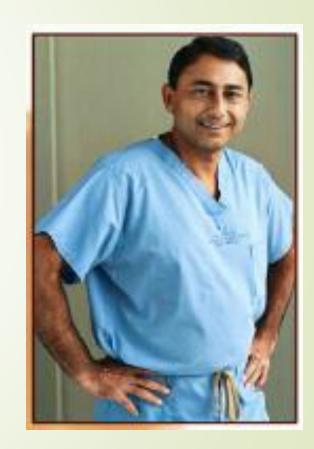
Presbyopic Implant in Eye (PIE)

Liberate your vision

Presenter: Dr. Rajesh Khanna

Khanna Vision Institute

- Bio
- Dr. Rajesh Khanna
- Dr. Rajesh Khanna is a renowned Eye surgeon in California. He has performed over ten thousand vision correction surgeries over his career. He has been recognized as one of the top LASIK and prelex surgeons in USA. He has been the eye surgeon of choice for Doctors, Nurses and celebrities.
- Dr. Khanna is certified by the American Board of Ophthalmology. He has Advanced Fellowship Training in LASIK and Refractive Cataract Surgery. He is the founder and Director of Khanna Vision Institute.
- Dr. Khanna volunteers at UCLA Jules Stein Eye Institute. He devotes his time in charitable activities. He enjoys playing tennis and field hockey.





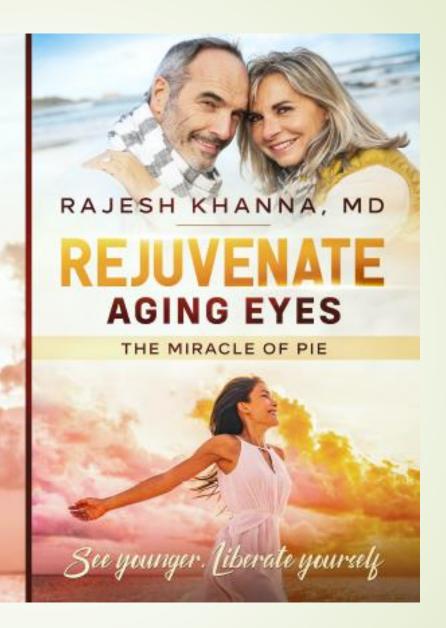
Imagine having the vision of your younger self. Imagine throwing away your contacts, progressives, and readers because you now have 20/20 vision that even continues to improve through the years. To have a reversal of the aging process and even preventing cataracts from ever hindering your new vision. This ground-breaking advancement is called Presbyopic Implant in the Eye (PIE).

Dr. Khanna has not only coined the term PIE but has been a pioneer in the industry. He has conducted numerous lectures on the topic, provided personal coaching to upcoming surgeons and is the founding Medical Director of Khanna Vision Institute. He has authored numerous educational books which have aided in the popularity of this life-changing procedure.



Dr. Khanna takes great pride in educating the medical community as well as anyone that suffers daily with diminishing vision. His goal is simply to bring awareness to the world through written word, video lectures, live seminars, educational and medical apps, as well as educating and connecting with his current surgical case load. As an active Ptil surgeon, he has preformed thousands of procedures on petients extending throughout the globe.



