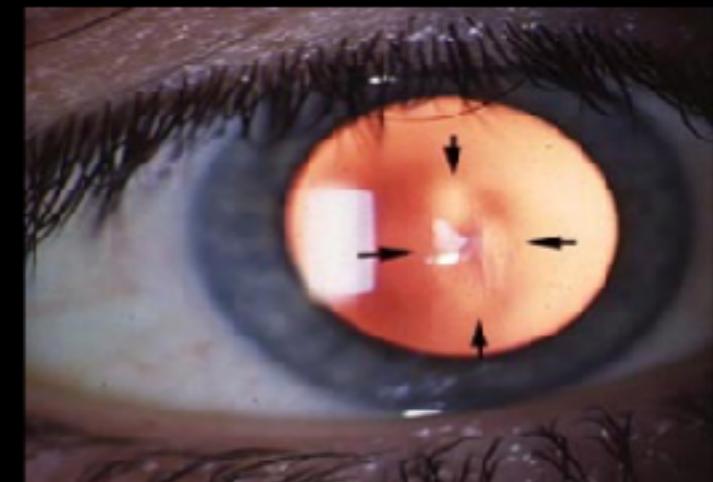
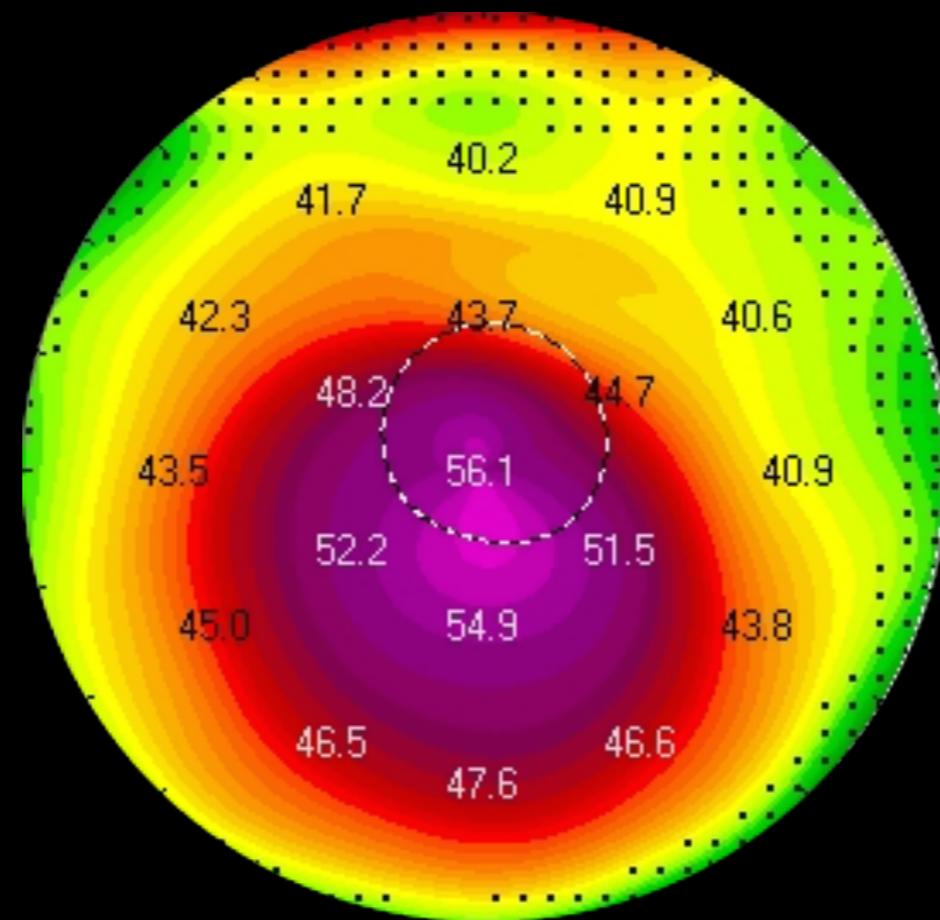
# 160 - ICRS

Q (asphericity) variation according to ring thickness\*



# NOMOGRAM

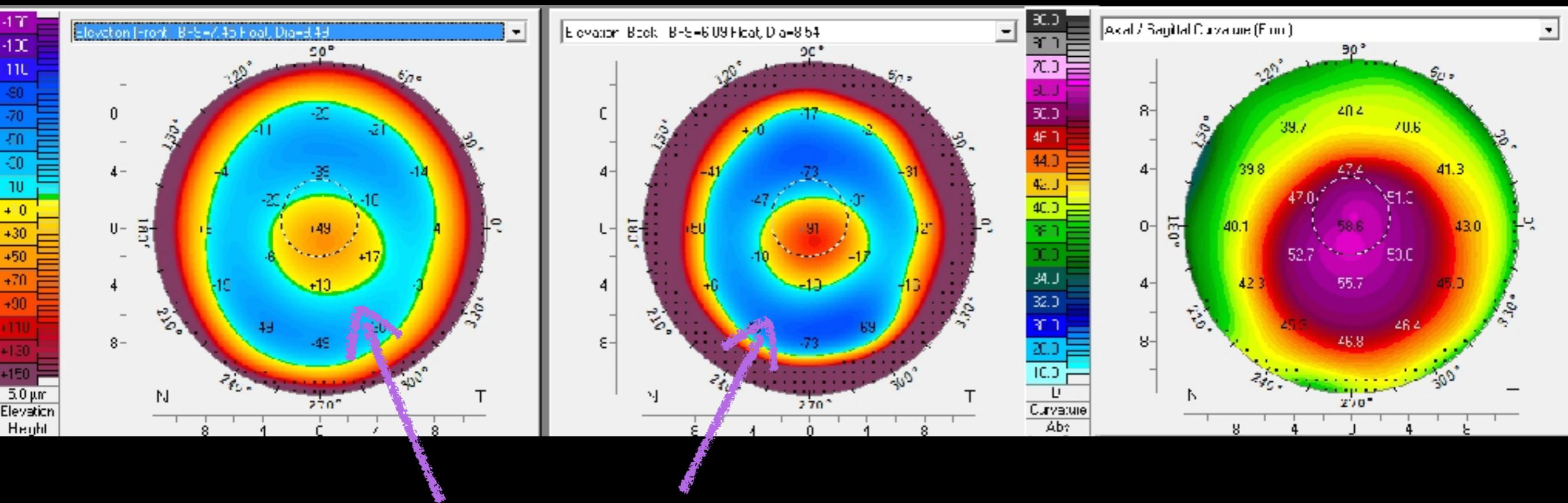
## Nipple



Central location  
Hyperprolate cornea  
Low astigmatism  
Lake in the elevation map

# NOMOGRAM

## Nipple

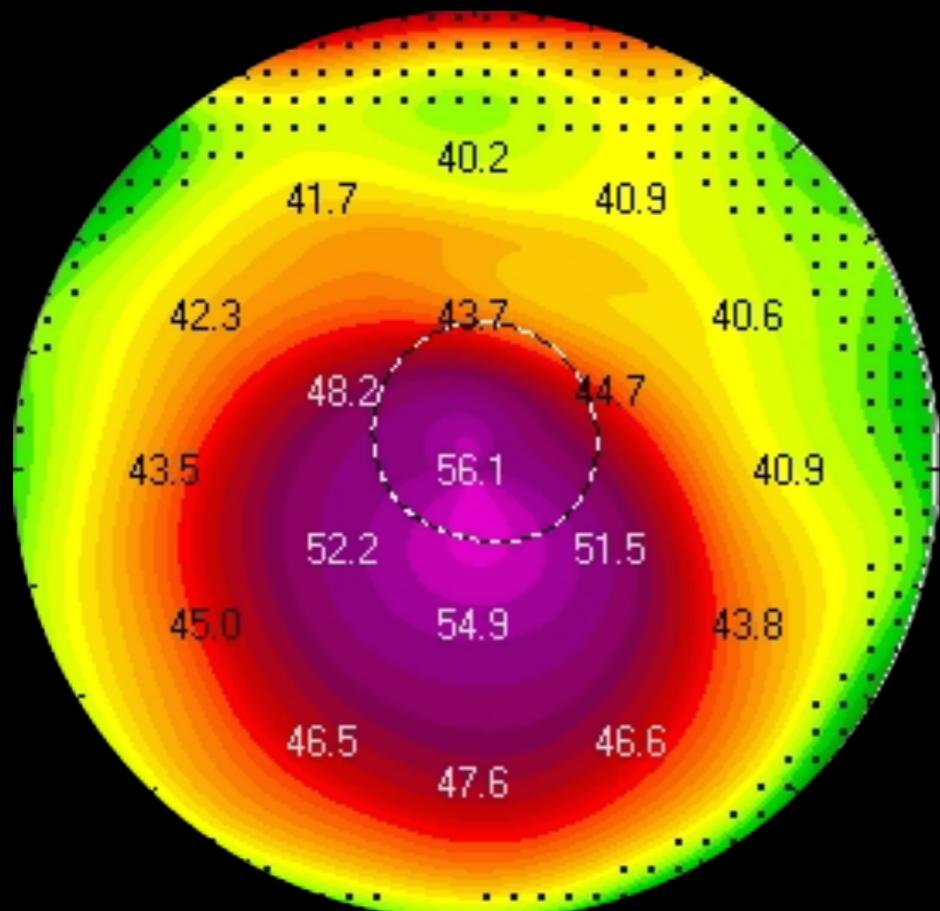


Lagoon in the posterior elevation map

Torquetti, L

# NOMOGRAM

Nipple



Q change induced by the 210 ICRS

210/150	- 0.36
210/200	- 0.60
210/250	- 0.82

Q change induced by the 320 ICRS

320/150	- 0.53
320/200	- 0.89
320/250	- 1.14

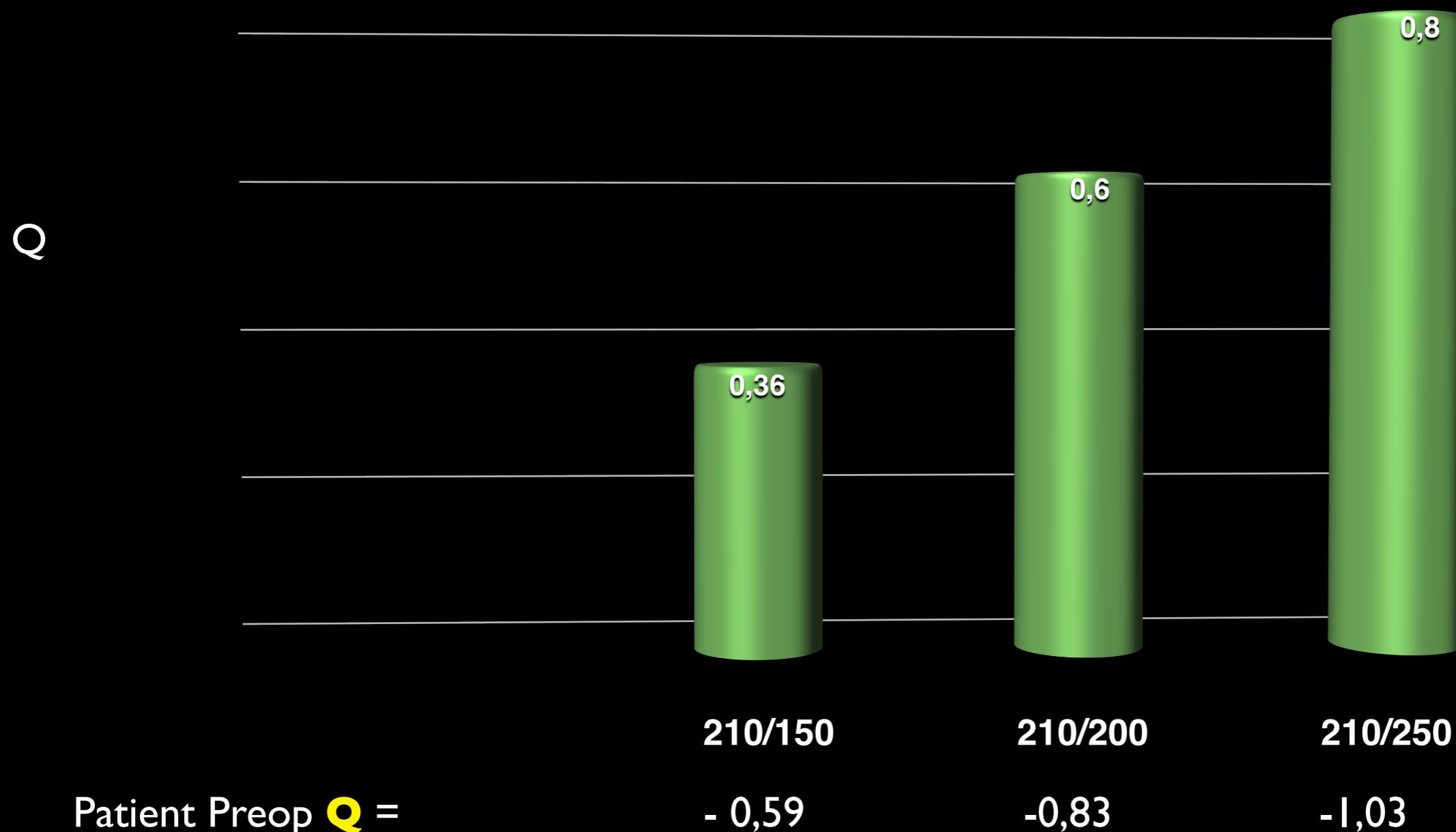
Nipple = 210 or 320

Preop Q



# 210 - ICRS

Q (asphericity) variation according to ring thickness\*



# NOMOGRAM

## Nipple

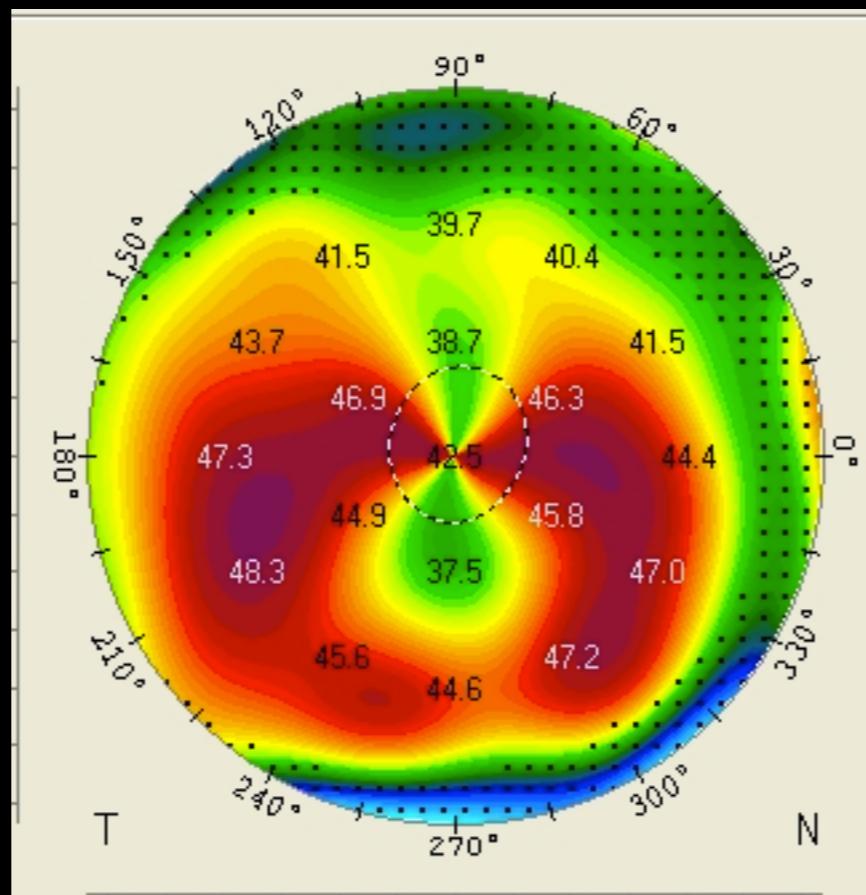
Given a Q value that fits  
for both 210 and 320 ICRS,  
How to choose between them?

