

SURGICAL CONSIDERATIONS FOR TODAY'S ODS



In our role as eye care providers one of our main goals is to preserve the vision of the patients we serve. Sometimes this means providing the best vision in eye-glasses or contact lenses, or treating ocular disease to slow the progression of vision loss, uncovering an ocular manifestation of systemic disease, or discussing surgical options and making the best referral to an ophthalmology

colleague. This issue focuses on that last topic—surgical options for our patients.

Although cataract and refractive surgery are life-changing experiences for patients, surgery can create anxiety. Properly educating patients prior to referral can help to offset their concerns. In this issue, Kayla Karpuk, OD, and I (JS), discuss this and other tips for helping patients cross the goal line to 20/happy in our article “Troubleshooting Unhappy Cataract Surgery Patients” on page 30.

Before referring a patient for cataract or refractive surgery, it's important to optimize the ocular surface in order to maximize visual outcomes and allow uninterrupted surgical intervention. Read about addressing ocular surface disease preoperatively and postoperatively in “Treat Dry Eye Disease Before Cataract and Refractive Surgery” by Hardeep K. Kataria, OD, FAAO, on page 24.

The silver tsunami that is the baby boomer population is causing a precipitous backlog in cataract surgery scheduling as the demand for cataract extraction continues to rise. Richard Chu, DO, and Robert Chu, OD, take a deep dive into this phenomenon in their article, “Economic Forces Affecting Cataract Surgery” on page 19. With these growing demands, the medically focused optometrist's role expands beyond surgical comanagement of patients to lifelong management of patients' medical eye care needs.

IOL technology keeps advancing, today enabling us to provide distance, near, and intermediate vision for patients. Understanding the latest technologies will help you to strengthen your presurgical conversations with patients and prepare them for their surgical consultations. “IOL Roundup” by Editor-in-Chief Karen Roman on page 32 provides an overview of available and upcoming advanced-technology surgical options.

The need to comanage patients for cataract and refractive surgical procedures will continue to grow along with the aging population. Optometrists are well positioned to be the primary eye care providers for our patients, and surgical comanagement is just one high-profile example of how we can serve this need.

We hope you enjoy this issue of *Modern Optometry* and that you take away some valuable pearls. Feel free to reach out to us with questions or comments at modernOD@bmctoday.com. ■

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