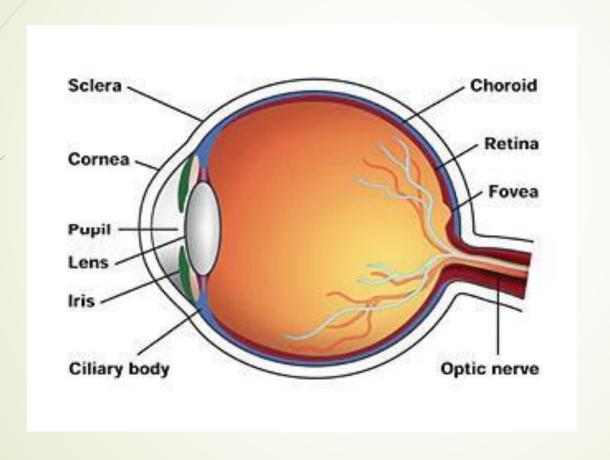


https://www.amazon.com/dp/B08BG74NS2

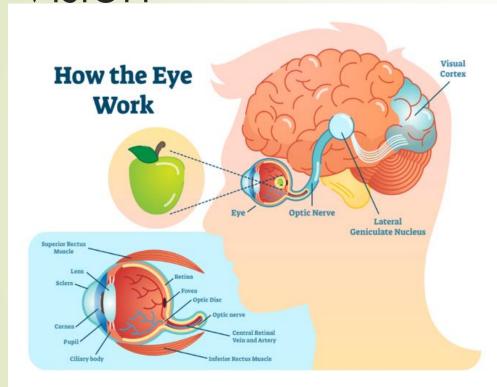
Important Links:

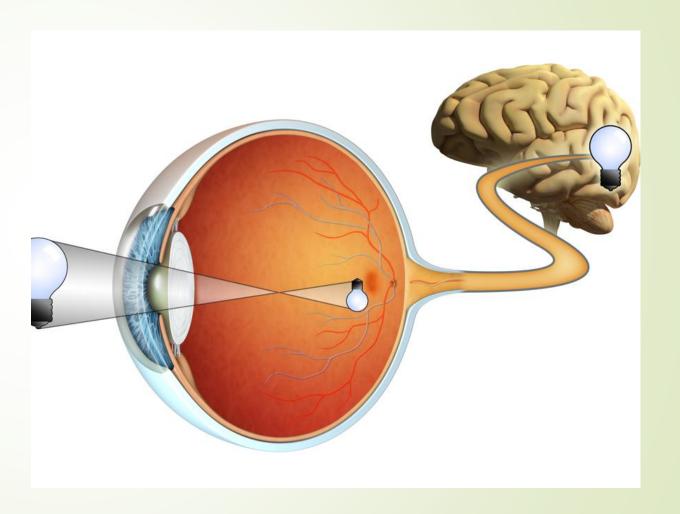
- Book Rejuvenate Aging Eye : https://www.amazon.com/dp/B08BG74NS2
- Khanna Vision Institute https://khannainstitute.com/
- Recording of this Lecture : https://ieeemeetings.webex.com/webappng/sites/ieeemeetings/recording/play/0348181739094baf95d7e60751f11742

