

Pearls for efficient femtosecond laser cataract surgery in busy practice

Step-by-step surgical strategies can help overcome fears of incorporating this technology

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Take-home message: The introduction of a femtosecond laser for cataract surgery into a practice can bring the concern for the potential loss of efficiency. A Louisville surgeon provides some solid advice and shares some strategies to make this new technology as efficient as possible.

By Asim R. Piracha, MD; Special to Ophthalmology Times

Louisville, KY :: When my practice acquired a femtosecond laser for cataract surgery, the potential loss of efficiency was a huge concern.

However, it didn't take us long to become comfortable using the femtosecond laser. Today, our femtosecond laser-assisted cataract surgery (FLACS) conversion rate is about 50%, and we are happy with the procedure speed, clinical outcomes, and revenue impact.

My average total vacuum time, including imaging, treatment, and removing the interface, is just 1.5 minutes. I would like to share some of the strategies I have developed to make FLACS as efficient as possible.

Docking

Our practice uses the Catalys Precision Laser System (Abbott Medical Optics). To me, the most important step in a FLACS procedure is the initial head

positioning and docking of the laser's liquid optics interface. If that is done well, everything else flows smoothly.

Preoperatively, I mark the limbus at the 3 and 9 o'clock positions. In the laser room, I line up those limbal marks with the reticles on the interface.

This better aligns the pre-programmed astigmatic keratotomy marks on the correct axis to eliminate this extra step during laser programming to adjust them.

To dock, the laser interface is centered over the limbus, with equal sclera visible inferiorly and superiorly, and ensure the patient's iris plane is parallel to the floor. This helps eliminate tilt, provides better optical coherence tomography (OCT) imaging, and allows me to use my preferred capsulotomy method, scanned capsule centration.

If the patient has trouble lying still, I hold the head during the OCT scanning., and rely on my technician to operate the laser. Otherwise, I operate the laser myself, which is more efficient and stress-free.