Topographic Astigmatism < 3,00 D = **210**

Topographic Astigmatism > 3,00 D = **320**

# NOMOGRAM

## Pellucid Marginal Degeneration

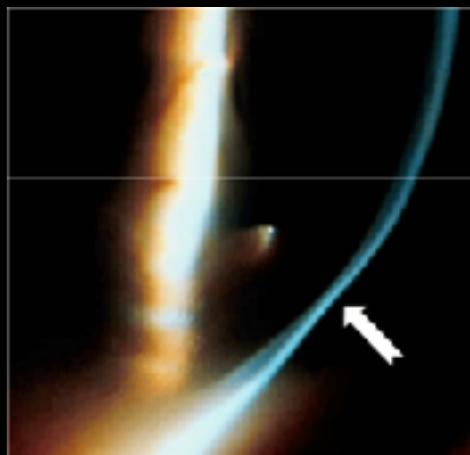


Crab claw configuration  
Oblate cornea ( Q positive)

High astigmatism

Low keratometry

Posterior elevation: decentered lagoon

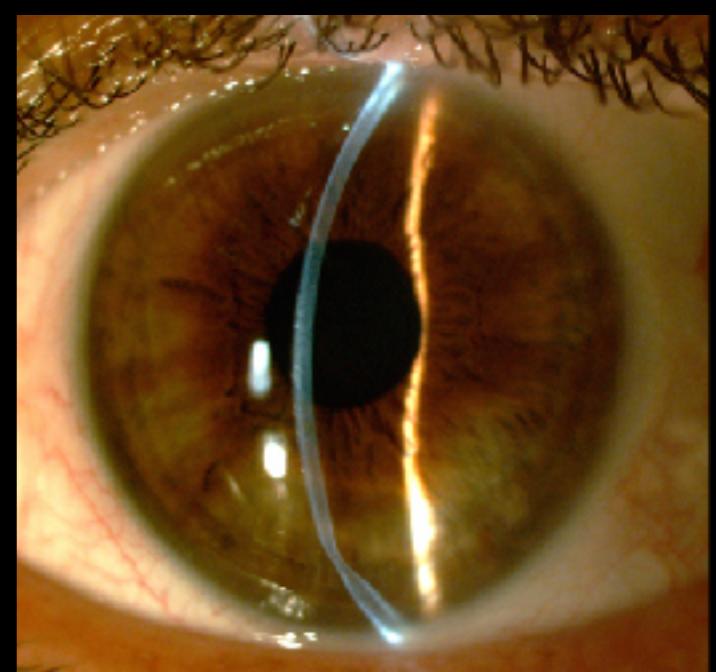
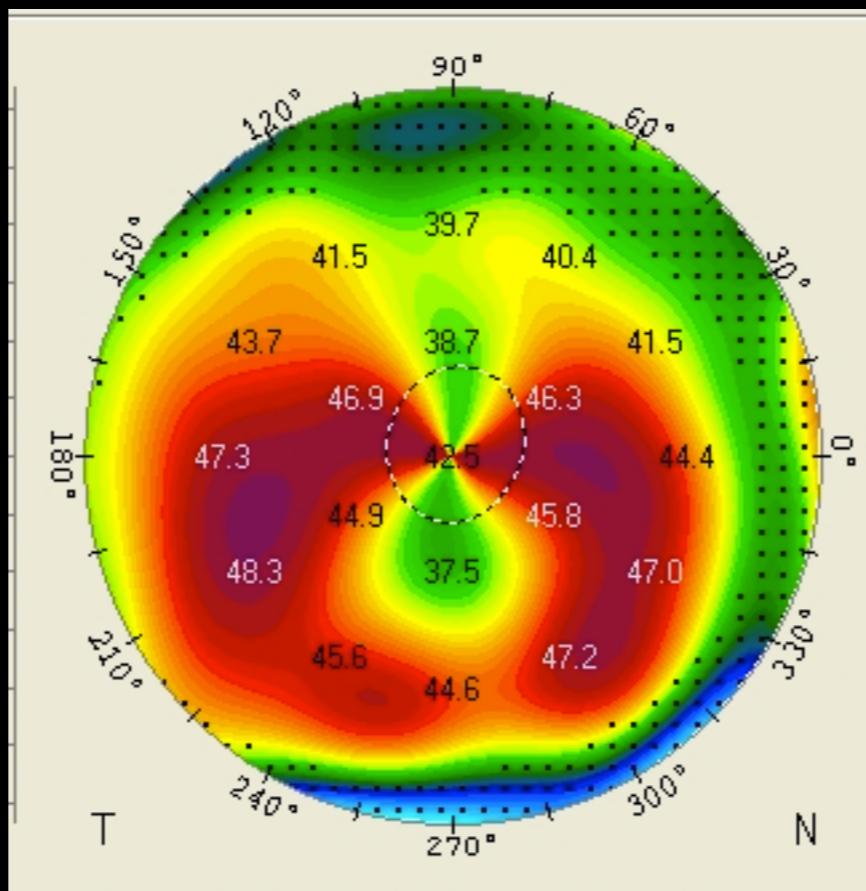


# NOMOGRAM

## Pellucid Marginal Degeneration

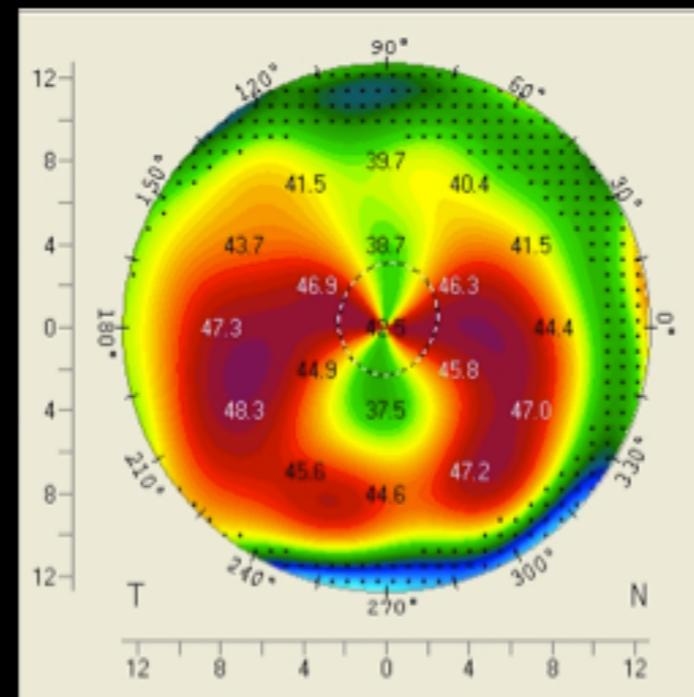
Cornea Front

	Rh: <input type="text" value="7.02 mm"/>	K2: <input type="text" value="48.1 D"/>
	Rv: <input type="text" value="8.90 mm"/>	K1: <input type="text" value="37.9 D"/>
	Rm: <input type="text" value="7.96 mm"/>	Km: <input type="text" value="42.4 D"/>
QS: <input type="text" value="OK"/>	Axis: <input type="text" value="82.1 °"/>	Astig: <input type="text" value="10.2 D"/>
Q-val: (30°) <input type="text" value="0.34"/>	Rper: <input type="text" value="7.68 mm"/>	Rmin: <input type="text" value="6.89 mm"/>



# NOMOGRAM

# Pellucid Marginal Degeneration



PMD = 140 RING

$Q = 0$  or positive  
oblate cornea

## Topographic astigmatism

up to 4.00 D

4.00 – 8.00 D

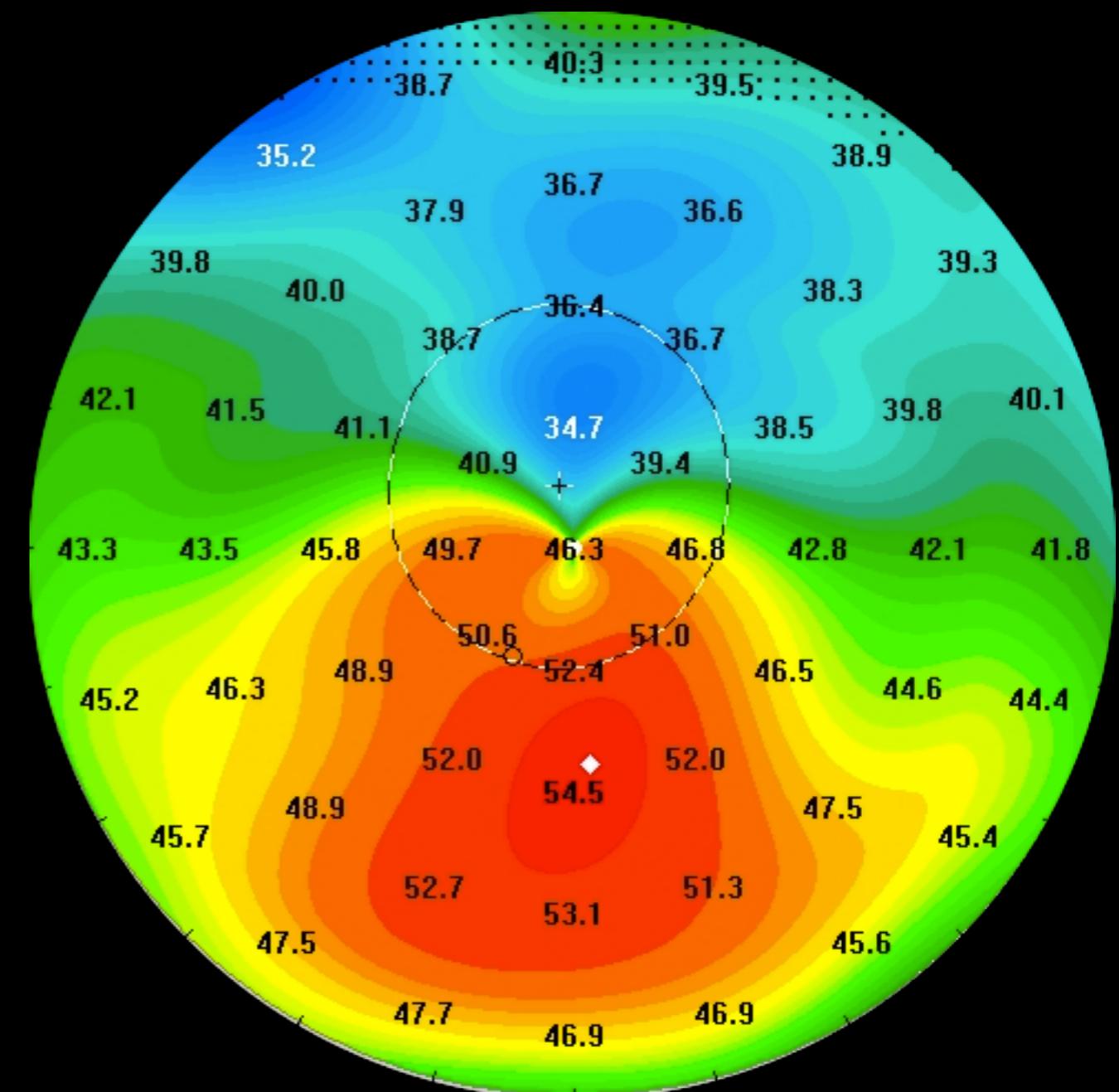
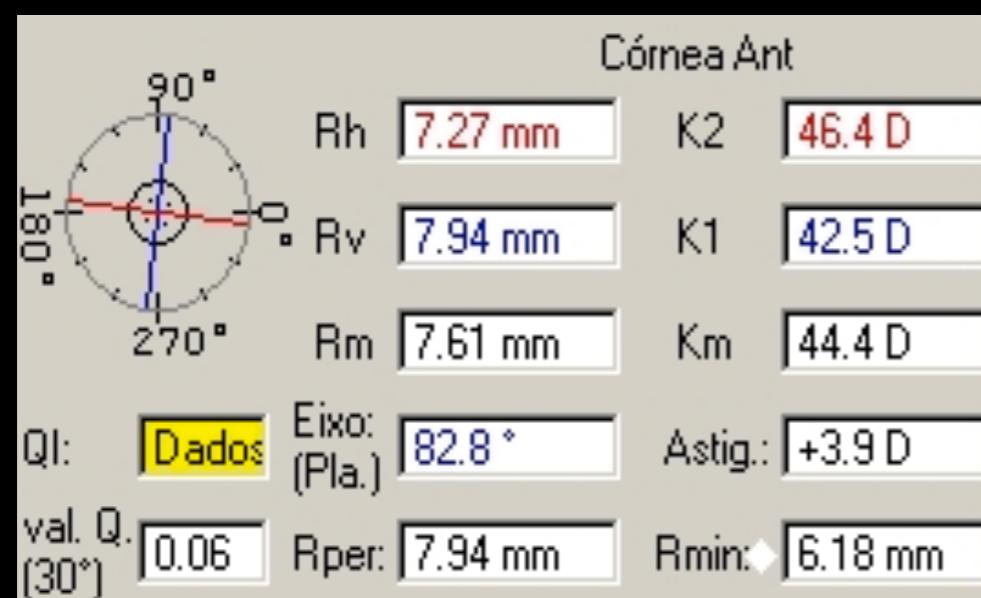
> 8.00 D