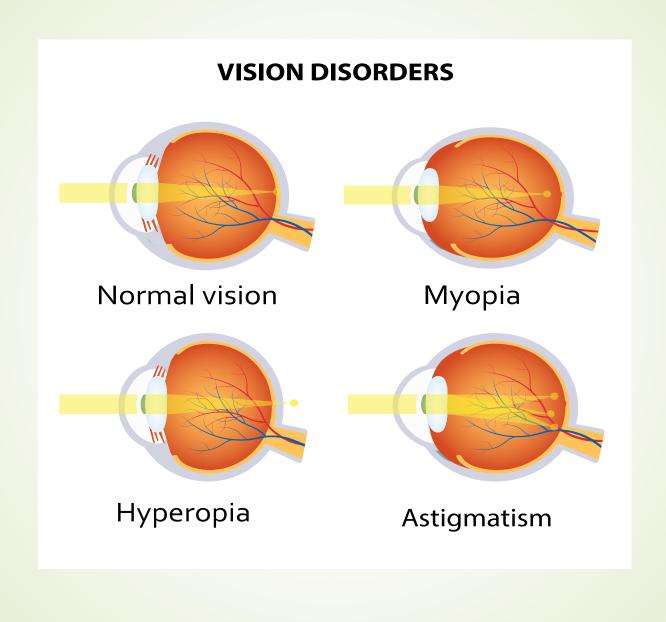
Structure of Eye

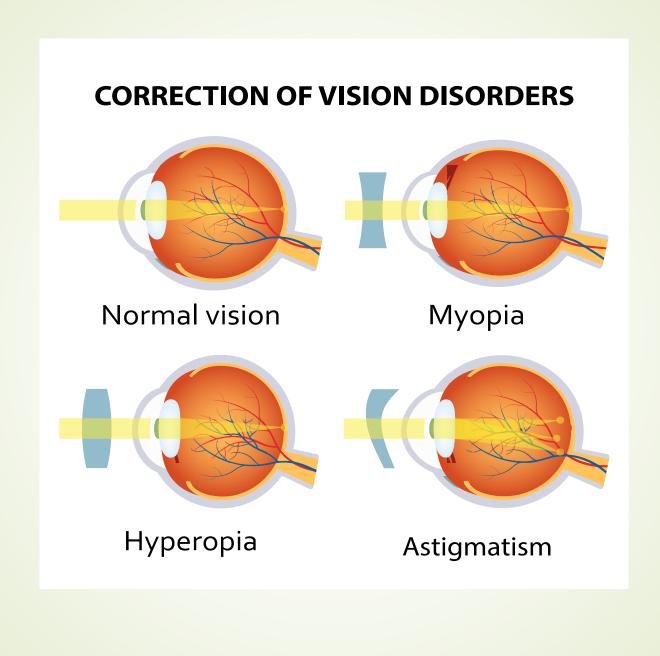


Understanding Vision



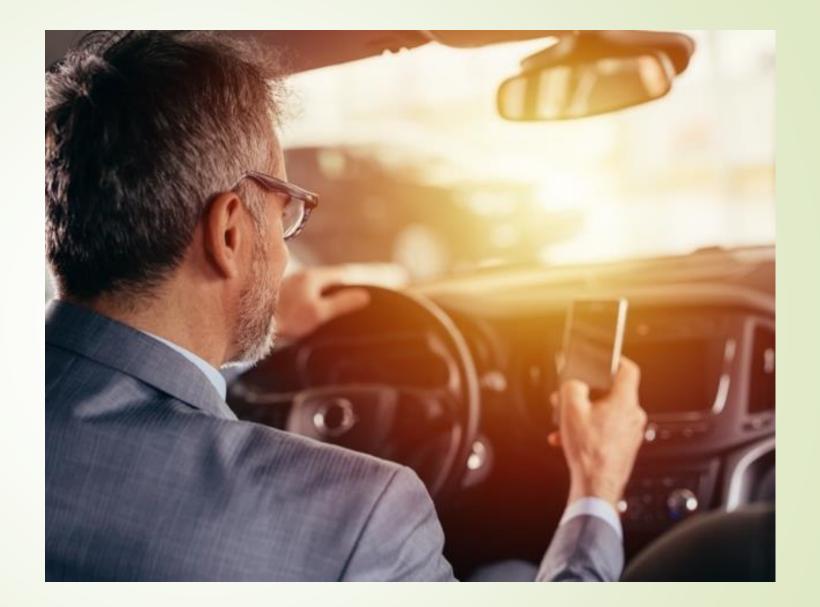






Zones of Vision

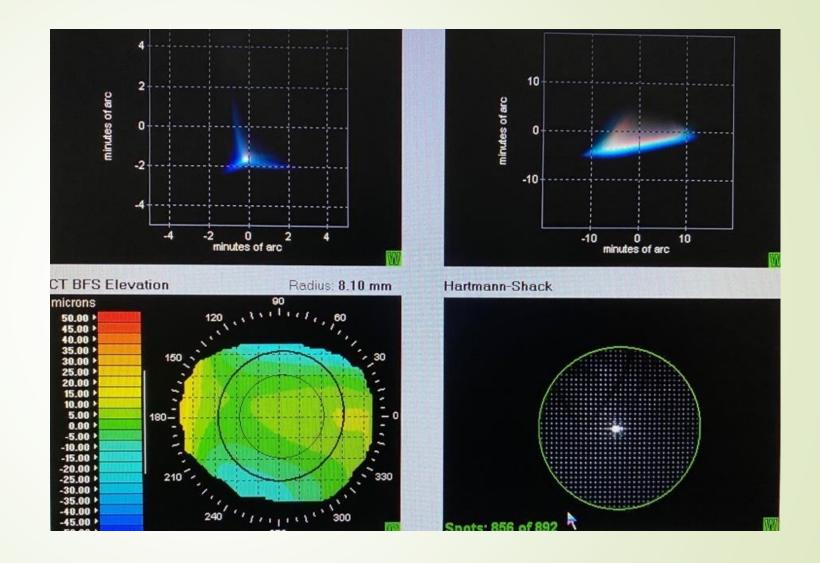
- Near
- Middle
- Far



Lasik Eye Surgery

Lasik is a type of eye surgery in which an extremely precise computer controlled laser is used to reshape the corneal surface so as to fix irregularities that have impaired your vision. The cornea is the clear front part of the eyeball. Lasik eye surgery corrects: Nearsightedness (myopia), Farsightedness (hyperopia) and Astigmatism. It does not correct presbyopia

