

“Too Old” for Refractive Surgery?**Don't Count Yourself Out...****Office Hours**

Monday thru Friday

8:00 am—5:00 pm

**Information /
Appointment Line:**

612-338-4861 or

1-888-448-3177

Many people in their fifties, sixties and beyond are interested in having better vision, with less dependence on glasses or contacts, but think that their age eliminates them as candidates for laser vision correction. The most up-to-date research and long-term data are showing that age, by itself, is not a bar to successful refractive surgery. As long as a person has healthy eyes and doesn't have certain medical conditions, there are laser vision correction procedures that can benefit them. For almost all of Dr. Sher's patients over fifty, the final visual outcome has been comparable to the results for people in their twenties or thirties.

There are several motivating factors for people over fifty to have laser vision correction, one of which is intolerance of contact lenses. After wearing contact

lenses for twenty or thirty years, the eyes can develop sensitivity to them and eventually it can become difficult or impossible to wear the lenses for any length of time in comfort. This can be due to dry eyes, which happens to many people as they reach their forties and after, especially women. It can also result from allergies or just that the eyes have become too "beaten up" from long years of contact lens use. When a person has been used to good vision with contact lenses, especially peripheral vision, having to go back to wearing only glasses, particularly bifocals, can be very frustrating.

Some of these issues can be a deterrent to having standard LASIK surgery performed. Many people who
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WATER SPORTS, EYE HEALTH, AND CONTACT LENSES

Here in Minnesota, we enjoy all the recreational opportunities 10,000 lakes have to offer: boating, swimming, water-skiing and more. All of these activities, and the water they take place in, can affect eye health, vision and contact lens wear. Dr. Sher feels that it is important for you to have information about these issues.

Most contact lens manufacturers and doctors who prescribe contacts recommend that you don't wear them when swimming, or if you do, that you wear tight-fitting swim goggles over them. They further advise that if you do wear contacts when swimming, that you either discard the contacts afterwards or at least thoroughly clean them and put them in a clean case with fresh solution. Dr. Sher strongly urges his patients to wait at least 30 minutes (preferably one hour) to insert new contacts after swimming or other water sports, to give their eyes time to recover from the hostile chlorine environment of a pool or to allow bacteria or parasites from fresh or salt water to rinse away naturally, without "trapping" any of these against the eyes under the contact lenses.

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Did you know?

In or on the water, UV exposure is doubled because of reflection.

“Too Old” for Refractive Surgery?

Don't Count Yourself Out... (continued)

undergo LASIK experience dry eye symptoms after surgery, even if they didn't have symptoms before. Those whose eyes are already dry can have even worse symptoms afterwards. The thin flap that is cut on the cornea during LASIK surgery severs the nerve endings between the surface of the eye and the brain, thus disrupting the messages that the eyes are dry. This is one of the many reasons that Dr. Sher no longer performs LASIK. His surgical treatment of choice is PRK (photorefractive keratectomy), also known as Advanced Surface Ablation. PRK uses the same excimer laser that is used in LASIK to reshape the cornea on the **surface** of the eye, so no flap is cut. PRK does not create or exacerbate dry eyes in the long run.

Dr. Sher performs PRK on more people over forty-five than under twenty-five. After age forty-five or fifty, most people start discovering the need for bifocals or for reading glasses over their contact lenses. Many of them would rather minimize their lens use through laser vision correction, trying to get rid of the

bifocals or contacts, and possibly wearing only reading glasses afterwards. Another option is “monovision”, where one eye is corrected for optimum distance vision and one eye is “under-corrected” to allow for better near vision. Many contact lens wearers in the bifocal age range already use a monovision prescription in their contacts. Dr. Sher normally suggests that those who are curious about whether monovision with PRK would work for them try it with contact lenses first, to see if they like it.

About her PRK surgery, Dr. Sher's patient Marilyn G. (age 59) says: “I'm thrilled; I should have done it sooner. It's great to be able to travel, especially flying, without having to bring along several different pairs of glasses. I am also looking forward to snorkeling without needing the prescription mask lenses.”

So if you have wondered if laser vision correction might be for you, but thought you were “too old”, it could be time to think again. A thorough eye examination and consultation with Dr. Sher can determine if you are a candidate for refractive surgery.

The average age of Dr. Sher's patients who undergo laser vision correction surgery is forty-three. That means that there are a large number of patients having the procedure at age fifty-three or sixty-three...



Dr. Neal A. Sher

Dr. Sher in the News

Dr. Sher was recently interviewed by WCCO-TV News concerning his experiences performing laser vision correction without charge for soldiers being deployed to Iraq and Afghanistan. This segment is scheduled to appear on the WCCO ten o'clock newscast next month.

Neal A. Sher, MD, FACS

Eye Care Associates, PA

Medical Arts Building, Suite 2000

825 Nicollet Mall

Minneapolis, MN 55402

Telephone: 612.338.4861

Facsimile: 612.333.8306

Email: info@drsher.com

Website: www.drsher.com

WATER SPORTS, EYE HEALTH, AND CONTACT LENSES

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Chlorine from swimming pools and salt from salt water are both drying to the eyes, so artificial tears can be quite beneficial afterwards. The wind from boating or water-skiing can also dry the eyes; in addition, these activities expose the eyes to large amounts of ultraviolet (UV) light, which can cause several serious eye conditions. In or on the water, UV exposure is doubled because of reflection. Dr. Sher recommends wearing sunglasses or goggles with a 100% UV-blocking rating in a “wrap” style to avoid side glare. High-impact lenses are also helpful, as they help protect the eyes from injury.

