

# Spotlight session on Collagen Cross-linking

Chairs:

A. John Kanellopoulos, MD-Athens, Greece & New York City, NY

Doyle Stulting, MD-Atlanta, Georgia

Faculty:

Farhad HAFEZI-Geneva, Switzerland

Theo Seiler, MD-Zurich, Switzerland

John MARSHALL-London, UK

Michelle CHO-New York City, USA

Eric DONNENFELD-Rockville Ctr, NY, USA

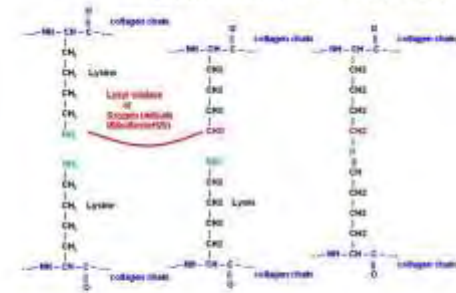


1-How many of you currently perform CXL?

a-YES

b-No

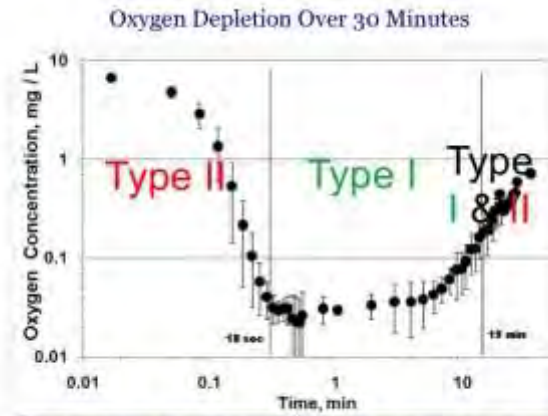
## Biochemical reaction



2-Do you understand how CXL works?

a-YES

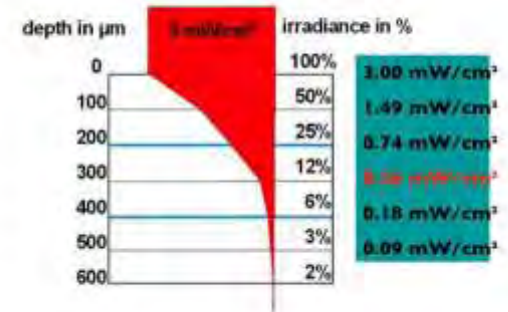
B-no



Depletion and gradual replenishment of dissolved oxygen below a 100 μm thick corneal flap, saturated with 0.1% RF during 3 mW/cm<sup>2</sup> UVA irradiation at 25 °C.

## Decrease of UV-intensity

courtesy E. Spoel MD



5-If CXL is offered early enough,  
can it eradicate clinical  
keratoconus?

a-yes

b-no

c-I do not know

6-Should women with ectasia be monitored closer during pregnancy for ectasia progression or recurrence (if they had CXL)?

a-yes

b-no

c-don't know

7-Should a 45 year old male recently diagnosed with KCN be offered CXL?