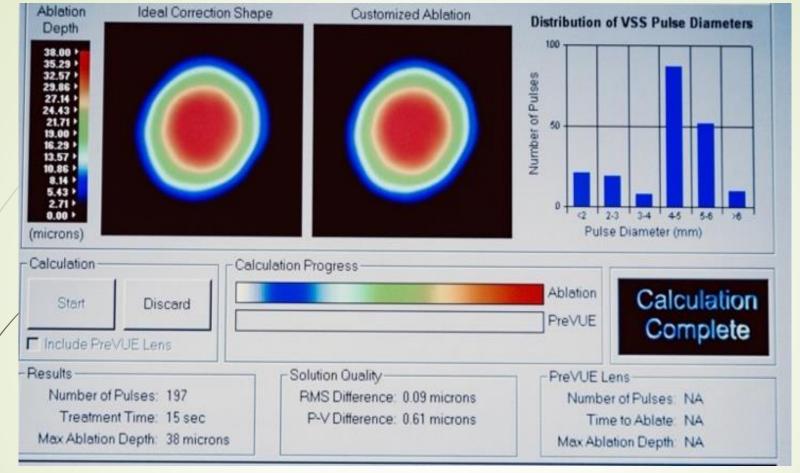
Lower and higher order aberration elevations of the cornea is measured in over a thousand zones.