Snorkeling or scuba diving present additional concerns; while it is still important to keep water out of the eyes and contact lenses, it is also necessary to have good vision. As long as the mask fits tightly to exclude water, wearing contacts while snorkeling is permissible. Contacts can be a problem when scuba diving, however: rigid gas permeable (RGP) or hard contact lenses can tighten on the eyes when pressure increases with depth. This compression can be painful or even harmful if it is allowed to continue for a lengthy dive. Any type of contacts can develop air bubbles under the lens when the underwater pressure increases, which can range from annoying to painful and interferes with vision.

Snorkel or scuba masks can have a prescription lens insert added, or can be made to your prescription, although this is only good for forward vision; peripheral vision is still impaired. Scuba divers who wear bifocals will still need some method of magnification to read their gauges.

To avoid or eliminate the problems listed above, many people choose laser vision correction to improve their vision and enhance their sports and leisure activities with less dependence on

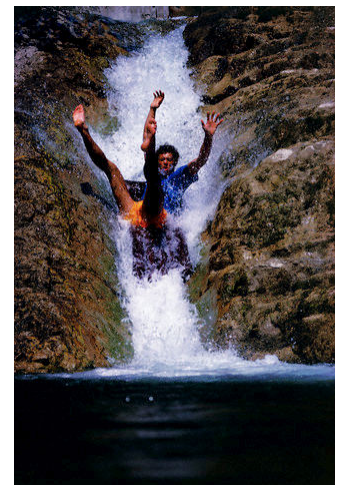
glasses or contacts. This is a terrific option for those who enjoy all kinds of water sports. There are some precautions to keep in mind after refractive surgery before you go out on or in the water.

After LASIK, the surgical flap that has been cut into the cornea can potentially be injured or torn by a blow to the eye, so there is a waiting period of at least four weeks for any activity that could involve an impact of anything on the eye, including water-skiing and wakeboarding. There is a two week wait before swimming or snorkeling, and at least one month before scuba diving. Many eye doctors, including Dr. Sher, are concerned about the structural stability of the surgical flap after LASIK surgery when pursuing activities that might pose a risk of eye injury, or even ones where there are significant changes in atmospheric pressure, such as scuba diving or mountain climbing.

Dr. Sher’s preferred procedure for vision correction is PRK (photorefractive keratectomy or advanced surface ablation), which does not carry the same type of risks post-operatively as LASIK surgery, as no incision or flap is made on the cornea. PRK is approved by the Navy and the Marines for all divers, due to the lack of adverse effects from increased pressure. The only restrictions on water sports after PRK are that there is a one week wait after the post-operative contact lens is removed for swimming, scuba diving or other water-based activities, and good UV-blocking sunglasses should be worn when outdoors. After PRK, the cornea is essentially “normal” within a very short time, and there is no more concern in the long term about the eyes’ strength and stability. Also, after PRK, the eyes have no more vulnerability to injury from active, even extreme, sports than eyes that have never had surgery.



To help guard your eyes from UV and other hazards while doing any of these activities, you should wear sunglasses or goggles labeled with a 100% UV-blocking rating in a “wrap” style to avoid side glare.





**NEAL A. SHER, MD, FACS
EYE CARE ASSOCIATES, PA**

Medical Arts Building, Suite 2000
825 Nicollet Mall
Minneapolis, MN 55402
Website: www.drsher.com

Telephone: 612.338.4861
Facsimile: 612.333.8306
Email: info@drsher.com

Neal A. Sher M.D. is an internationally recognized expert in laser vision correction and has focused his practice on refractive surgery for almost two decades. He has performed thousands of procedures. He was one of the first surgeons in the world to perform laser vision correction and one of the initial researchers to participate in those clinical trials. Dr. Sher was one of the founding members of the renowned Phillips Eye Institute, where he also served as Chief of Ophthalmology. As an author and lecturer who has written numerous scientific articles and textbook chapters on refractive surgery, Dr. Sher is frequently asked to lecture in the U.S. and abroad. He is an Adjunct Clinical Professor of Ophthalmology at the University of Minnesota Medical School and a Fellow of the American College of Surgeons and the American Academy of Ophthalmology.



**DEADLINE FOR FLEX PLANS AND HEALTH SAVINGS
ACCOUNTS COMING UP**

You may have recently received a notice from your employer that benefit election time is coming up. Usually the deadline is in October or November for the following year. What does this mean to you?

Most employers are offering Flexible Benefit Plans or Health Savings Accounts (HSAs) to allow their employees to set aside money pre-tax for medical expenses. This is a terrific benefit, as it saves the employee a significant amount on medical services and devices that aren't covered by insurance. These funds can be used for dental services, vision care, glasses and contact lenses, and PRK, LASIK and other refractive surgery procedures.

By taking the funds from your paycheck pre-tax, your cost for these services and procedures is reduced substantially. As the money is taken

out before state and federal taxes, Medicare and Social Security, you can save between 33% and 45% on your glasses, contacts, or laser vision correction.

The IRS has ruled that refractive surgery is not cosmetic, but the correction of a functional deficit, and therefore approved for use of Flex plan funds. This makes refractive surgery more affordable, and means you don't have to wait while you save up. Flex benefit funds are available as soon as you start setting them aside (usually January 1st) and you are not required to wait until the end of the year.

Our office is able to help you with any questions that you might have about what is covered. When you think about your benefits for next year, consider your vision care needs, including glasses, contacts or refractive surgery.