150 micra

200 micra

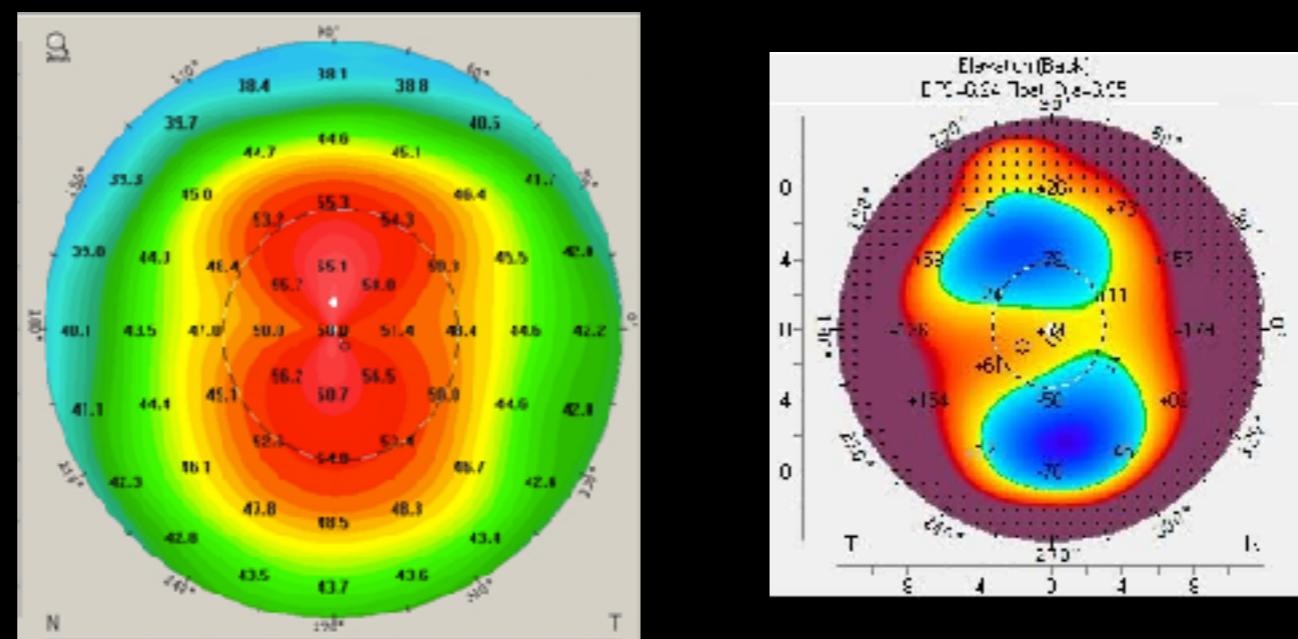
250 micra

# DMP "like"



# NOMOGRAM

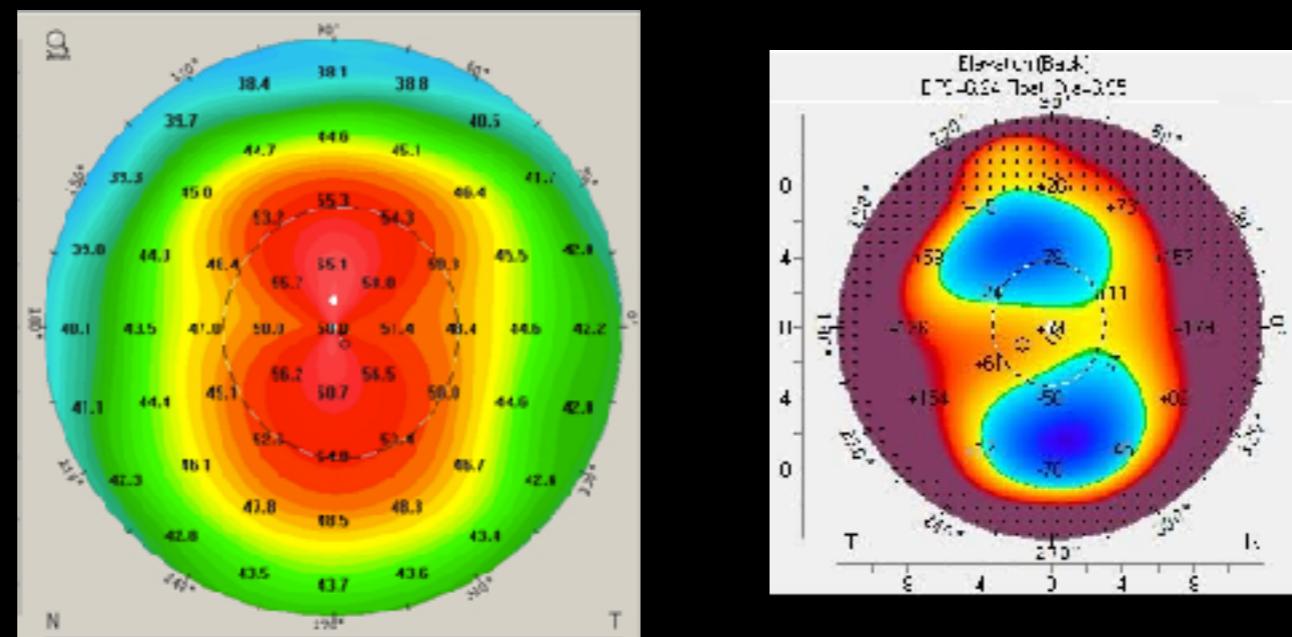
## Astigmatic Keratoconus



Central location  
Hyperprolate cornea ( $Q << -1,3$ )  
High astigmatism  
High keratometry  
Posterior Elevation: Isthmus

# NOMOGRAM

## Astigmatic Keratoconus



**ASTIGMATIC =**

**2 segments 140 ICRS  
or  
320 ICRS**

**ASTIGMATISM**

up to 6,00 D  
6,00 to 10,00 D  
> 10,00 D

**ICRS**

320/200  
2 x 140/200 or 320/250  
2 x 140/250 or 320/250

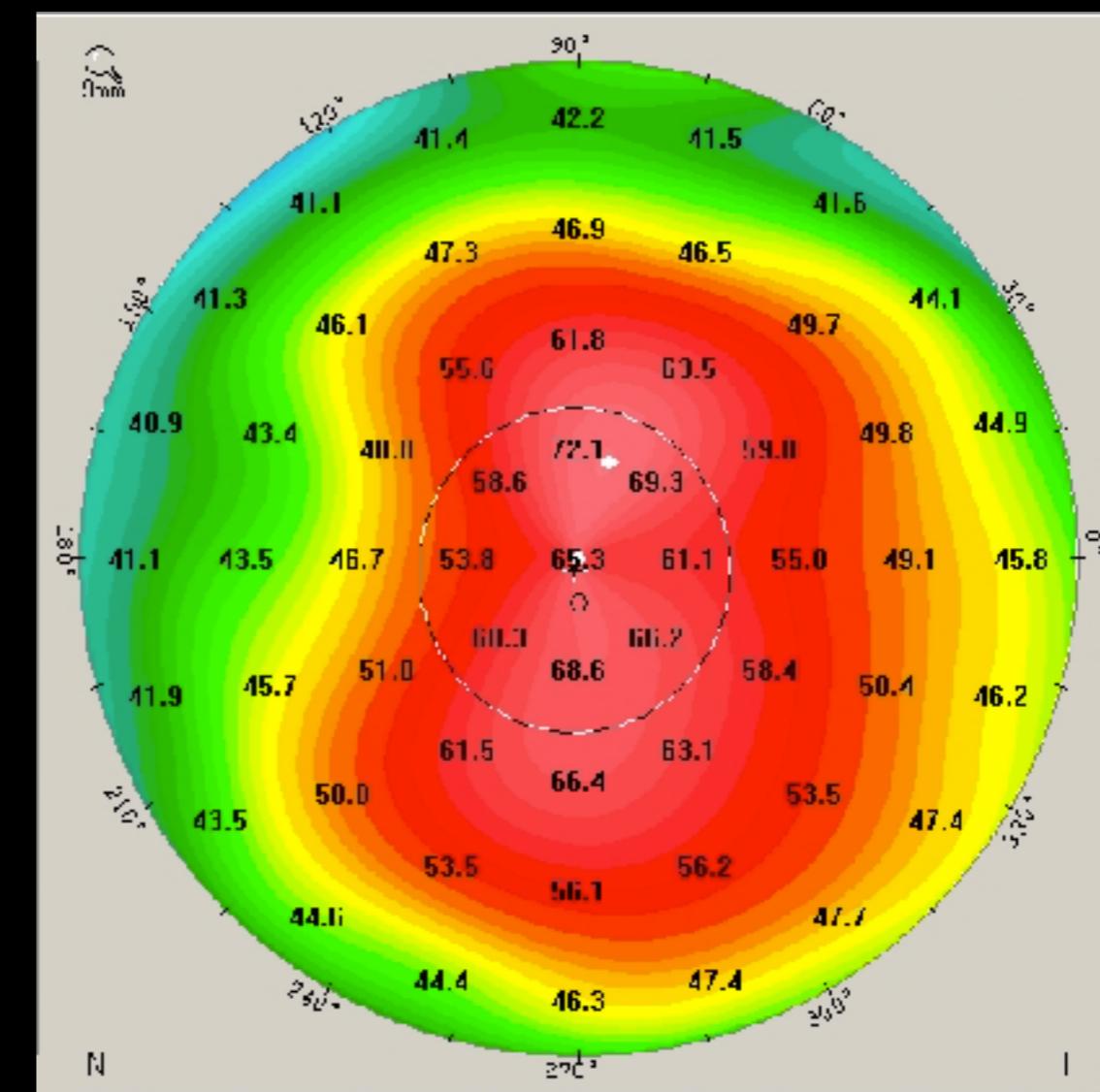
# NOMOGRAM

## Astigmatic Keratoconus

Córnea Ant

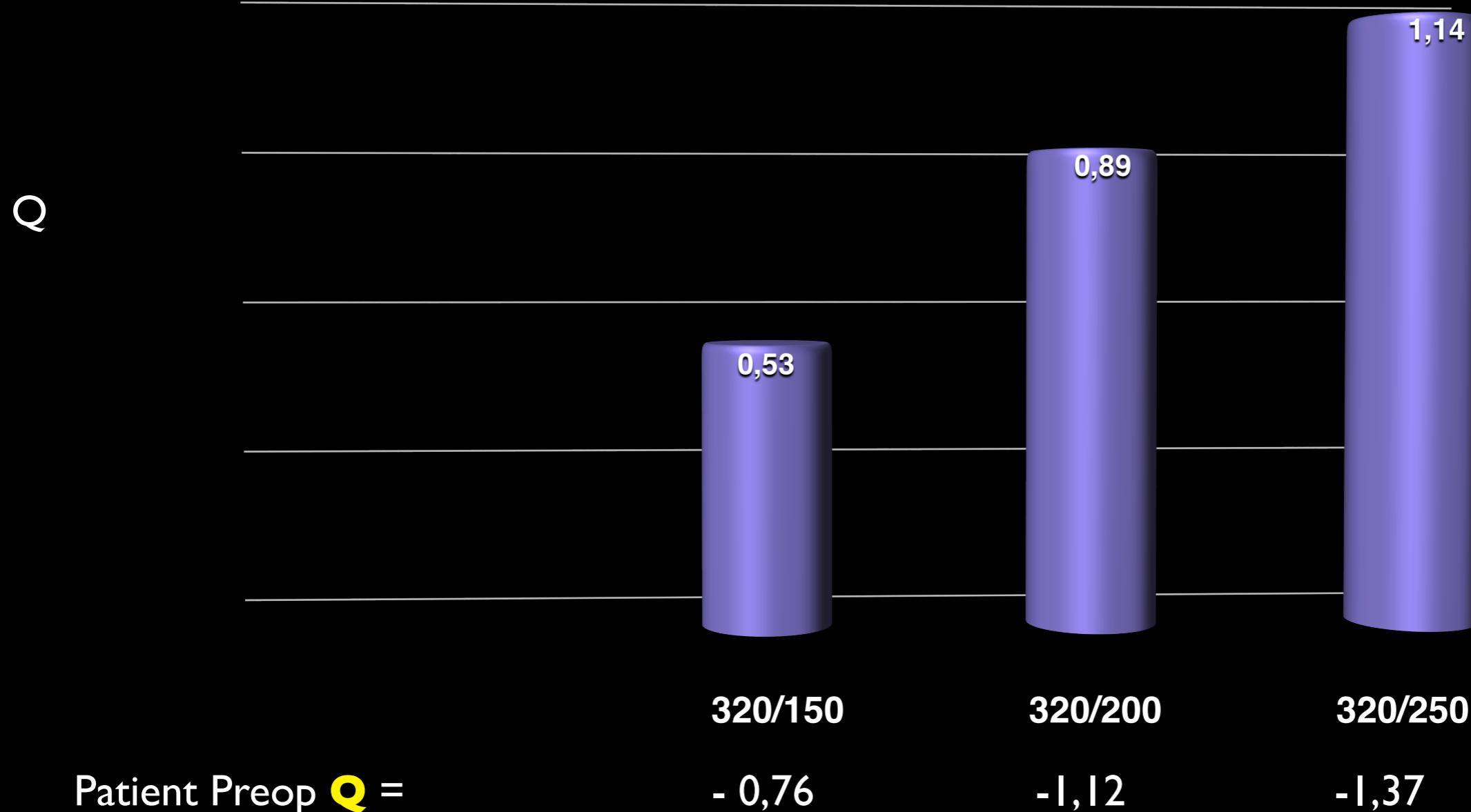


Rh	6.22 mm	K1	54.3 D
Rv	4.95 mm	K2	68.1 D
Rm	5.59 mm	Km	60.4 D
QI:	Dados	Eixo: (Pla.)	174.7 °
val. Q. (30°)	-1.86	Rper:	7.74 mm
		Rmin:	4.57 mm