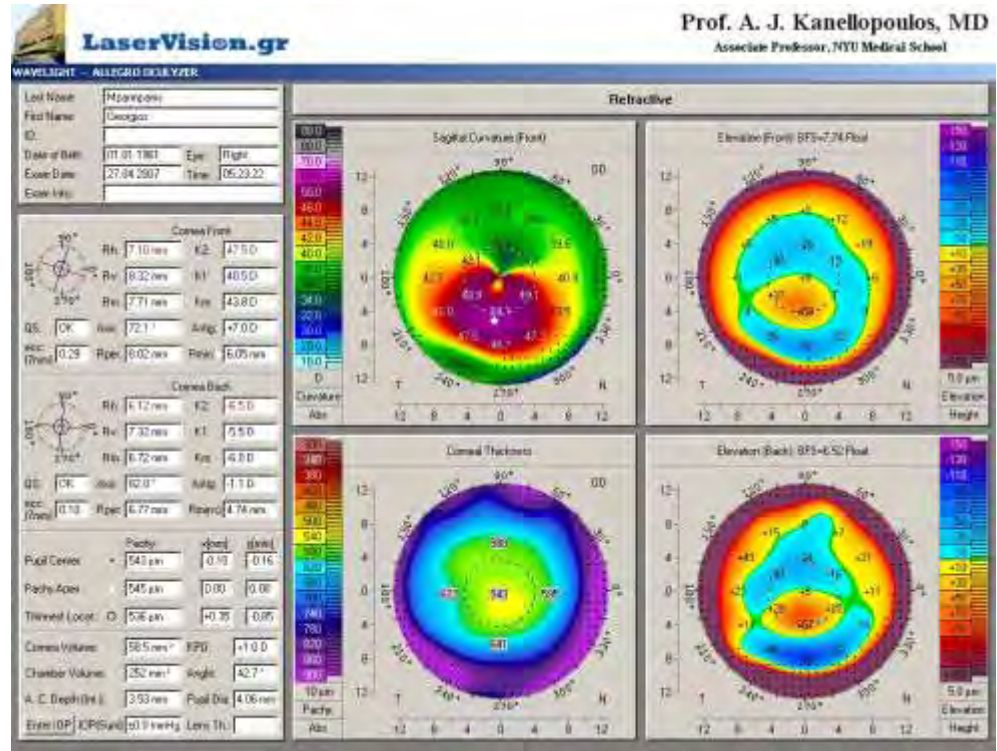
a-Yes

b-no

c-I do not know



8-is this KCN?  
 a-yes  
 b-no  
 c-do not know

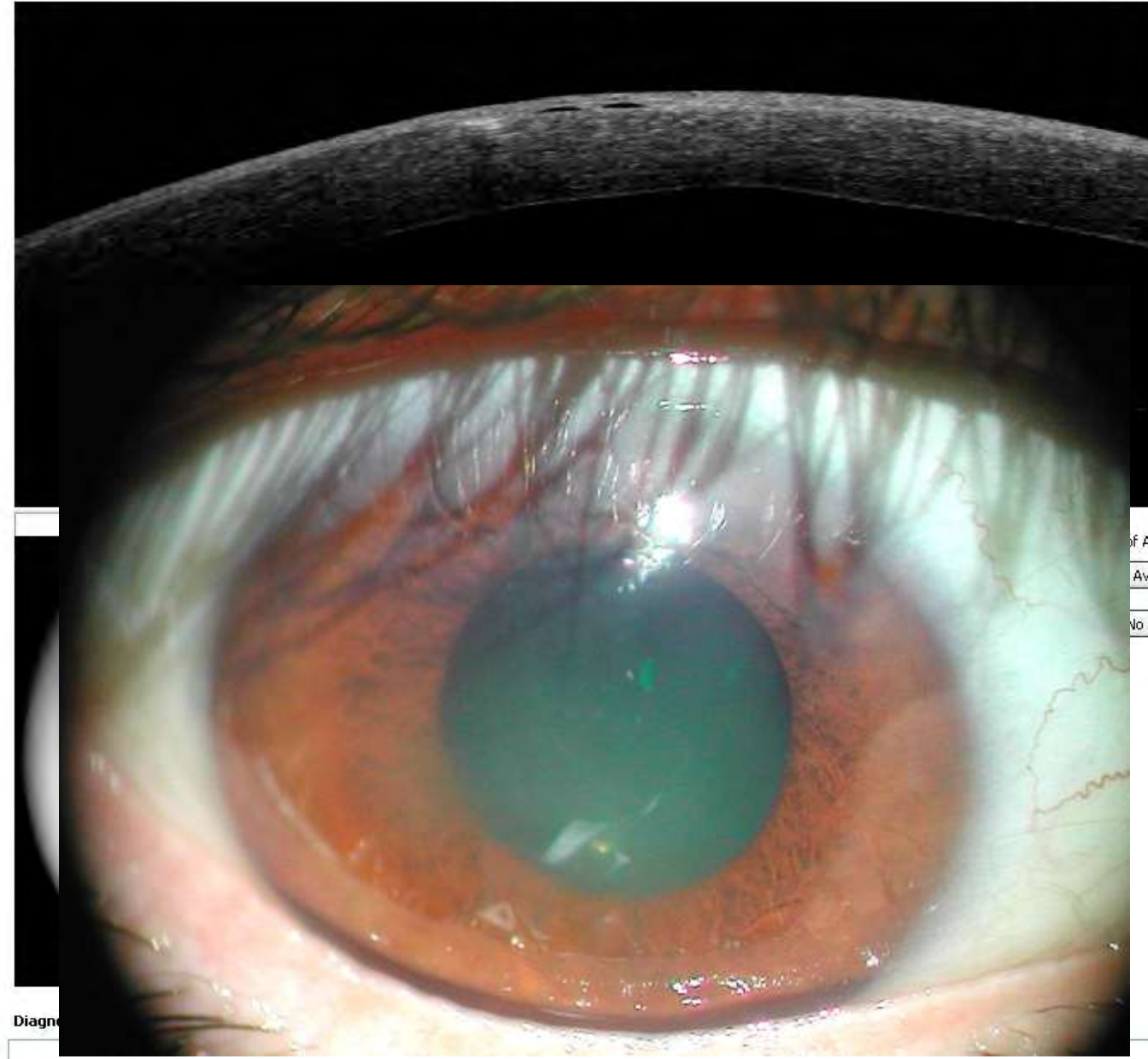


Patient: Georgios MPARMPANIS  
DOB (age): 06/18/1961 (48)  
ID:

Disease:  
Algorithm Version: A4, 0, 0, 143  
Gender: M

Photographer:  
Exam Date: 10/13/2009  
Physician: BOURDOU, Sophia

OD CL - Line SSI= 36.3 6.00mm Scan Length



250  $\mu$ m

of Averages:12

Average

No Average

Diagn



3-How long do you think CXL lasts?

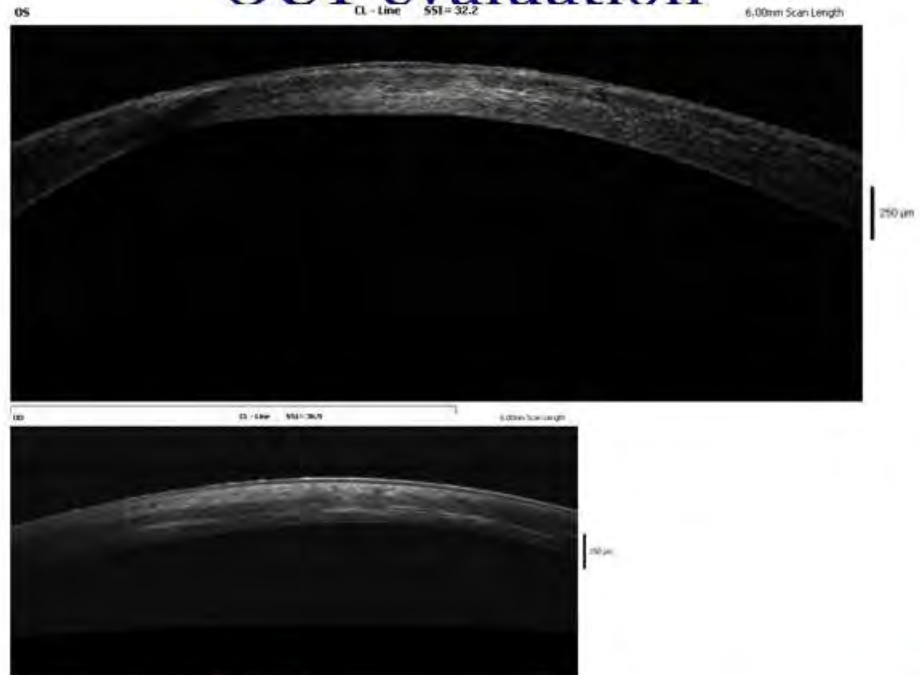
a:1 year

b:2-3 years

c:3-5 years

D: >10 years

### OCT evaluation



5-If CXL is offered early enough,  
can it eradicate clinical  
keratoconus?

a-yes

b-no

c-I do not know

Epithelial thickness: nl-KCN-KCNcxl'ed

Epithelial and mapping on normal and keratogenic (non-treated and treated) eyes, Konefopoulos et al

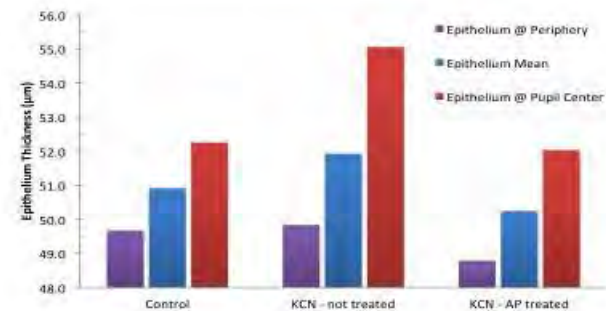


Figure 7: Epithelium thickness across the three groups of study, at the periphery, mean, and at the pupil center.

4-What is the worst complication of CXL?

a-Infectious keratitis

b-cornea scarring

c-cornea melt

d-dry eye

e recurrence of ectasia

