

## Surgical Case Study Series #1

**Patient  
Description & History**

A 75 year old female with bilateral cataracts, glaucoma, and astigmatism who cannot easily perform daily activities. BCVA of 20/50 OD and 20/80 OS. Oblique Anterior Corneal astigmatism of 2.2D OD and 2.6D OS. The patient expresses a desire to be free of glasses and her glaucoma drops if possible.

**Glaucoma  
Diagnosis:**

CD Ratio of .5 OD and 0.7 OS with loss of RNFL and glaucomatous visual field Changes OS>OD. Mild to Moderate Open Angle Glaucoma on a Prostaglandin. Pre operative IOP was 19mmHG OD and 20 mmHg OS on glaucoma treatment.

**Treatment  
Course:**

Cataract surgery using at toric lens and ReLACS (Refractive Laser-Assisted Cataract Surgery) was performed. A single iStent was uneventfully placed in the inferonasal quadrant following cataract surgery. Both eyes had a similar surgery Prostaglandin was discontinued at post op week #1

**Outcomes:**

Postoperative IOP at 3 months was 16 OU. Uncorrected VA was 20/20 OD and 20/25 OS with a small amount of residual astigmatism. The patient was thrilled to be off glaucoma medications and not dependent on glasses for distant vision.

**Pearls:**

*Dr. John Berdahl*

I discuss MIGS with all patients with concomitant cataract and glaucoma. I also discuss options to improve uncorrected vision in all my cataract patients. Since the iStent has a safety profile similar to cataract surgery alone and appears to be refractively neutral, I feel confident in combining ReLACS with the iStent. In fact, these are often my happiest patients since we can often eliminate medications and decrease the need for glasses in one surgery

**PROVIDED BY:  
JOHN P BERDAHL MD  
VANCE THOMPSON  
VISION**

