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HEALTH



'DOUBLE' VISION CARE
Combo surgery treats cataracts
and glaucoma at same time

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Combo surgery treats cataracts and glaucoma at same time

BY KERRY FIRTH
Correspondent

The eyes are the windows to the soul, or so the saying goes. But they are also windows to your world and living with impaired vision can be challenging. Perhaps you've noticed the picture on the TV isn't as clear as it used to be. Or you see halos around light, have blurry vision or difficulty adjusting to changes in lighting conditions. If these visual disturbances are interfering with daily activities such as reading, driving and recognizing faces, a trip to the optometrist is highly recommended.

These changes could be indicators of glaucoma. They could also be signs of cataracts. Or you could have both conditions – a discouraging diagnosis. Years ago, the dual diagnosis meant two separate eye surgeries, but today patients of Dr. Sarah Khodadadeh, owner of Panacea Eye Center in Vero Beach, may be able to have both operations done at once in a combined surgery.

"Cataract surgery is a treatment for glaucoma in and of itself and I have many combination surgeries that can address the cataract and glaucoma issue all at once," Dr. Khodadadeh explained. "Taking cataracts out automatically helps lower the pressure and I can correct vision problems and astigmatisms at the same time to avoid any additional surgeries. Doing both surgeries at the same time will give you the best outcome."



Dr. Sarah Khodadadeh.
PHOTOS: JOSHUA KODIS

"A cataract is a clouding of the normally clear lens of the eye, caused by age or injury," according to Mayo Clinic. "For people who have cataracts, seeing through cloudy lenses is a bit like looking through a frosty or fogged-up window. Clouded vision caused by cataracts can make it more difficult to read, drive a car (especially at night) or

see the expression on a friend's face. Most cataracts develop slowly and don't diminish eyesight early on. But with time, cataracts will eventually interfere with your vision.

"Cataract surgery is a procedure to remove the lens of your eye and, in most cases, replace it with an artificial lens."

Glaucoma, on the other hand, is

nerve damage plus vision change. An abnormality in the eye's drainage system can cause fluid to build up, leading to excessive pressure that causes damage to the optic nerve.

"The eye contains a fluid known as aqueous humor that provides nourishment to its structures. This fluid flows between the iris and lens, through the pupil to the anterior part of the iris where it is drained out through a sieve-like structure called the trabecular meshwork," according to Mayo Clinic. When the drainage system gets clogged, excess fluid and pressure are trapped in the eyeball, harming the eye.

The optic nerve is a bundle of nerve fibers that connect the retina with the brain. Damage caused by glaucoma can lead to the loss of eyesight. With glaucoma, your vision is affected from the outside in and slowly impacts the central vision. A person with glaucoma can look at a tree in the forest and see that one tree perfectly but can't distinguish the trees around it.

"Glaucoma is called the 'silent thief of sight' because it doesn't hurt,



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HEALTH

there are no symptoms and once the vision has become affected it can't be fixed," Dr. Khodadadeh said. "It's not reversible. It's chronic, progressive and can result in blindness.

"People think that we see with our eyes, but in reality, we see with our brain. The eye is like a cable to the brain and when there is pressure on the nerve for a long time it causes damage and doesn't allow a clear signal to the brain. It's like having an old TV with static until you rotated the antenna to get a clear signal. Our goal is to keep a clear signal by keeping the pressure in a normal range."

Primary open glaucoma is what most people know as high-pressure glaucoma but with normal tension glaucoma, pressure in the eye runs in the normal range but there is underlying nerve damage and change.

Dr. Khodadadeh describes the cross-section of the optic eye as being like a teacup saucer with an inner circle and an outer circle. The inner circle should be a third the size of the outer circle. If it's more than a third of the size, it can be a sign of nerve thinning or damage.

There has to be 70 percent to 90 percent damage of the nerve

tissue, which is irreversible, before it starts showing up in the vision. With today's modern procedures doctors can detect high eye pressure and nerve damage earlier and treat glaucoma before it shows up in the vision, preventing it from getting worse.

The first line of treatment to relieve excess pressure is eye drops. Eye drops are highly effective but they come with some side effects and it can be difficult to get patients to use them as directed. They either forget or have difficulty administering them. Also, once you start them, you are on them for life.

Other treatments include selective laser trabeculoplasty (SLT), a form of laser surgery that is used to lower intraocular pressure. According to the Glaucoma Research Foundation, this procedure is used when eye drop medications are not lowering the eye pressure enough or causing significant side effects. Laser energy is applied to the drainage issue in the eye. This starts a chemical and biological change in the tissue that results in better drainage of fluid through the drain and out the eye, lowering internal pressure.

"SLT is done in my office." Dr. Khodadadeh continued. "It only

takes about a minute to do the laser. It doesn't hurt and the patient can leave right after the short procedure. SLT is just as effective as drops with less side effects. And the treatment can last up to 10 years.

"With glaucoma you are either make too much fluid or you are not draining enough," the doctor continued. "Most of the time, you are not draining enough. Imagine having a clogged drain, you shake it and the fluid flows faster. That's what I do with the laser. The laser shakes the eye and cleans out the drain.

"I may not be able to get you off eye drops completely, but we can reduce the number of drops as much as possible to maintain your vision. The goal with all these micro-invasive glaucoma surgeries is to open the drain or decrease the amount of fluid being made."

In addition to SLS, there are numerous innovative microsurgeries to control the drainage and pressure in the eye, which Dr. Khodadadeh customizes and combines to give her patients the best possible outcome.

"As we age, just about everyone will have difficulty with the pressure problem but it can be controlled if

diagnosed early enough. Catching the disease early before it affects your vision is the key to living a better life with glaucoma," Dr. Khodadadeh said. "Everyone over the age of 40 should get an eye exam every two years and those over 65 should get an exam every year."

Dr. Khodadadeh has had a desire to help people since she was a child. She started working as a volunteer in hospitals at age 14 and went on to become a medical researcher, seeking treatments for breast cancer and multiple sclerosis at the Institute of Environmental Health Sciences in Detroit before going to medical school.

She earned her M.D. degree from Wayne State University, where she fell in love with ophthalmology while on rotation as a medical student. She completed her glaucoma fellowship at Yale University with a focus on treating cataract and glaucoma patients with combination procedures to avoid additional surgeries.

Dr. Khodadadeh is accepting new patients at her private practice, Panacea Eye Center, 1000 37th Place, Suite 101, Vero Beach. You can call 772-758-1000 to schedule an appointment. ■

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