Calculate Treatment

- Amount of tissue removed
- Remaining tissue
- Edge of pupil and limbus

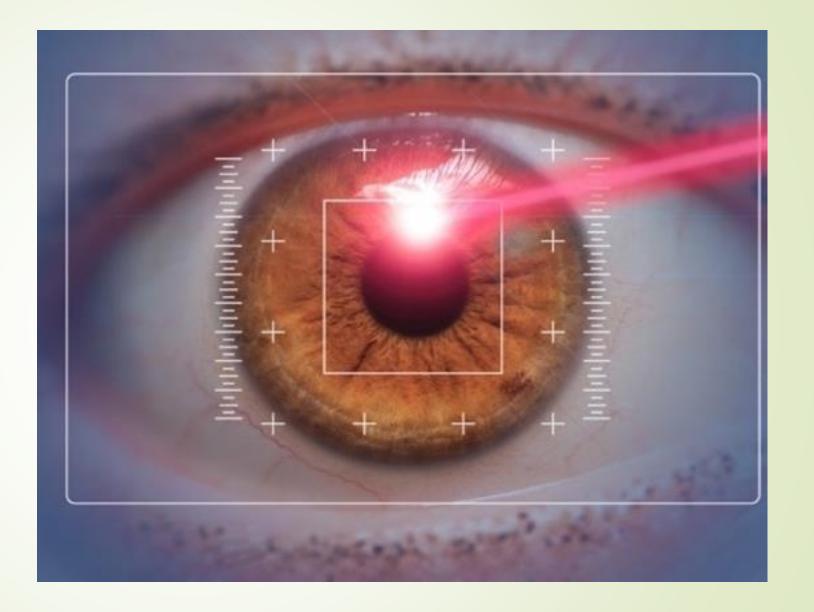




Treatment profile

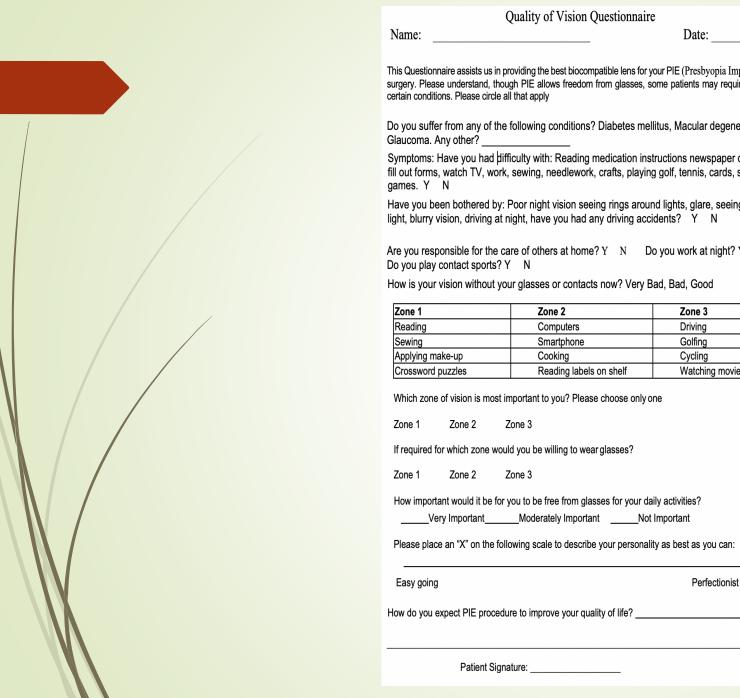
Laser beam reshaping the cornea.

- Myopic astigmatic lasik
 Central 6.5 mm optic zone
 1.5 mm blend zone
- Hyperopic Lasik till 9mm groove to allow cornea to bulge forward



PIE - Cure Presbyopia Permanently

- The expanded form of PIE is "Presbyopic Implant in Eye"
- Presbyopia is a natural change beginning in the forties
- Presbyopic, in the term means that it cures presbyopia
- The implant is a newer synthetic biocompatible lens placed in the space of the remaining natural lens.



(Quality of Vision Questionnai	re				
ime:	Date:					
Questionnaire assists us in providing the best biocompatible lens for your PIE (Presbyopia Implant in Eye) ery. Please understand, though PIE allows freedom from glasses, some patients may require glasses in in conditions. Please circle all that apply						
you suffer from any of the following conditions? Diabetes mellitus, Macular degeneration, ucoma. Any other?						
		structions newspaper or food labels ng golf, tennis, cards, swimming &				
re you been bothered by: Poor night vision seeing rings around lights, glare, seeing in poor/dim t, blurry vision, driving at night, have you had any driving accidents? Y N						
you play contact sports? Y	N	Do you work at night? Y N				
v is your vision without you	ır glasses or contacts now? Very	Bad, Bad, Good				
one 1	Zone 2	Zone 3				
eading	Computers	Driving				
ewing	Smartphone	Golfing				
oplying make-up	Cooking	Cycling				
ossword puzzles	Reading labels on shelf	Watching movies/TV				
ne 1 Zone 2 Z	nportant to you? Please choose only one 3 d you be willing to wear glasses?	one				
•	equired for which zone would you be willing to wear glasses? ne 1 Zone 2 Zone 3					
ow important would it be for y	ou to be free from glasses for your o	daily activities?				
Very Important	Very Important Moderately Important Not Important					
ease place an "X" on the follo	owing scale to describe your persona	ality as best as you can:				
asy going		Perfectionist				
v do you expect PIE procedu	re to improve your quality of life?					
Patient Signa	ture:					

PIE

Distance, middle & near vision **Permanently glasses free** Binocular vision at all distances Thin, thick or keratoconus cornea **Avoids dry eyes** Can be performed in extreme nearsighted eyes Canbe performed in high hyperopes or farsighted eyes Can be performed over previous Lasik, RK, PRK **Prevents future cataracts**

Lasik

Distance, middle or near vision					
Need for glasses by age 45					
Not above age 45					
Contraindicated					
Causes dry eyes					
No					
No					
Avoided					
No					