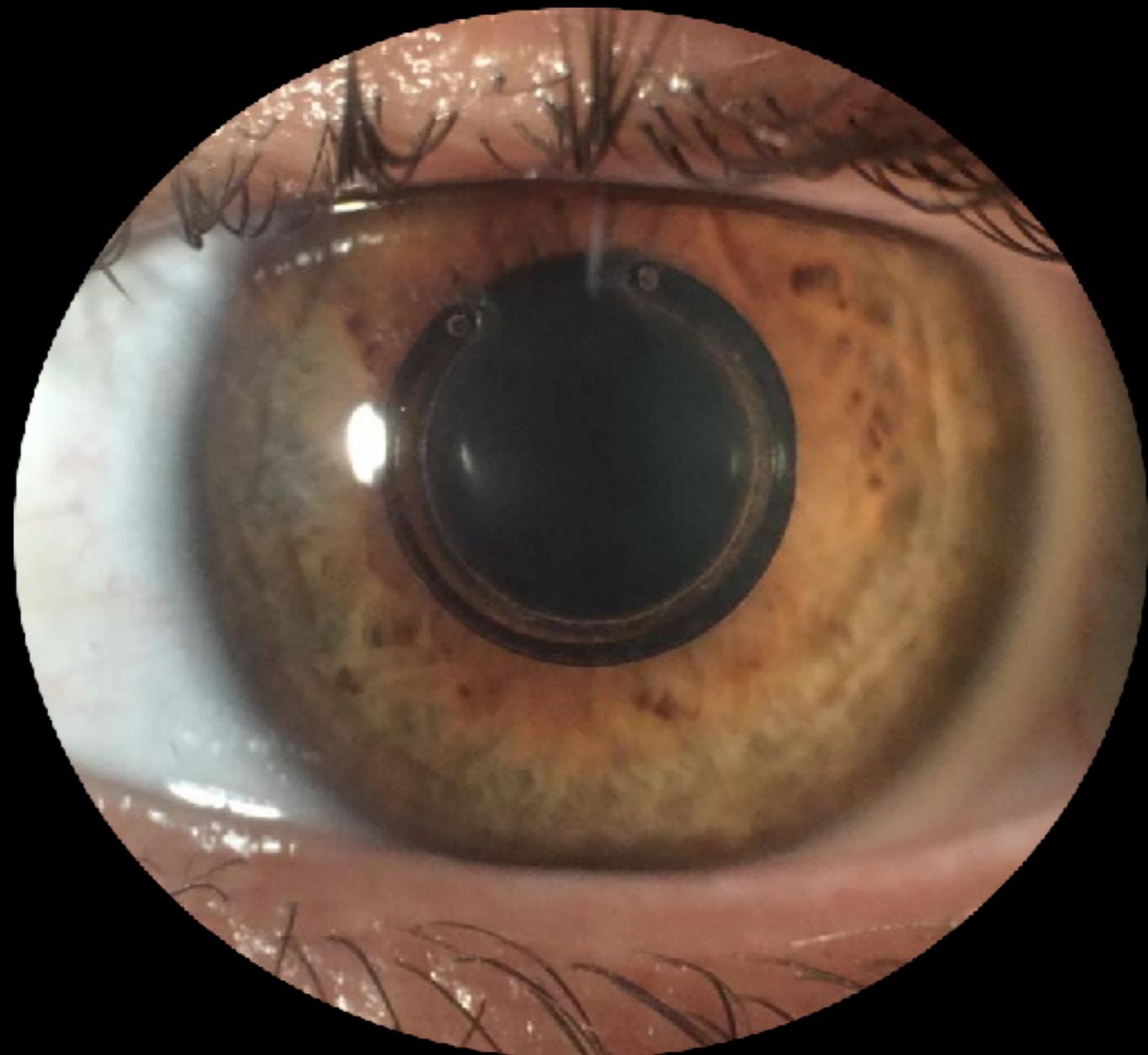
# 320 - ICRS

Q (asphericity) variation according to ring thickness



# Advanced Cones

## The 320 ICRS



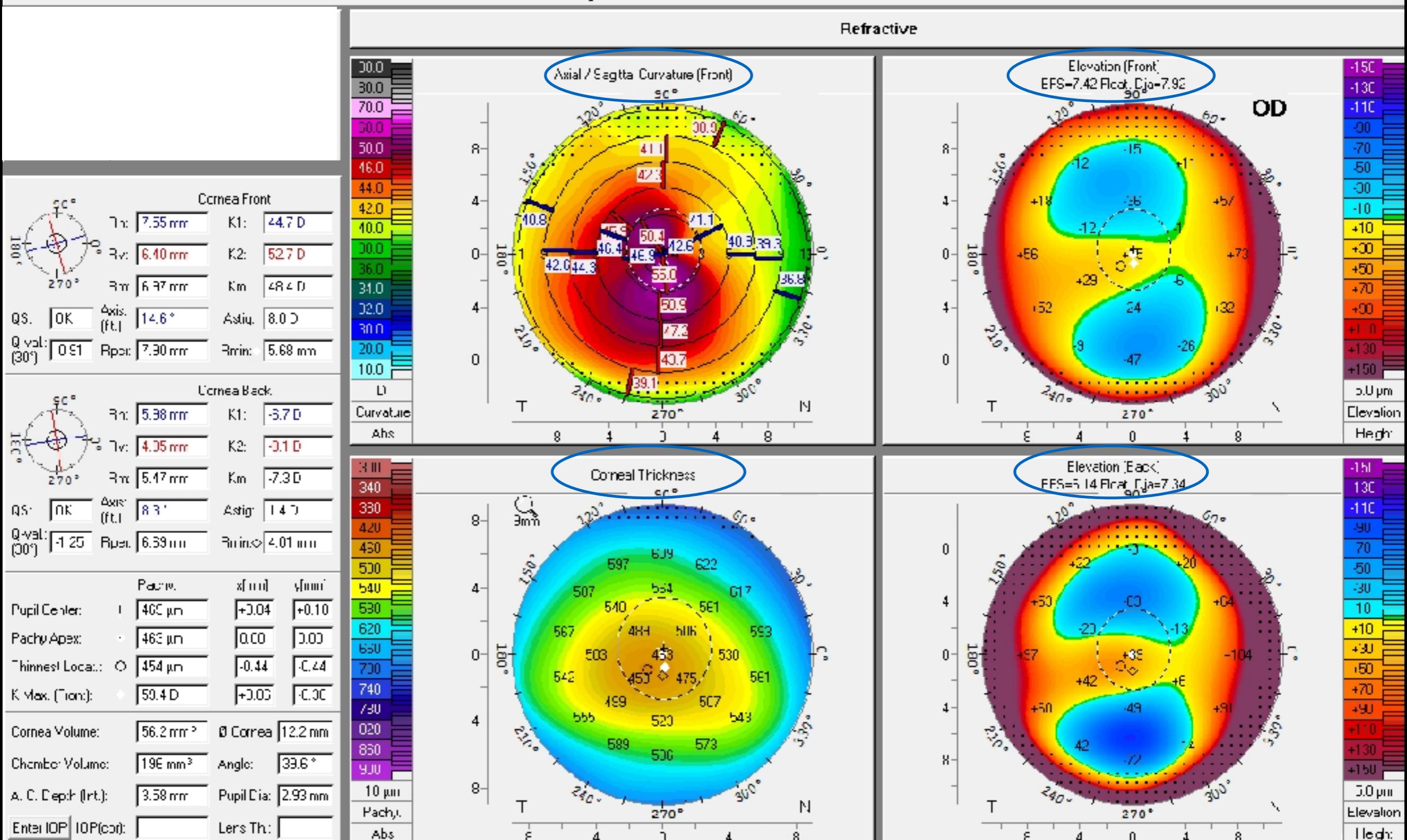
# **SURGICAL PLANNING:**

## **Step by Step**

**WHICH MAPS DO I NEED?**

# OCULUS - PENTACAM 4 Maps Refractive

120:78



	<b>Cornea Front</b>
Tn: 7.55 mm	K1: 44.7 D
Av: 6.40 mm	K2: 52.7 D
Bm: 6.97 mm	Km: 48.4 D
QS: OK	Axist. (ft.) 14.6°
Q-val: (30°) 0.91	Rpos: 7.30 mm
Ppos: 7.30 mm	Rmin: 5.68 mm
	<b>Cornea Back</b>
Tn: 5.38 mm	K1: -3.7 D
Av: 4.05 mm	K2: -0.1 D
Bm: 5.47 mm	Km: -7.3 D
QS: OK	Axist. (ft.) 8.3°
Q-val: (00°) -1.25	Rpos: 6.39 mm
Ppos: 6.39 mm	Rmin: 4.01 mm
Pupil Center:	Pupil: +0.04 mm Axial: +0.10 mm
Pachy Apex:	+463 µm 0.00 0.00
Thinnest Locat.:	O 454 µm -0.44 -0.44
K Max. (Front):	50.4 D +0.03 -0.00
Cornea Volume:	56.2 mm³ Ø Cornea 12.2 mm
Chcmbo Volume:	19.8 mm³ Angle: 39.6 °
A. C. Depth (Int.):	3.58 mm Pupil Dia: 2.93 mm
Enter IOP (Int.):	IOP(corr):
Lens Th.:	

# **SURGICAL PLANNING:**

## **Step by Step**

**FIRST STEP**

**DEFINE THE KERATOCONUS TYPE**

**(Axial and Elevation Maps)**

# SURGICAL PLANNING: Step by Step

SECOND STEP

DEFINE THE STEEPEST AXIS

# SURGICAL PLANNING: Step by Step

THIRD STEP

DEFINE THE Q VALUE

# SURGICAL PLANNING: Step by Step

## FOURTH STEP

DEFINE THE TOPOGRAPHIC ASTIGMATISM

# SURGICAL PLANNING: Step by Step

## FIFTH STEP

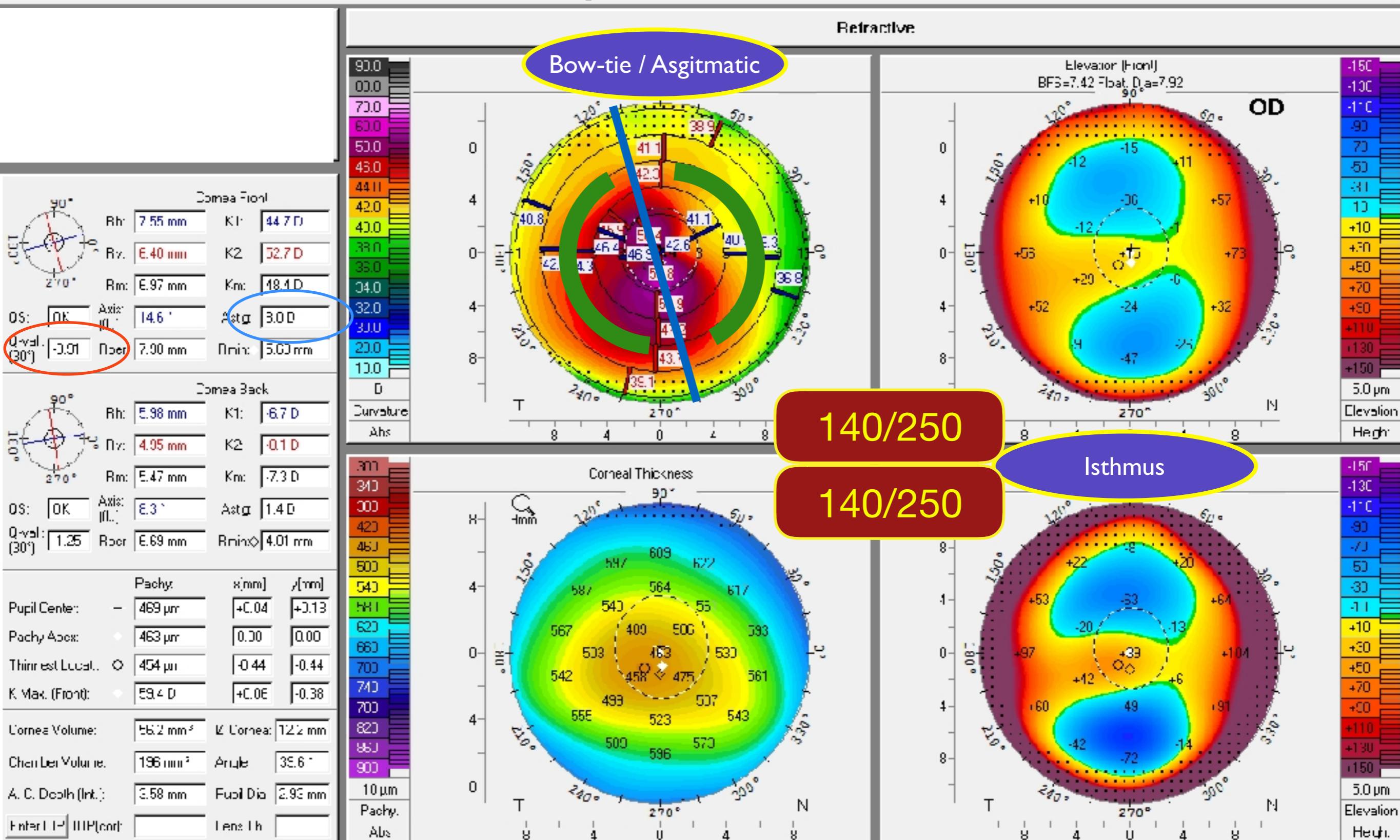
SELECT THE ICRS TO BE IMPLANTED

*according to*

Q preoperative - Q change induced by the ring = - 0.23 (TARGET FINAL Q VALUE)

