

How SMILE Fits Into the OD-MD Practice

Patient education and collaborative care lead to optimal outcomes.

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Advances in refractive surgery, notably small incision lenticule extraction (SMILE) with the VisuMax femtosecond laser (ZEISS), have opened up the

possibility of laser vision correction to a broader population. SMILE has gained traction in the United States since expanded indications were approved to include astigmatism in 2018. SMILE is now approved to treat myopic sphere from -1.00 D to -10.00 D and cylinder from -0.75 D up to -3.00 D. This creates new opportunities not only for patients, but also for the refractive surgeons and optometrists who comanage their care.

In this article, we discuss how patient education and collaborative care help ensure successful outcomes.

Patient Education and Selection is Key

Optometrists are usually the first eye care professionals to discuss refractive surgery with patients. Their role is to evaluate, educate, and guide patients through the process of making decisions about laser vision correction. Working with an educated patient to identify the procedure that is best suited to the patient is crucial.

A comprehensive, objective ocular examination along with a subjective assessment of a patient's visual needs and expectations set the stage for refractive surgery success. With so many options today, it's important that the entire team is well educated on the factors that differentiate these choices.

We describe each procedure relative to our assessment of the individual patient. Often, a patient may be a candidate for all three procedures. While many patients are familiar with LASIK and PRK, few have heard of SMILE. We keep our initial explanation of SMILE simple and straightforward.

SMILE is a minimally invasive procedure in which a surgeon uses a femtosecond laser to create a pocket through which a precise amount of tissue—a stromal lenticule—is removed. This effectively reshapes the cornea to correct

the myopic and astigmatic refractive error. We stress that all laser vision correction is safe and effective with high success rates.

Some fundamental differences between SMILE and other refractive procedures tend to resonate with patients. For example, patients who have an active lifestyle and are worried about flap complications tend to prefer SMILE. Overall, the concept of a minimally invasive surgery is appealing to patients. A one-step, one-laser process is easy to understand.

SMILE Experience

A patient's cooperation during refractive surgery is important for both the surgeon and the patient. Explaining to patients what they will feel, see, and hear at every step reduces anxiety and is key to surgical success.

For example, we explain that the patient will feel a slight pressure on the eye and will see a white ring with a green dot that will slowly gray out. At that point, the surgeon will complete the procedure. There is no odor from the ablation or noise from the laser. With this basic knowledge, patients better understand the surgical process.

When patients are properly educated preoperatively, they readily and calmly cooperate with the surgeon's directions during the procedure. This ensures the best possible surgical experience and outcome.

SMILE Post-op Protocol

Throughout the postoperative period, the optometrist provides supportive care and facilitates interactions with the refractive surgeon when necessary.

On day 1 after SMILE, we expect to see a quiet nonhemorrhagic eye. The patient should be happy, comfortable, and have good functional vision.

During the past 3 years, we have seen fast visual recoveries and "Wow!" factors equal to those of our LASIK patients. We

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EDUCATING PATIENTS ABOUT A POSSIBLE SMILE TO LASIK CONVERSION

When describing the various refractive surgery options to patients, we use the umbrella term "laser eye surgery," and we tend not to get into the technicalities of each option, as they can be confusing for patients. This is also an efficient way for us to describe the possibility that the surgeon may decide on the day

of surgery to perform either SMILE, which we call a "pocket" laser eye surgery, or LASIK, a "flap" laser eye surgery, depending on the patient's eye anatomy or prescription. Having already been educated about both surgeries, patients are confident that the surgeon will choose the technique that is best and safest for them.

attribute these excellent outcomes to surgical time and expertise with SMILE. In fact, we have worked with patients who have had LASIK on one eye and SMILE on the other eye, and we celebrated good vision at day 1 for each eye.

Postop care after SMILE differs from care after LASIK, because no flap is created. We tell all SMILE patients that they can resume their normal activities, even workouts, without restric-

tions the day after surgery. We do not require patients to wear eye shields, and patients who want to wear makeup may do so the next day.

One of the concerns for optometrists and patients after LASIK is the possibility of a flap complication. While such a complication is rare, the potential for a flap to be moved or dislodge is troubling. SMILE eliminates this concern.

Conclusion

We have been working with SMILE for 3 years and have found it a great addition to our refractive surgery practice. While the clinical benefits of SMILE are well documented, we believe our outcomes and our patients' satisfaction are the keys to the future of SMILE in our practice. ■

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