Advantages of PIE

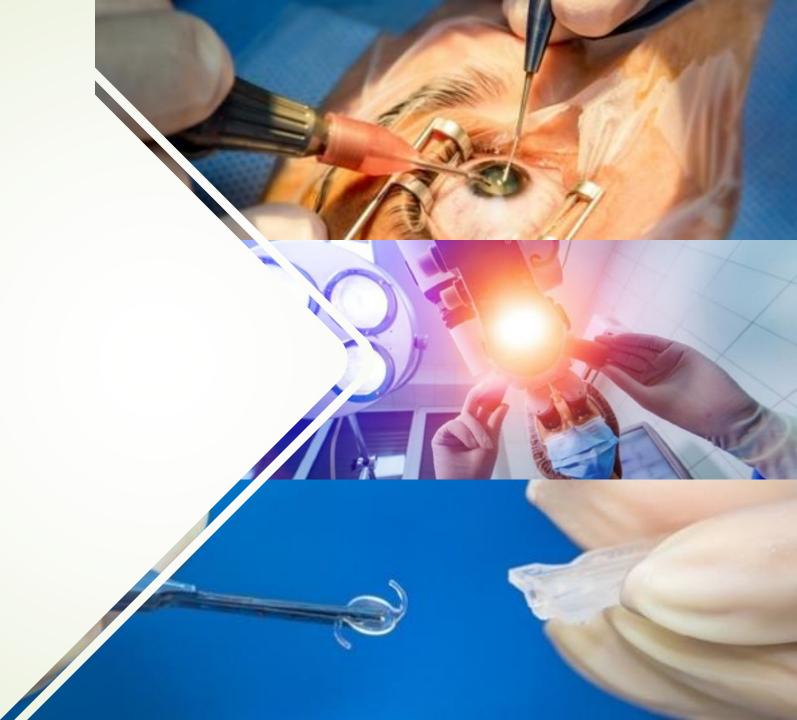
- Permanent
- Reversible
- See at all distances in each eye
- Neuroadaptation allows vision to improve for many years
- Can be performed after Lasik, RK and previous surgeries
- Can Cure Amblyopia

Summary of a good PIE consultation

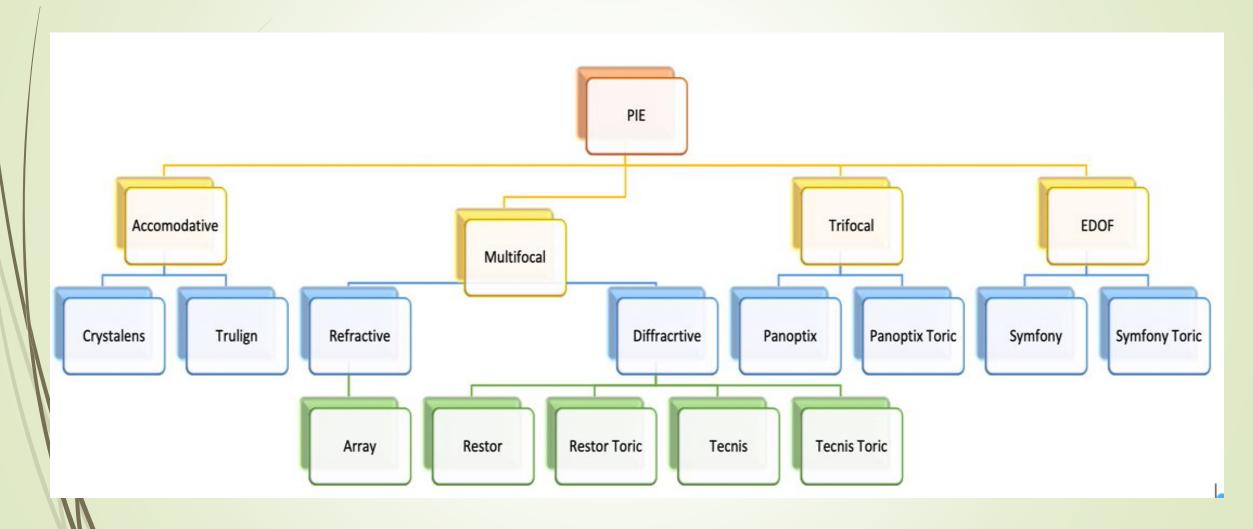
- Review of medical and visual history
- Check vision, refraction, and auto refraction
- OCT of macula and nerve
- Corneal topography to analyze shape of the eye
- Pachymetry to measure the thickness of the cornea
- Slit lamp: to observe tear film, cornea, and lens
- Intraocular pressure to rule out glaucoma
- Dilated exam to rule out pathologies like diabetes, hypertension, glaucoma, and macular degeneration
- Axial length measurement of the eye
- Explanation on eye model, visual charts
- Get a chance to talk to the surgeon
- Patient testimonials are important to read and will verify the doctor's intelligence and proficiency
- Optional tests like visual field