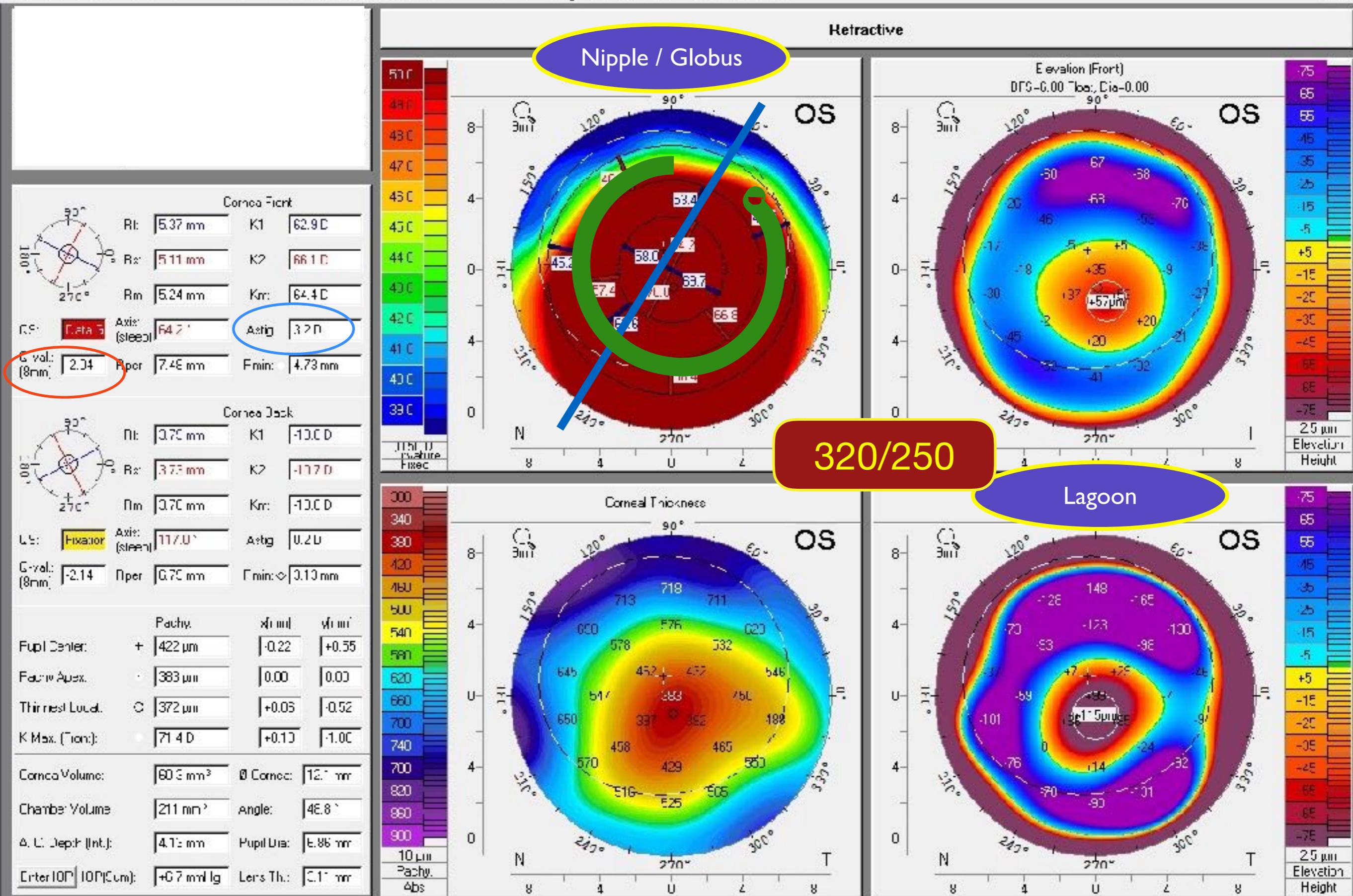
# OCULUS - PENTACAM 4 Maps Refractive

1.2078



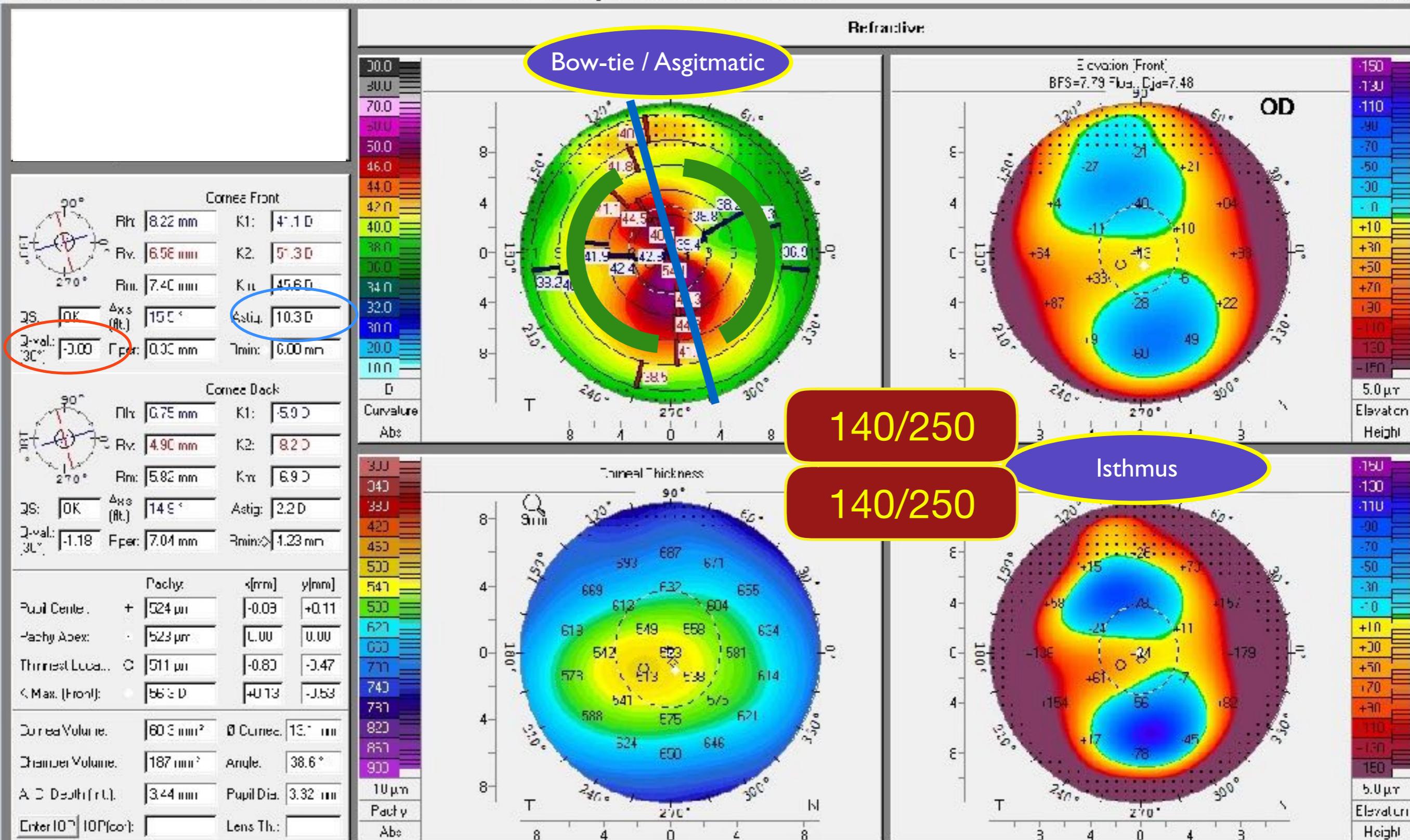
# OCULUS - PENTACAM 4 Maps Refractive

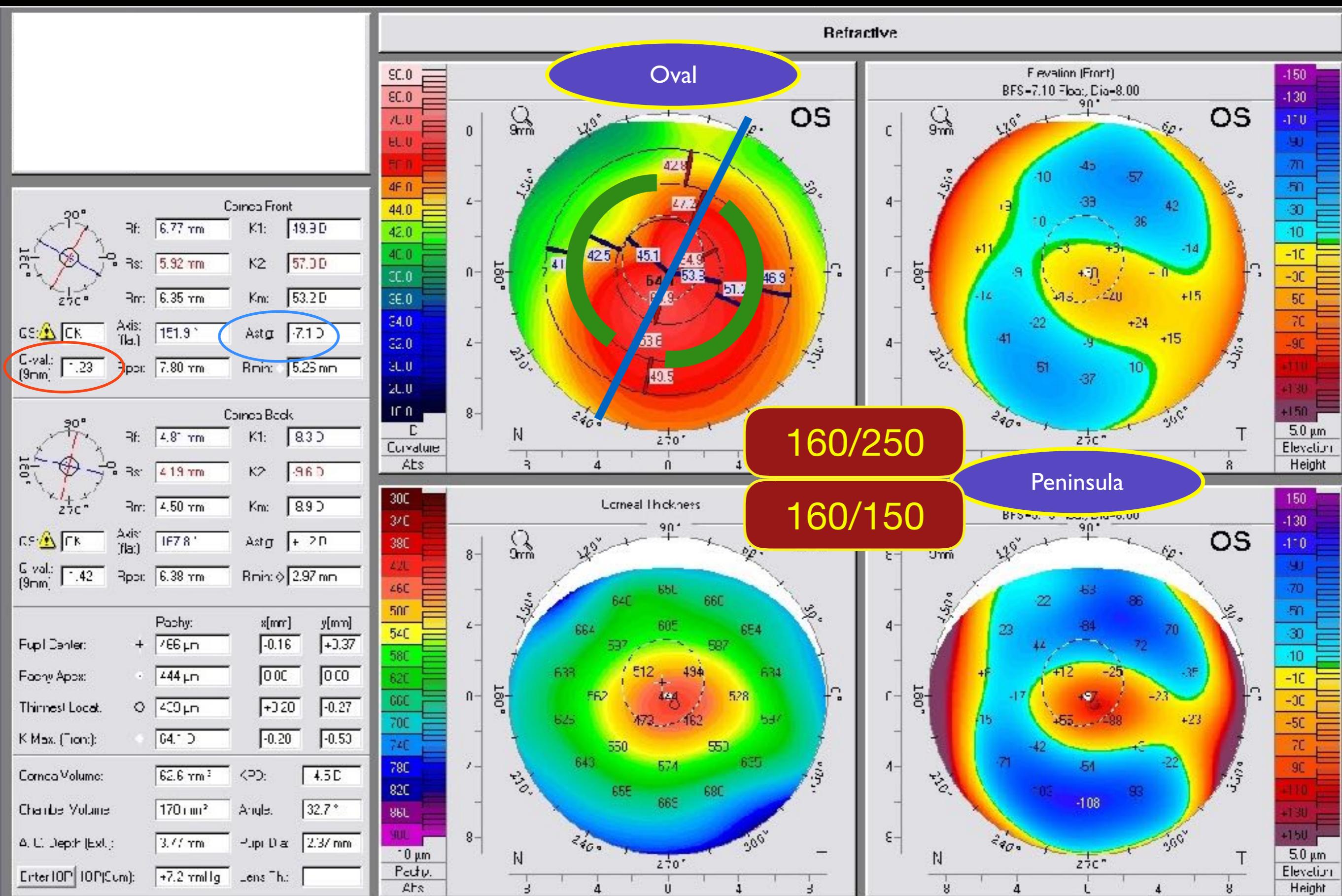
1.21.2



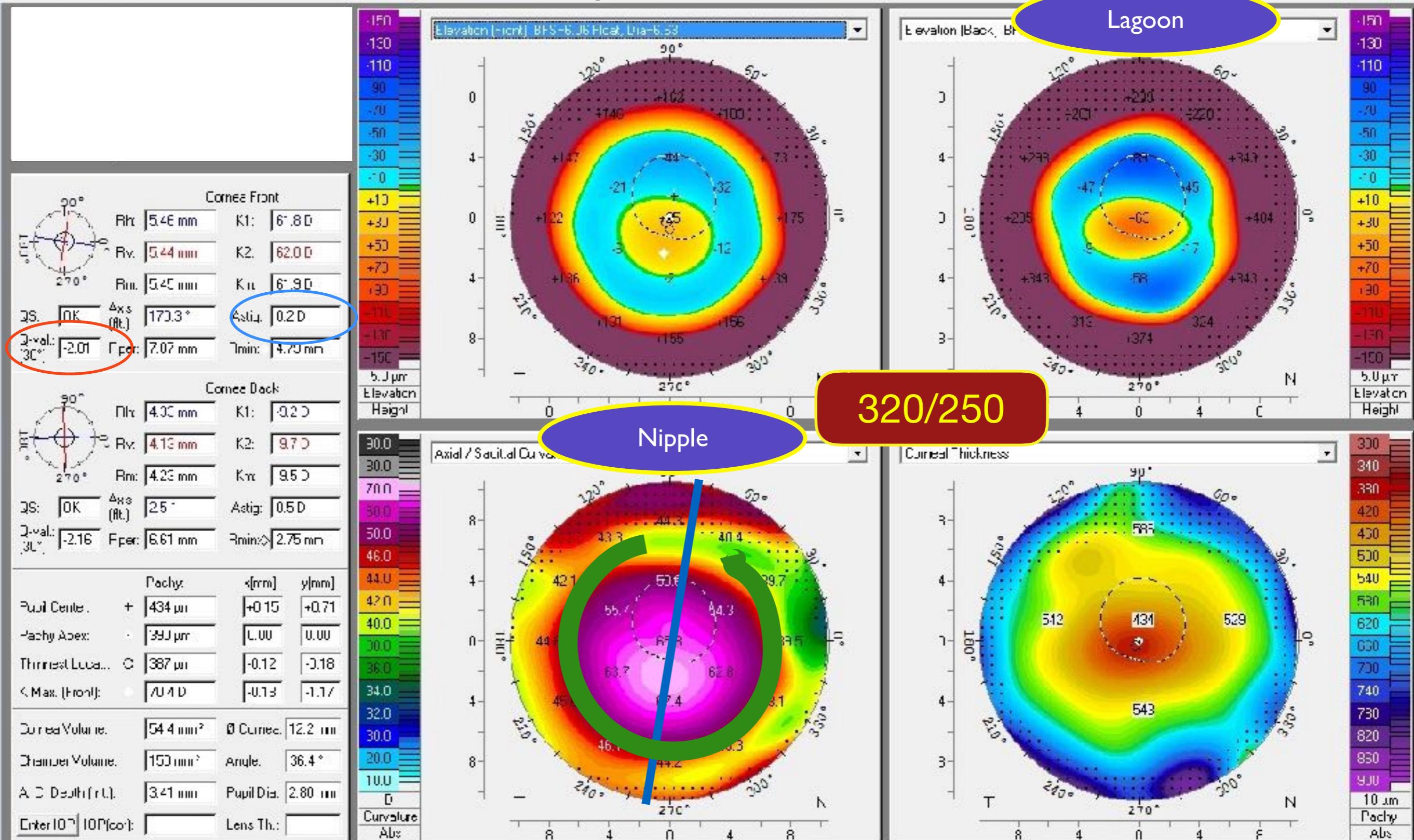
OCULUS - PENTACAM 4 Maps Refractive

-2017G

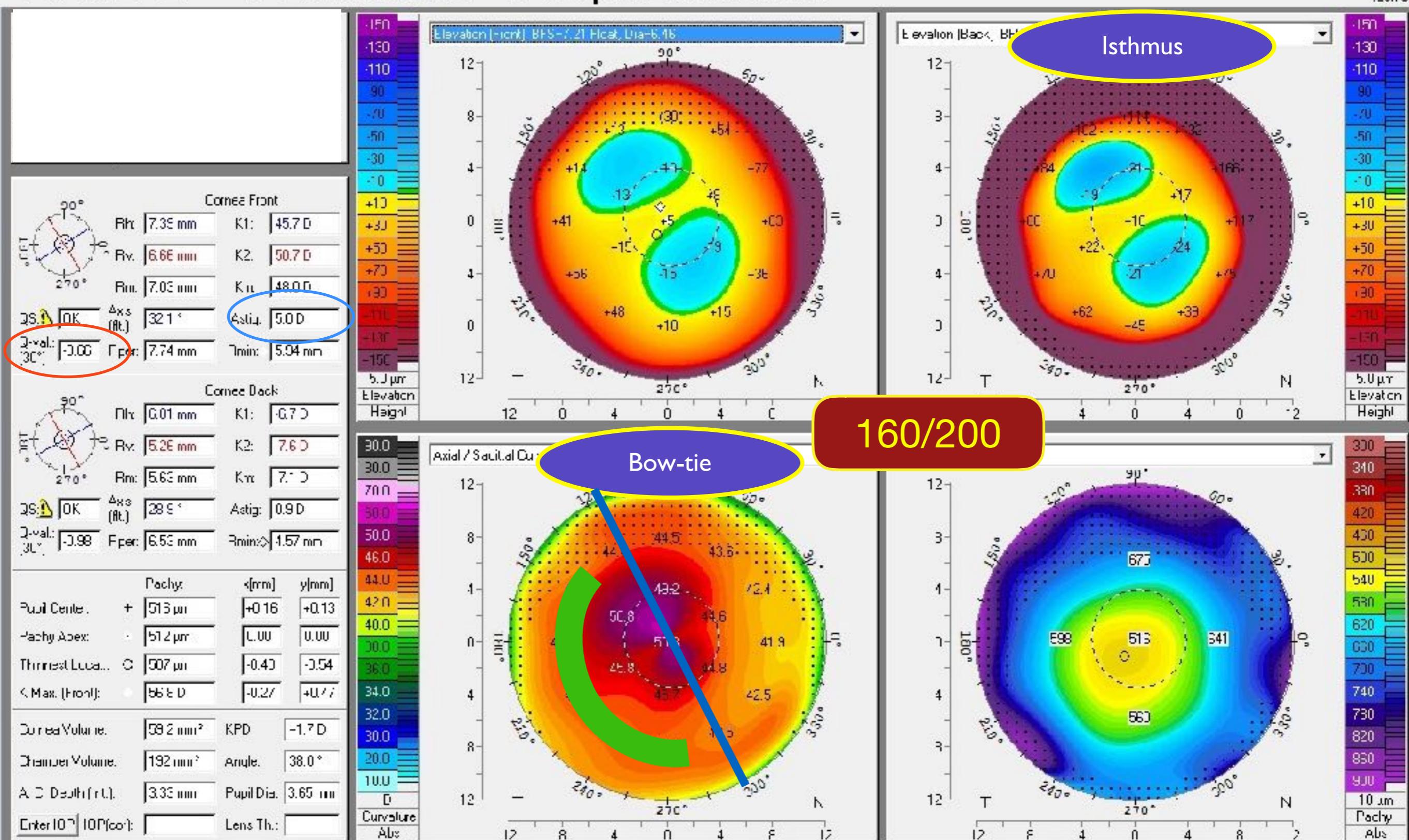




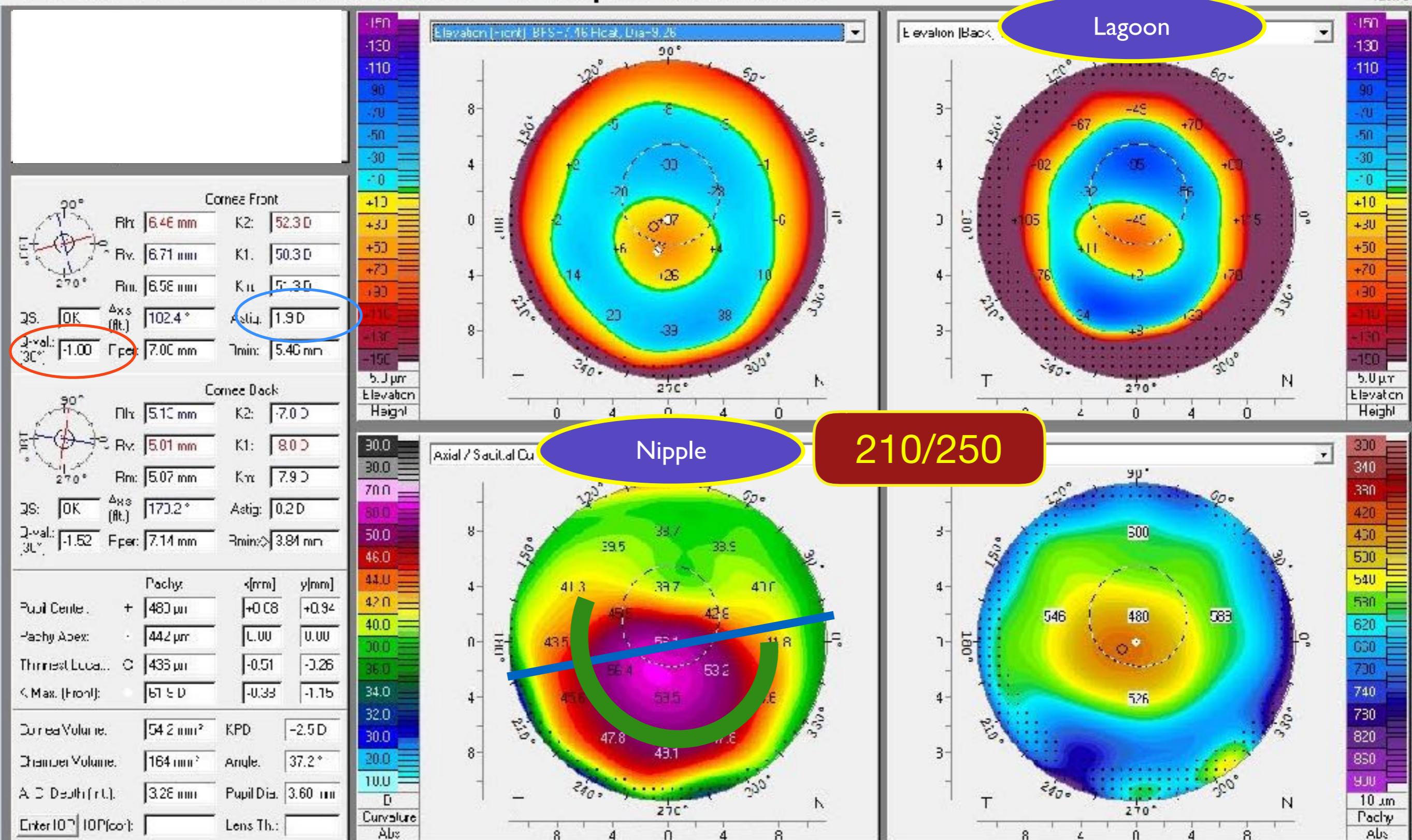
# OCULUS - PENTACAM 4 Maps Selectable



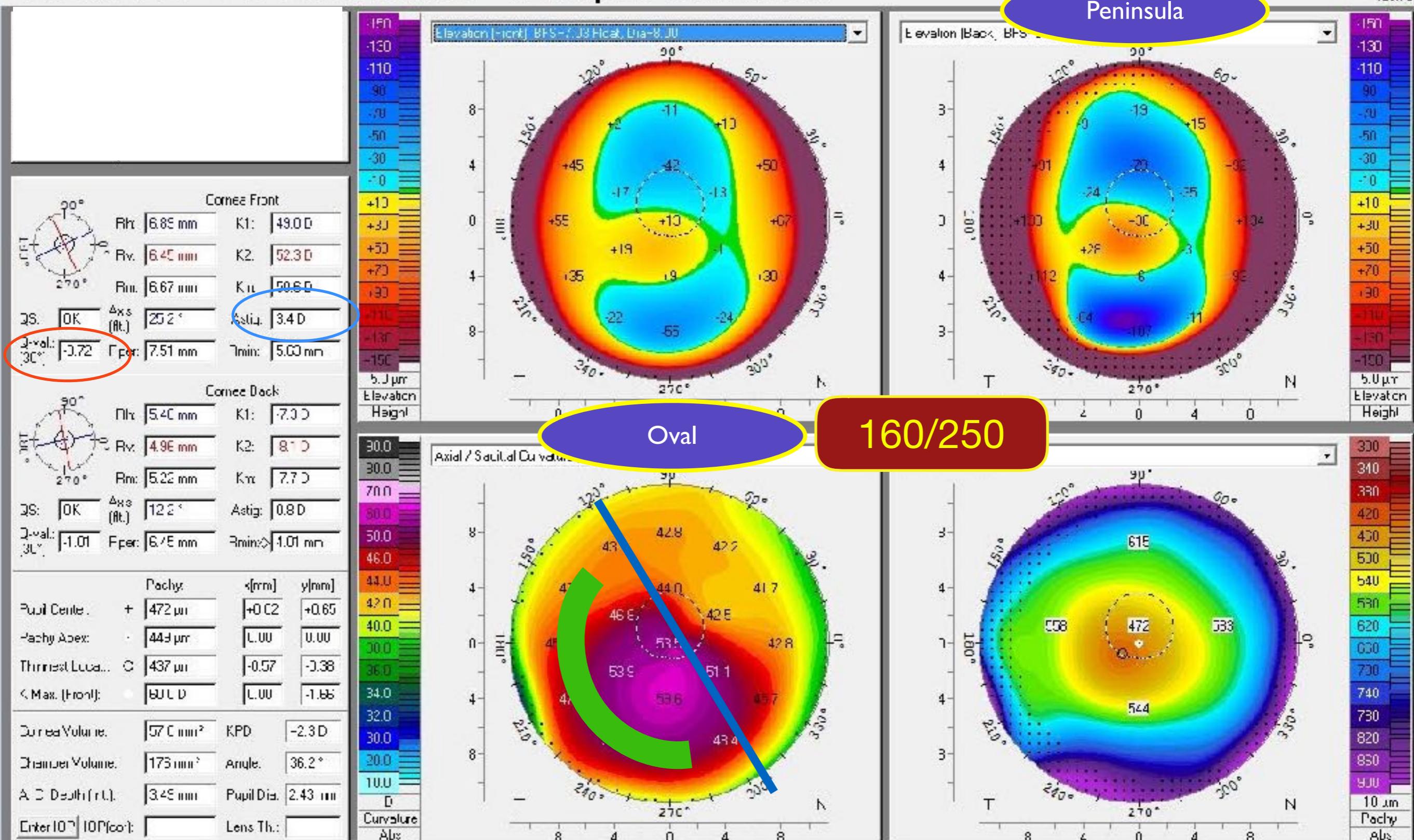
# OCULUS - PENTACAM 4 Maps Selectable

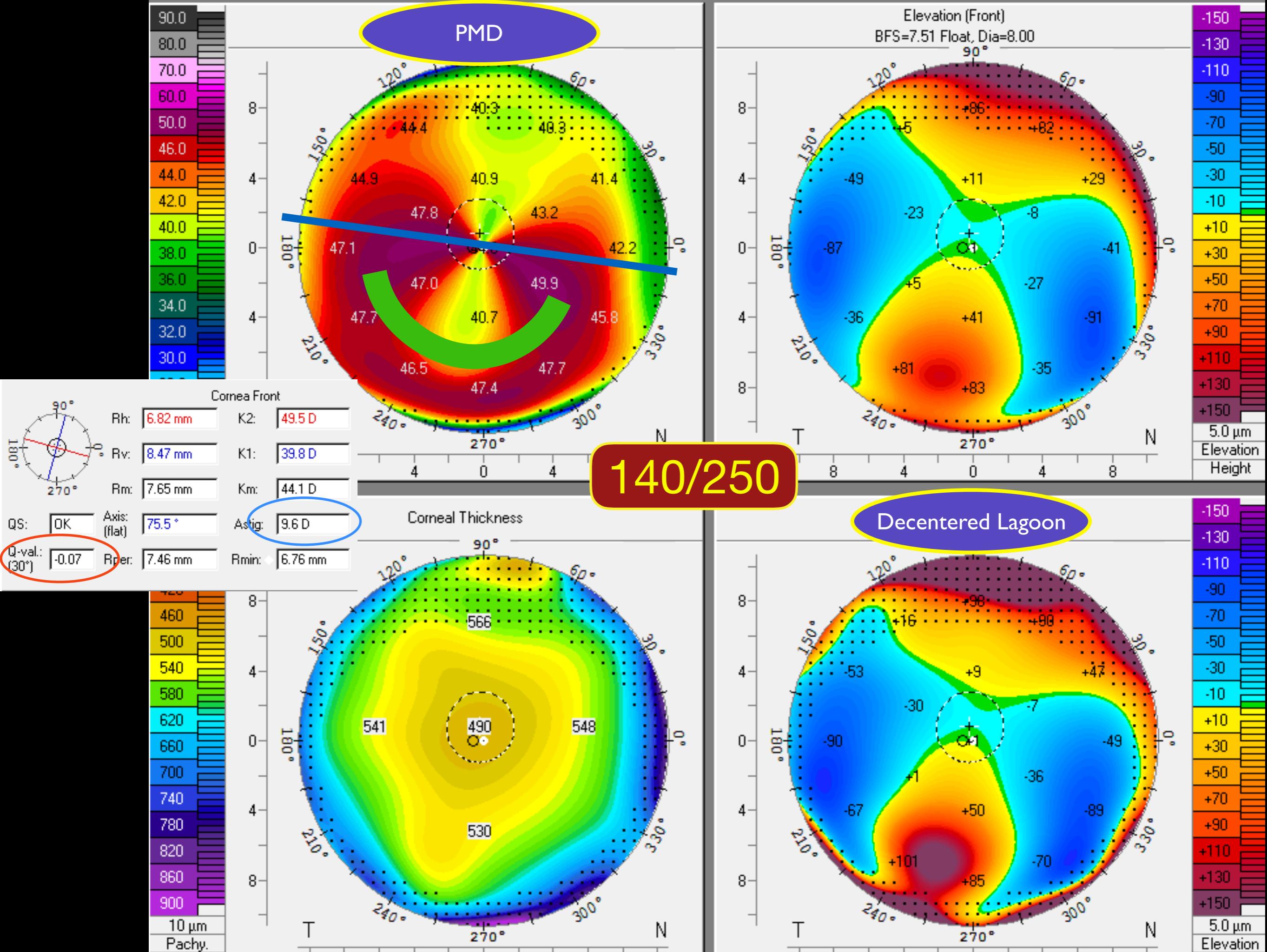


# OCULUS - PENTACAM 4 Maps Selectable



# OCULUS - PENTACAM 4 Maps Selectable





# NOMOGRAM

## SUMMARY GENERAL RULES

Q preoperative - Q change induced by the ring = - 0.23 (TARGET FINAL Q VALUE)

