

March 13, 2008

SKIN DEEP

Lasik Surgery: When the Fine Print Applies to You

By **ABBY ELLIN**

I WAS vain.

That's the only way I can explain why I willingly let a doctor cut my corneas with a laser: vanity.

Little did I know when I chose Lasik surgery that I would not end up satisfied like the friends and acquaintances who raved about their post-glasses existence. Instead, my days are complicated, since I am dealing with side effects that are far more bothersome than being unfashionably four-eyed.

I had been wearing [eyeglasses](#) since I was 8, and I was tired of never seeing the stars without glare, of not being able to go rock-climbing unless I secured my glasses. Not to mention the horn-rimmed barrier between me and a date.

I had trouble figuring out which side of a contact lens to stick onto my eye, so I never really gave contacts a chance.

I had been considering Lasik — short for laser-assisted in situ keratomileusis, which entails cutting and reshaping the cornea — since the [Food and Drug Administration](#) approved it in the late '90s. Because I was not too nearsighted and not

too old, ophthalmologists told me I was an excellent candidate. But I wanted to wait until more people had gone under the laser.

Roughly 800,000 patients have had Lasik annually since 2000, spending about \$2.5 billion on the procedure every year, said David Harmon, the president of Market Scope, a research company for the ophthalmic industry in Manchester, Mo.

The American Society of [Cataract](#) and Refractive Surgery reports a 95.4-percent patient satisfaction rate for Lasik, based on a recent analysis of research worldwide. The researchers found 19 studies specifically addressing patient satisfaction from the last decade, encompassing roughly 2,022 patients. (Some had been post-op for a month; others for a decade).

Most ophthalmologists are confident about the efficacy of Lasik, as well as another popular procedure — photorefractive keratectomy, or P.R.K. Both are designed to correct [nearsightedness](#), [farsightedness](#) and [astigmatism](#).

“It’s very few people who don’t have a superb outcome, especially with the new technology,” said Dr. Marguerite McDonald, the president of the International Society of Refractive Surgery of the American Academy of Ophthalmology.

About five of my friends had undergone the surgery. “Life-changing,” they cooed. “Miraculous!” Because my 40th birthday was looming, my parents offered me either a cello or Lasik. I chose Lasik. But first, I looked up studies online and consulted three doctors. Each did a spate of tests and pronounced me an excellent candidate.

I asked about the risks, and they explained that some people come away with dry eye, double vision, decreased contrast sensitivity and decreased night vision. Some see halos around lights. I was assured these side effects were rare, and usually fleeting.

Ultimately, I chose Dr. Sandra Belmont, the founding director of the Laser Vision Correction Center at [NewYork-Presbyterian Hospital/Weill Cornell Medical Center](#). Dr. Belmont also runs a corneal fellowship program at Manhattan Eye, Ear and Throat Hospital.

A doctor who was a patient of hers recommended her. She charges between \$4,500 and \$5,500; I paid \$4,500, nearly \$1,000 less than other quotes I had received, a consideration since my insurance, like most, does not cover elective surgery.

I signed a consent form confirming that I understood the risks. I thought I did understand them. I did not know then that 5 to 10 percent of patients need to have their vision fine-

tuned — or in industry parlance, “enhanced” — after surgery because of an under- or over-correction, according to John Ciccone, a spokesman for the American Society of Cataract and Refractive Surgery.

Nor had I spoken to any individuals who wished they had never had the procedure — of which, I have since learned, there are plenty.

On April 13, 2007, I had the surgery. Dr. Belmont’s colleague examined me the next day. My vision was a little blurry, but apparently that was normal. Dr. Belmont said that everything looked good on subsequent visits, too. But the blurriness never went away.

At night, I saw halos around streetlights; neon signs bled; the moon had two rings around it like Saturn. My eyes felt sore, a result of dry eye, which also causes sporadic blurriness.

Dr. Belmont told me that sometimes women of a certain age who are undergoing hormonal changes or who take certain medications get dry eye. It would have been nice if I’d known my advanced age (39) might be problematic before I sat in the chair.

I cut out all prescription and nonprescription pills. Didn’t help. The doctor told me to use Refresh Plus, over-the-counter drops that temporarily help dry eye. The drops cost

around \$12 a box; I go through two boxes a week. She also prescribed Restasis eye drops, which can help increase tear production. They didn't for me.

True, I no longer wear glasses. But the 20/20 line on the eye chart is blurry. I can make it out only if I squint, and it takes about a minute to read. My doctor views this as proof of the surgery's success.

"I do see it as a success," Dr. Belmont told me in a recent interview. She also has said repeatedly that these troubles will pass. "In 18 years of practice, I've never had a patient whose symptoms don't go away. Most patients take three to six months to heal."

But I see my slow-squint reading as a sign of failure. I thought I'd be able to decipher words in the real world at a glance. My consent form said: "The patient understands that the benefit of the Lasik/P.R.K. procedure is to have an improved uncorrected visual acuity." I took that to mean that my eyesight would be 20/20. Most doctors, on the other hand, focus on the words "improved uncorrected visual acuity."

"Not every patient has the potential to see 20/20," Dr. Belmont told me this month. So, if your eye can see 20/20 with glasses or contacts, the doctors try to replicate that, but there are no guarantees. Dr. Belmont said, "You do the best

that you can.”

On its Web site (www.fda.gov/cdrh/lasik/risks.htm), the F.D.A. cautions patients to “Be wary of eye centers that advertise ‘20/20 vision or your money back’ or ‘package deals.’ ” (Still, some refractive eye surgeons’ phone numbers end in 2020.)

Nearly a year later, my problems remain. Still, I’m not mad at my doctor. I’m mad at myself. No one forced me to do it. In our quick-fix culture, we forget that there are risks with any surgery, elective or not.

Between 1998 and 2006 the F.D.A. received 140 negative reports relating to Lasik, including double vision, dry eye and halos, said Mary Long, a spokeswoman. Granted, this is not that many, but Ms. Long said, “If this many people are responding to an adverse event, there are probably others who are not.”

After concluding that too few well-designed studies have examined quality of life after Lasik, the F.D.A. put together a task force in 2006 to design a clinical trial to explore the subject. A pilot study is now under way at the National Eye Institute in Bethesda, Md.

LOOKING back, I do not think my doctor and the other experts I consulted adequately represented the pitfalls. It’s

one thing to say that dry eye is “annoying,” as Dr. Belmont did; it’s another to explain how feeling as if your eyes are coated in Vaseline may make every waking moment a chore.

Perhaps it depends on what your definition of success is.

“People say, ‘Well, you don’t wear glasses anymore,’ ” said Barbara Berney, 53, of Rockford, Ill., who had the surgery in 2001 and now reports dry eye, [night blindness](#), dimmed vision, halos and starbursts. “Unless you see what I see, you have no frame of reference.”

Unhappy Lasik patients, some with worse experiences than mine (one man I spoke to needed a [corneal transplant](#)), have created about a dozen Web sites. The 12 patients I talked with all reported feeling as I did, gaslighted. They said they kept telling their doctors that they couldn’t see, and that their doctors kept telling them that they could.

A few doctors have told me that they think they can help my dry eye, but I worry they will suggest more surgery, and I haven’t gone to see them. A few optometrists said they could fit me with special lenses to moisten my eyes, and I may have to go that route.

Meanwhile, I walk by eyeglass shops and wish I needed to go inside.