PIE Procedure





Choosing the Best Presbyopic Implant

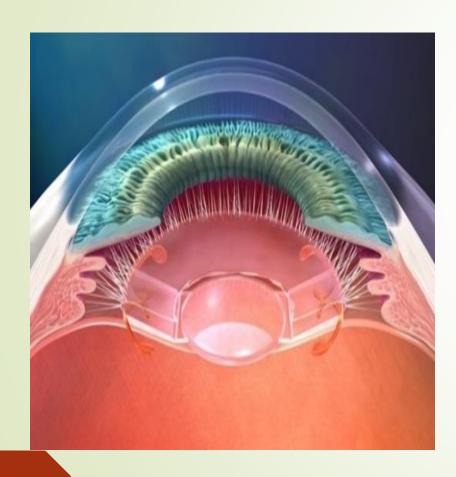


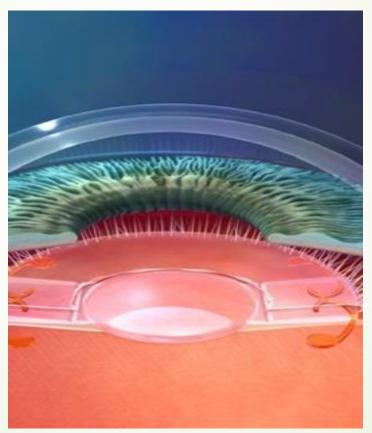
Accommodative crystalens

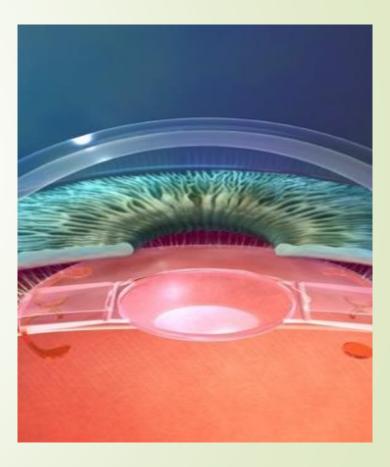
bowed posteriorly

normal position

bowed anteriorly







Restor Tecnis Panoptix

Neuroadaptation & Fine-Tuning

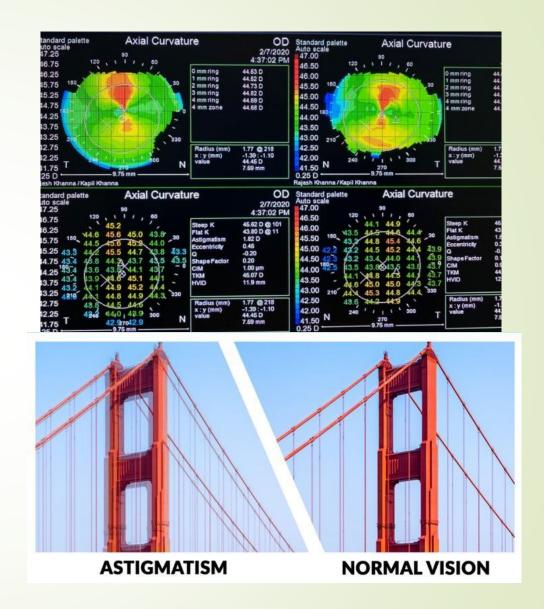
- Left side focused on distance makes the thumb blurry.
- Right side focus shifted to the thumb to make it clear causes distance details to become blurry.