# NOMOGRAM

## SUMMARY GENERAL RULES

- Avoid overcorrection (astigmatism axis inversion / hiperopia / positive Q);
- Avoid ICRS implantation in flat areas;
- Quality of vision (Q) is more important than the refractive result;

## CONCLUSION

- The nomogram is reproducible and aims to treat the corneal deformity (not the refraction);
- The posterior elevation maps may aid the identification of keratoconus type;
- Posterior elevation may provide better morphology classification of ectasia phenotype than the usual maps (sagital / axial);



THANK YOU!!!



[leonardo@ceoclinica.med.br](mailto:leonardo@ceoclinica.med.br)



# CLINICAL CASES

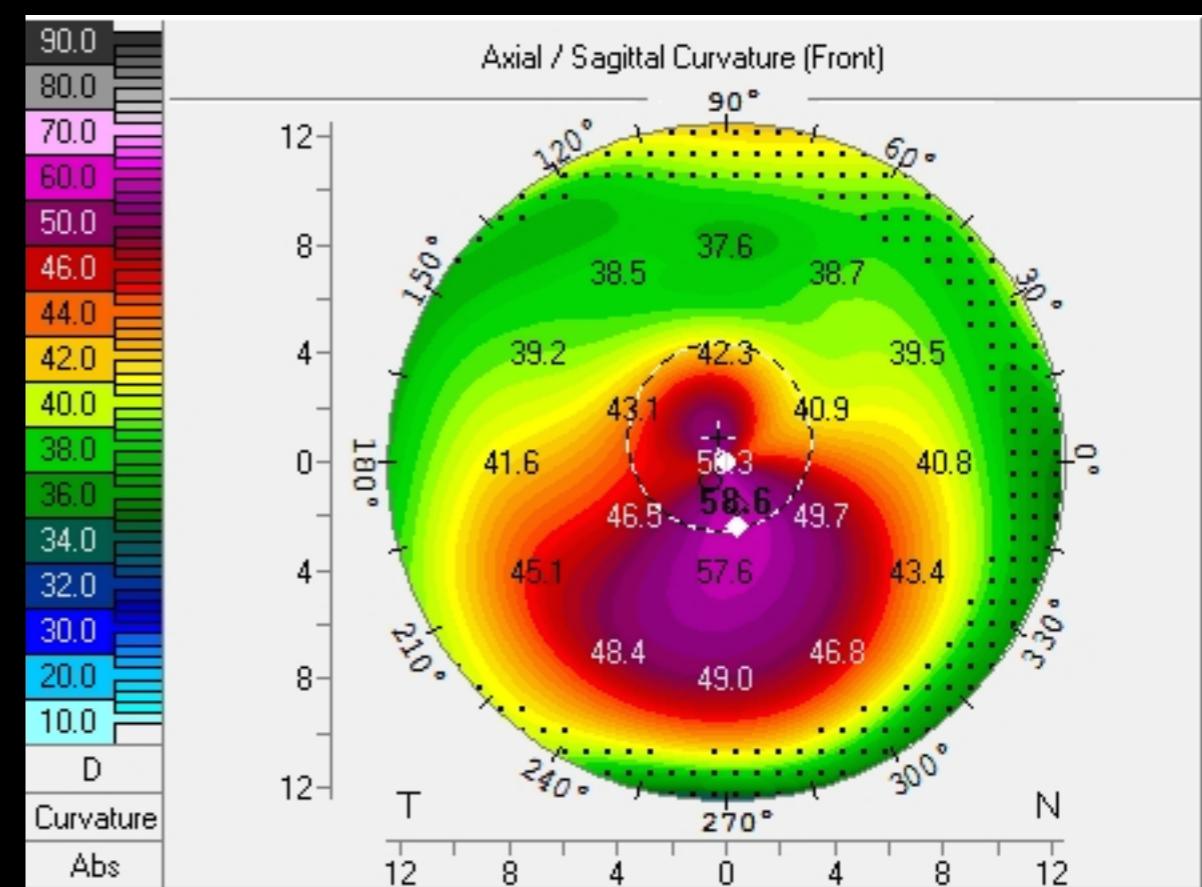
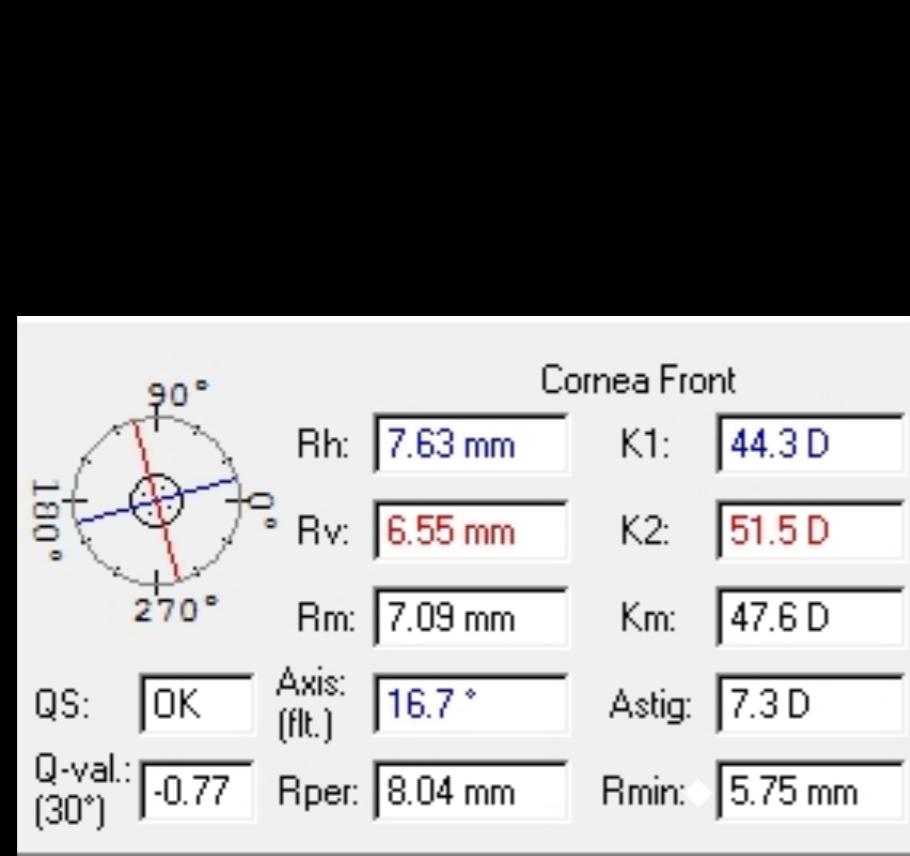
# CASE 1

$Q = -0,77$ ,  $K1 = 44,3 \text{ D}$   $K2 = 50,8 \text{ D}$   $\text{Astigm} = 5,1 \text{ D}$

Classification      Oval

-0,77 (Q) - x = - 0,23    x = 0,54

Surgical Plan      160/150 + 160/150

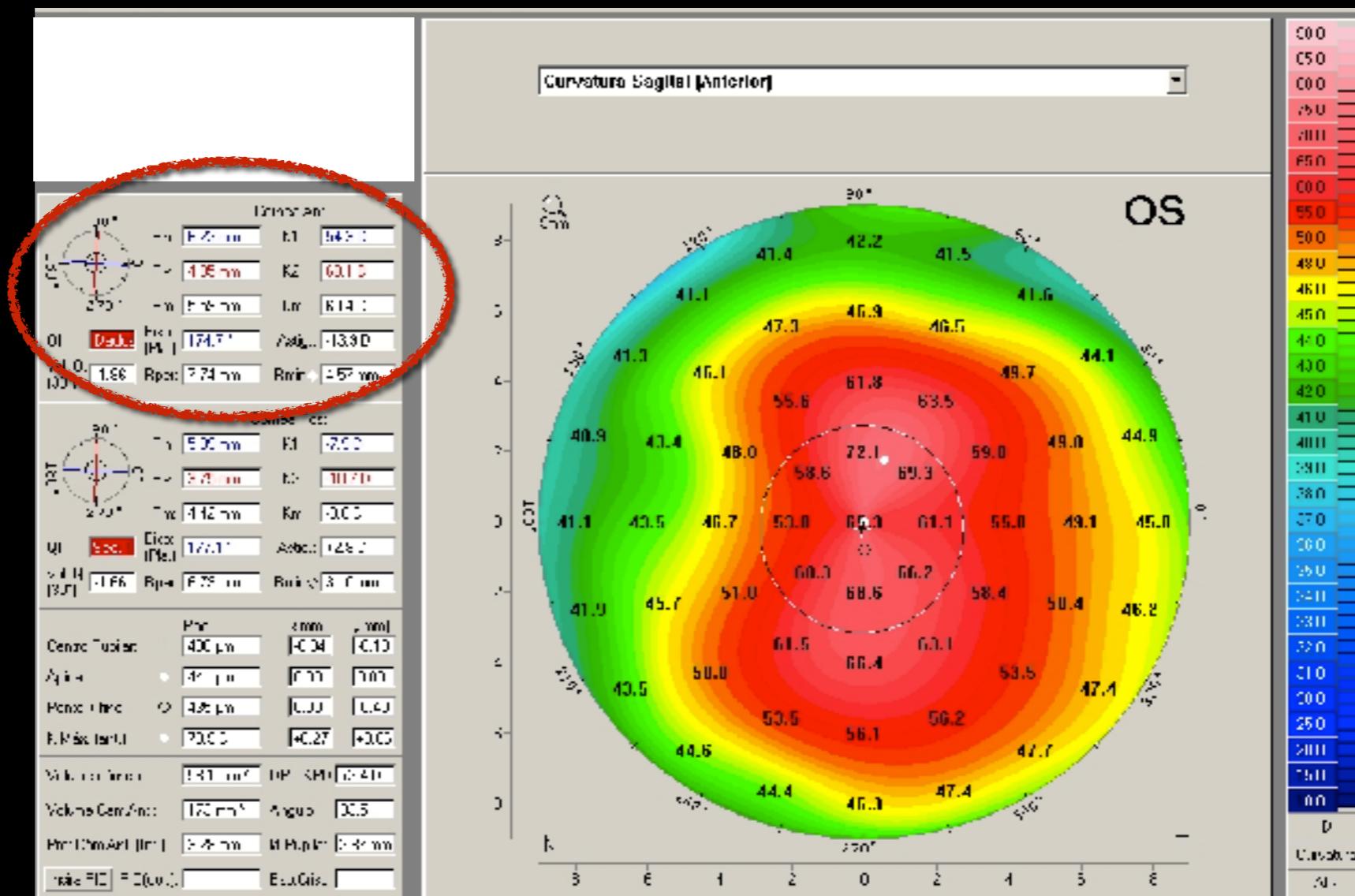


# CASE 2

$Q = -1,86$ ,  $K_1 = 54,3$  D  $K_2 = 68,1$  D  $\text{Astigm} = 13,9$  D

Classification  
Surgical Plan

Astigmatic  
 $140/250 + 140/250$



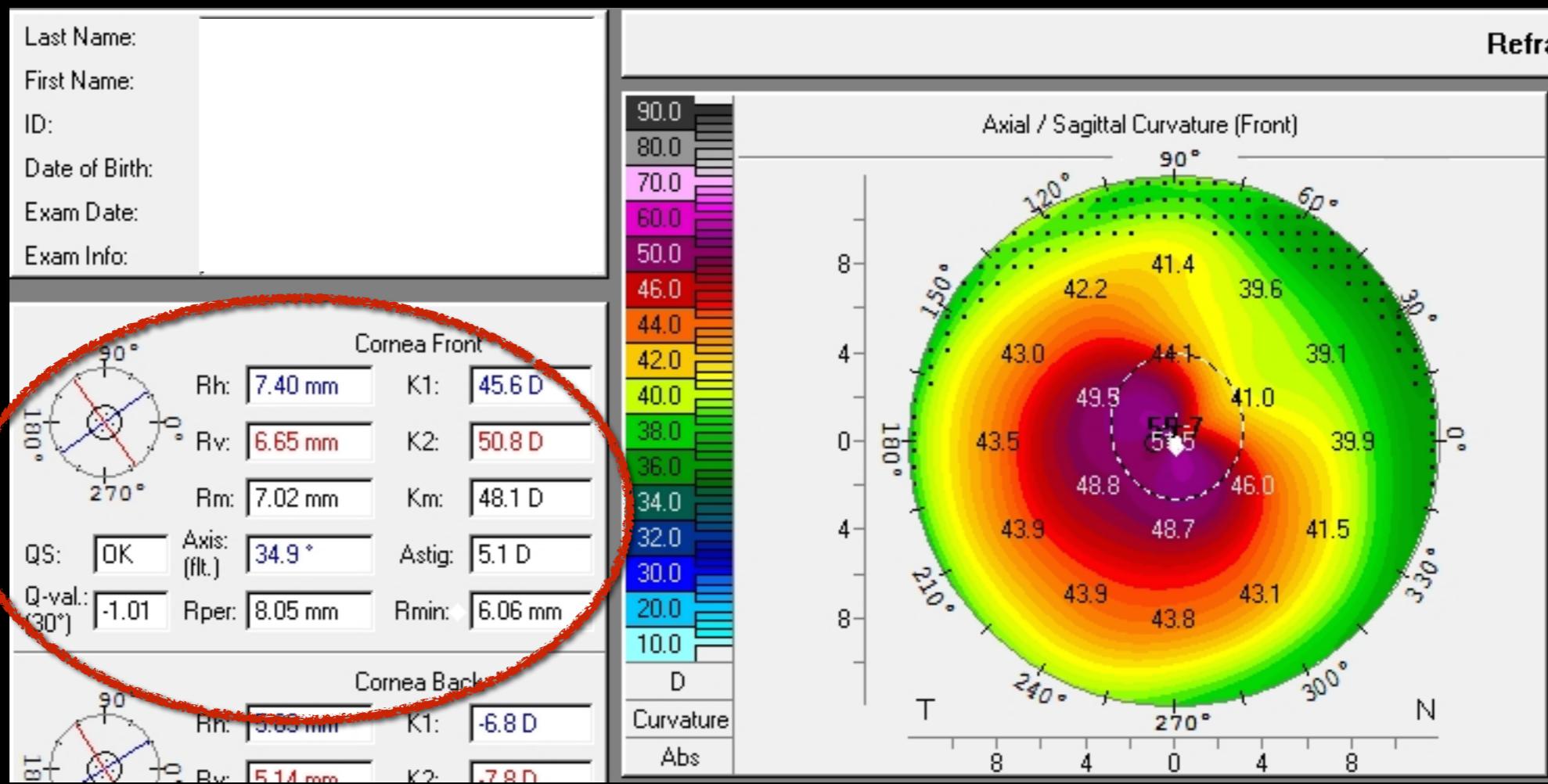
# CASE 3

$Q = -1,01$ ,  $K1 = 45,6 \text{ D}$   $K2 = 50,8 \text{ D}$   $\text{Astigm} = 5,1 \text{ D}$

Classification      Oval

$-1,01 \text{ (Q)} - x = -0,23$      $x = 0,78$

Surgical Plan      160/200 + 160/150



# CASE 4

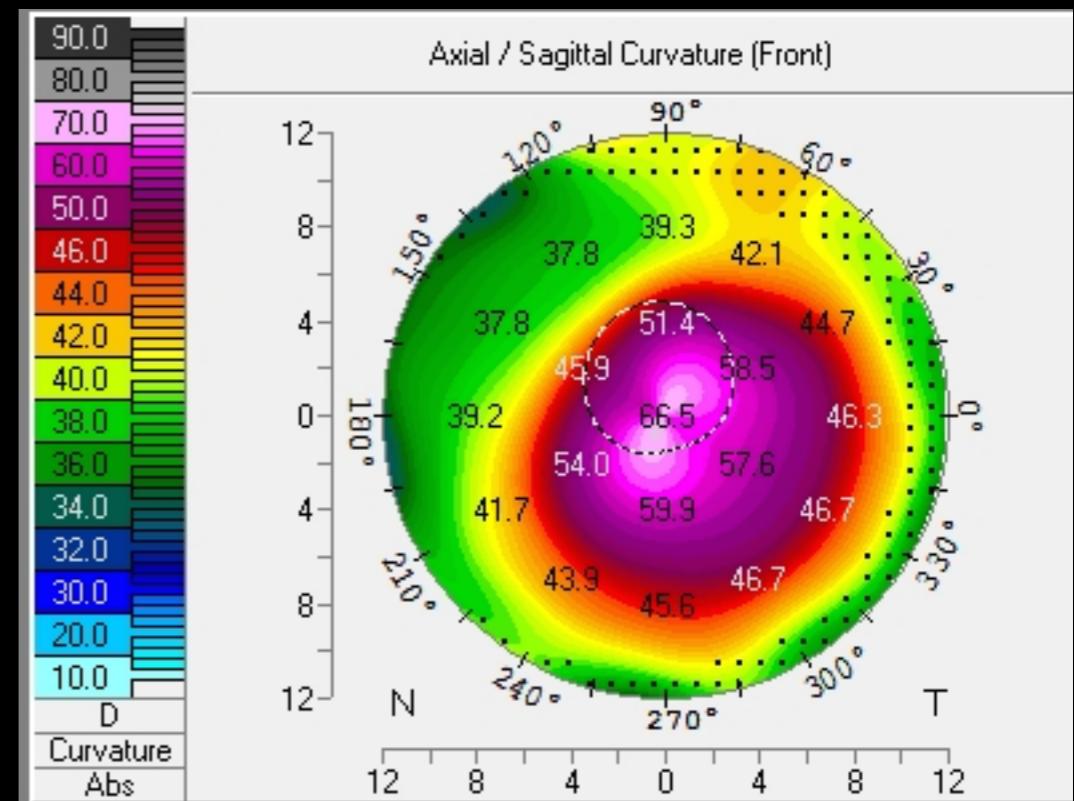
$Q = -1,98$ ,  $K1 = 55 \text{ D}$   $K2 = 62,9 \text{ D}$   $\text{Astigm} = 7,9 \text{ D}$

Classification      Astigmatic

Surgical Plan      140/200 + 140/200

90°  
0°  
270°

K1:	55.0 D	Astig:	7.9 D
K2:	62.9 D	Q-val:	-1.98 (30°)
Axis:	151.1 °	QS:	OK
Pachy:	x [mm]	y [mm]	
Pupil Center:	+ 450 µm	-0.17	+0.83
Thinnest Locat.:	○ 379 µm	+0.73	-0.27
Chamber Volume:	233 mm <sup>3</sup>	Angle:	37.8 °
A. C. Depth (Int.):	4.12 mm	Pupil Dia:	3.21 mm
Enter IOP	IOP(cor):	Lens Th.:	