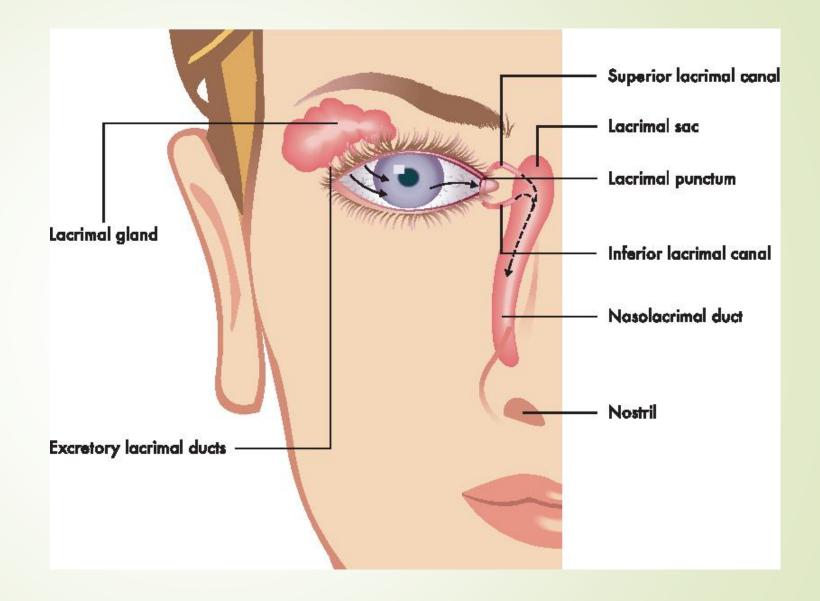
Astigmatism Management

- iDesign Lasik cures it
- Toric PIE Implants
- Incisional surgery derived from RK less reliable



Tears

- Produced in lacrimal gland
- Float across the eye by action of lid blink
- Enter the punctum
- Flow into the nasolacrimal duct and finally the nose



Managing Dry Eyes

	Type	Temporary	Intermediate	Permanent
	Material	Collagen	Synthetic Polymer	Silicone or Acrylic
\	Duration	2-4 weeks	3 -6 months	Lasts for years
\	Usage	Diagnostic	Lasik/ Therapeutic	Therapeutic
	Dissolution	Dissolves in few weeks	Slowly dissolves over months	Inert
	111			





Treatment of Dry Eye

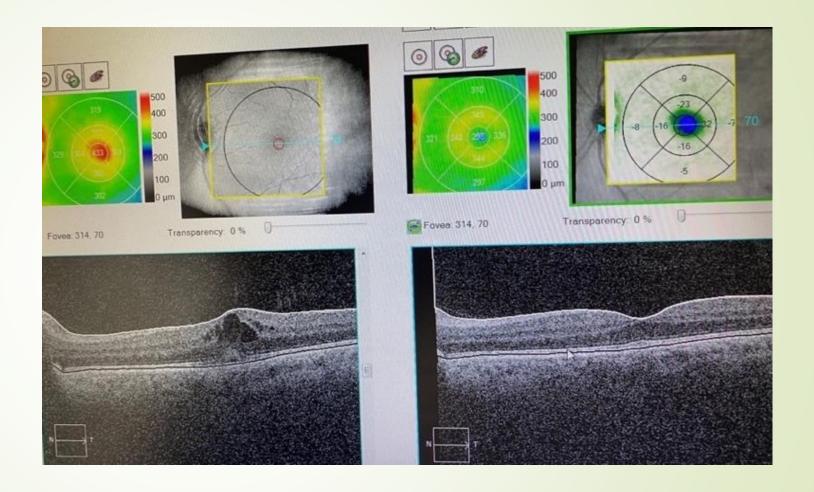
Increase Production	Addition	Prevent Evaporation	Decreased Drainage
Oral vitamins	Artificial tears	Sunglasses	Temporary Punctal occluders
Warm compresses	Lubricating eye ointment	Wide brim hats	Permananet Punctal occluders
Lid scrubs	Humidifiers	Sleeping eye covers	Cautery closure of punctum
Drink flax seed oil	Drink water		Surgical closure of punctum
Restasis or Xiidra	Moisture glasses		
Doxycycline	Scleral contact lens		
Autologous serum			

Risks and Complications

- Commonly: residual refractive power
- Inflammation
- CME
- Infection is extremely rare under ASC settings

CMEor cystoid macular edema

- Rare
- Clinical suspicion
- Treatment with steroids



Glare and Haloes

- Design of lens
- Crystalens least
- Avoid diamond lanes
- Yellow tint glassesd