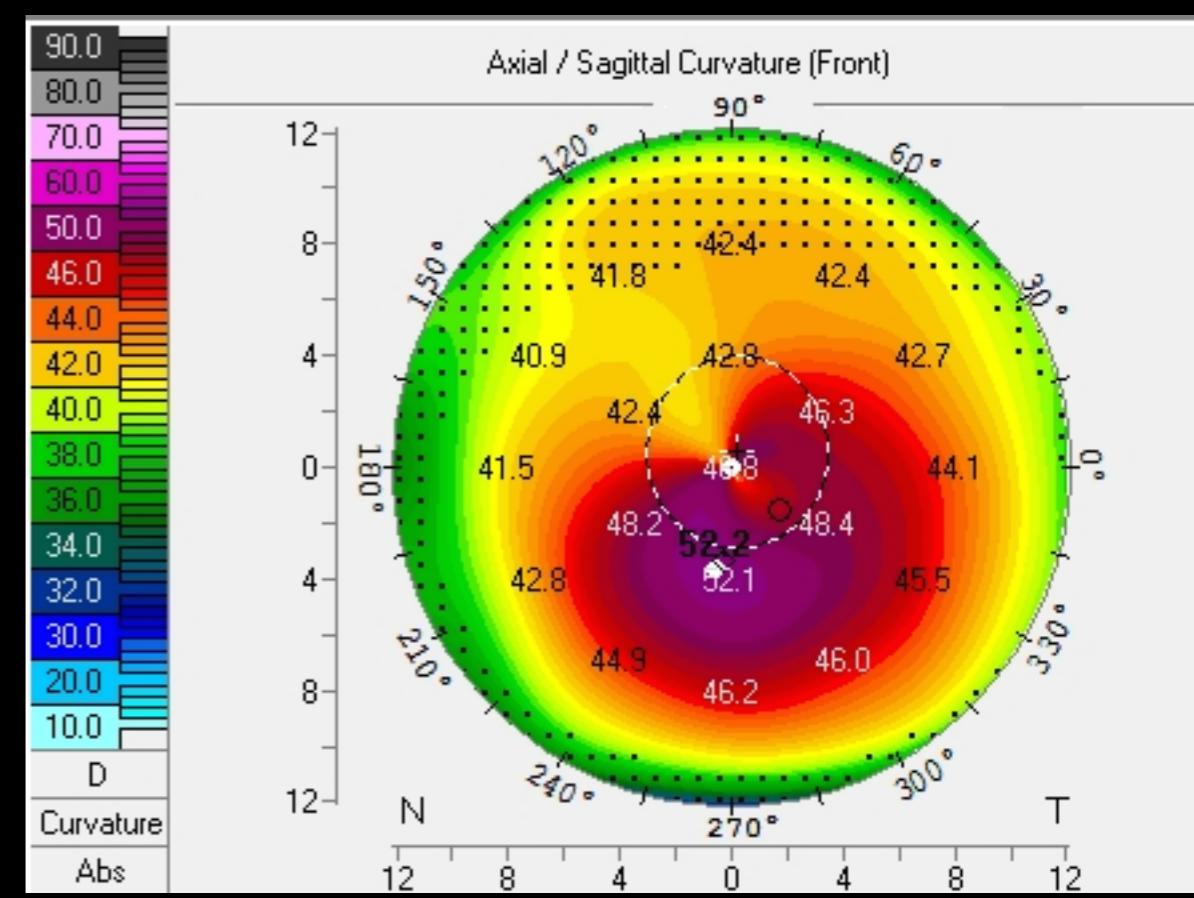
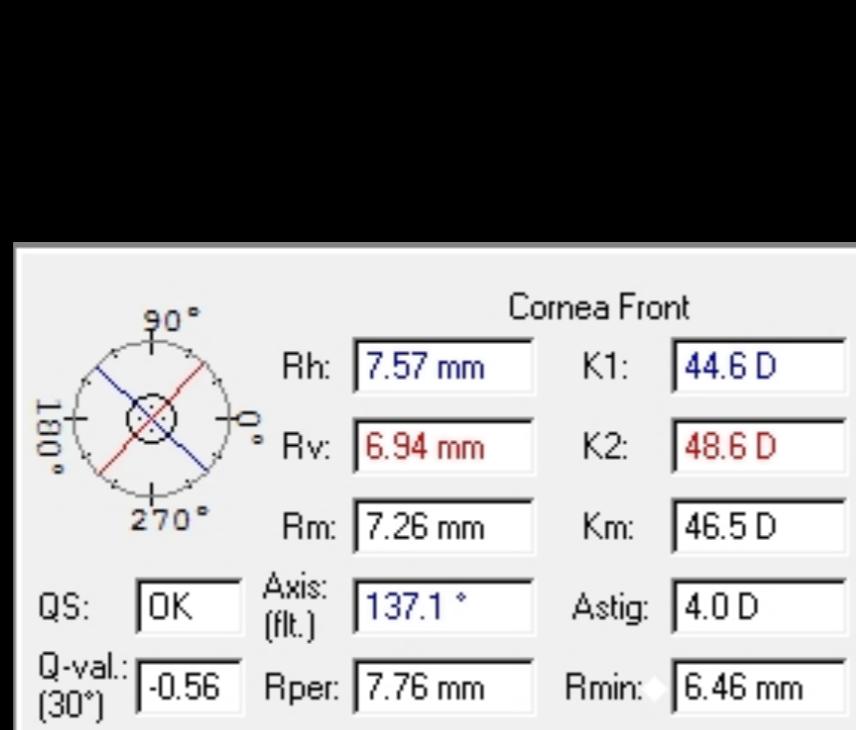
# CASE 5

**Q = -0,56 K1 = 44,6 D K2 = 48,6 D Astigm = 4,0 D**

# Classification      Oval

$$-0,56 \text{ (Q)} - x = -0,23 \quad x = 0,33$$

Surgical Plan 160/200

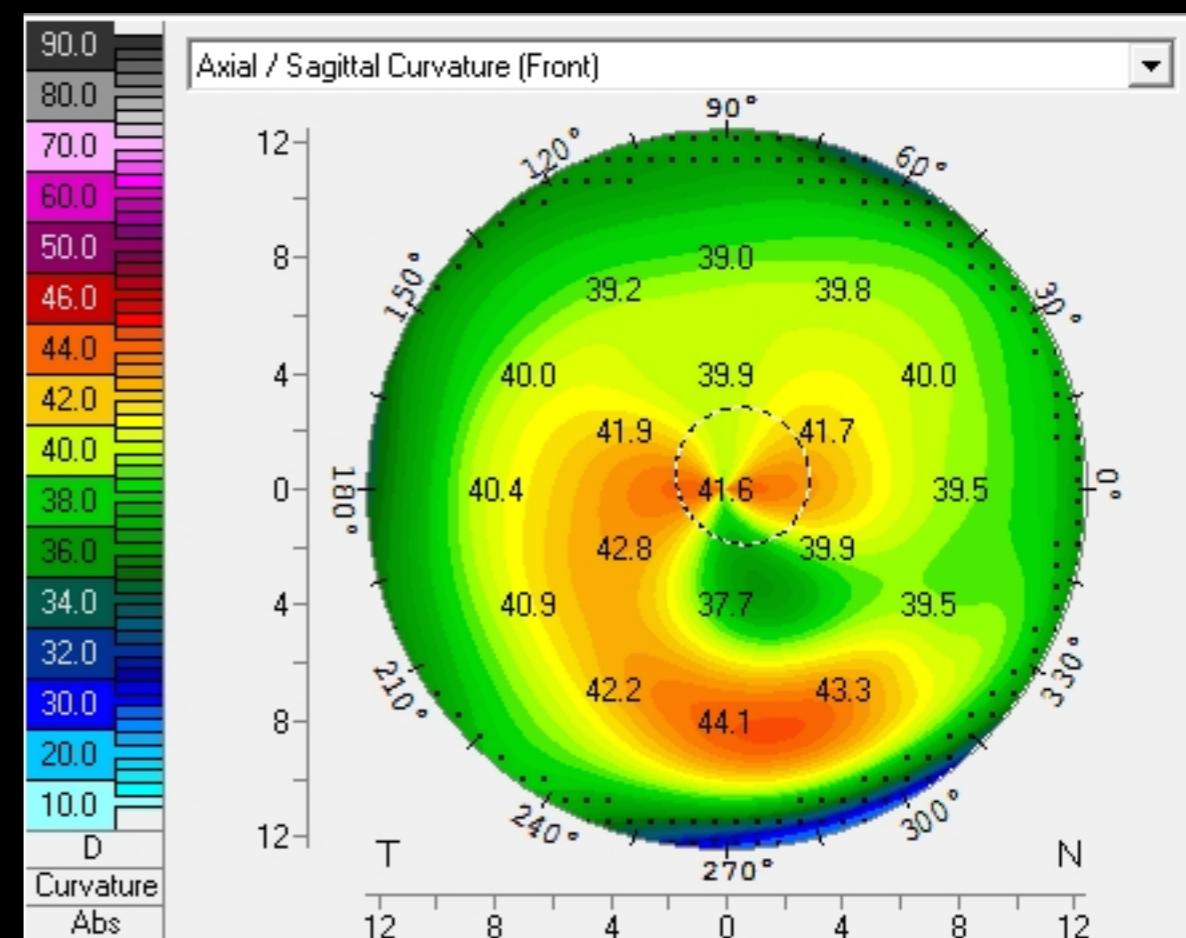
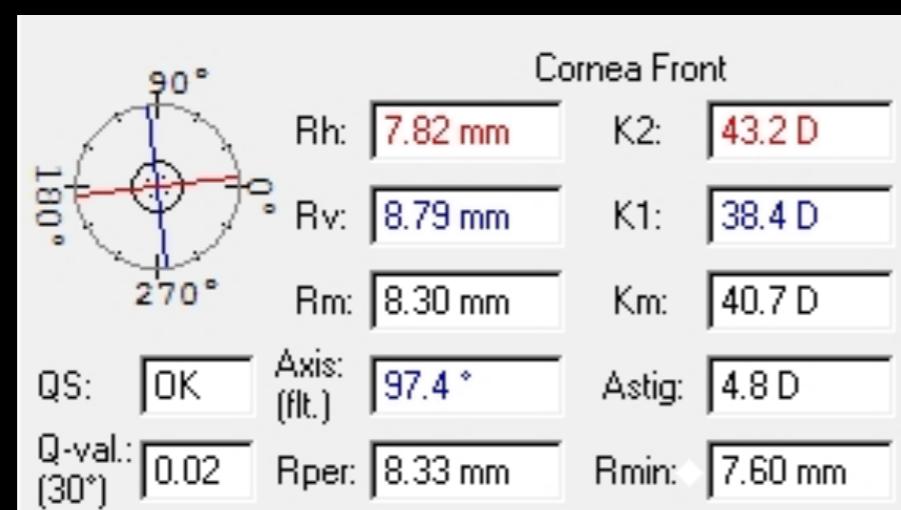


# CASE 6

$Q = 0,02$   $K1 = 43,2$  D  $K2 = 38,4$  D  $\text{Astigm} = 4,8$  D

Classification      DMP "like"

Surgical Plan      140/150



# CASE 7

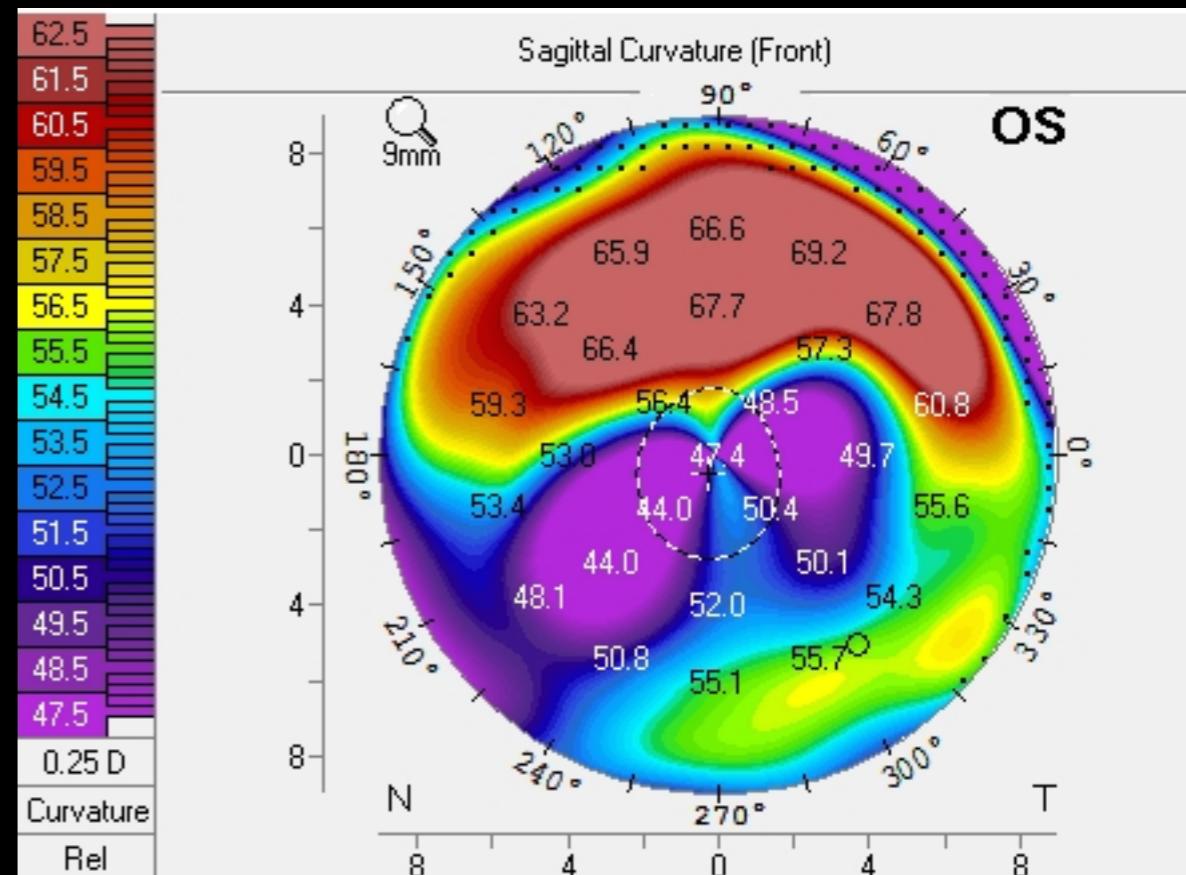
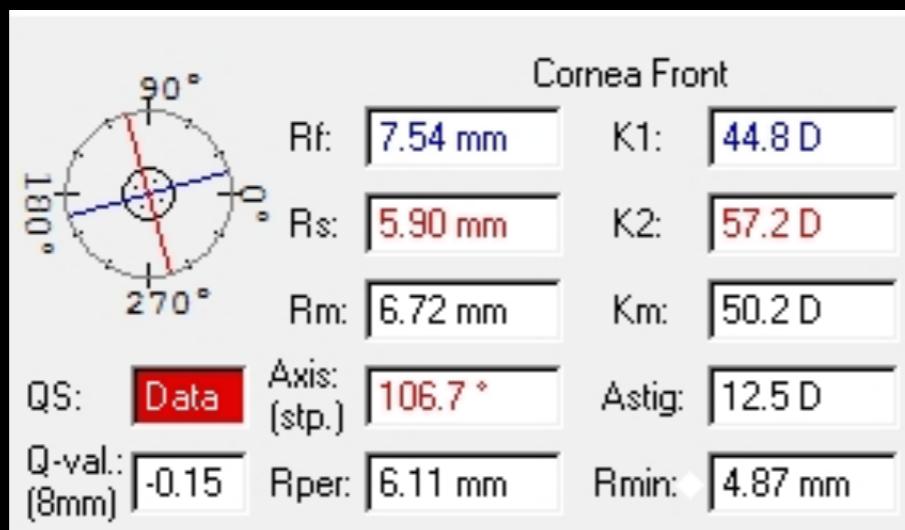
$Q = -0,15$   $K1 = 44,8$  D  $K2 = 57,2$  D  $\text{Astigm} = 12,5$  D

Classification

Post-keratoplasty

Surgical Plan

140/250 + 140/250



# CASE 8

$Q = -1,71$   $K1 = 52,4$  D  $K2 = 55,6$  D  $\text{Astigm} = 3,3$  D

Classification Nipple

-1,71 (Q) - x = - 0,23 x = 1,48

Surgical Plan 320/250

