

Watch Out for Keratoconus!

8 Potential Signs & Symptoms



Typically onset occurs in teenage years or early twenties



Frequent Changes in Refraction or Increasing Cylinder



Family History of Keratoconus



Reduced Best Corrected Visual Acuity



Excessive Eye Rubbing



Frequent Headaches



Difficulty Seeing at Night



Halos and Ghosting



Increased Light Sensitivity

If you believe a patient may have keratoconus, perform a diagnostic exam or Find An Expert at LivingwithKC.com to refer them for a KC screening.

(844) 528-3376
info@avedro.com
www.LivingwithKC.com



Importance of Screening & Early Diagnosis

It is important to note that the goal of treatment for corneal cross-linking patients is to slow or halt the progression of the disease. For these patients, continued progression often results in loss of visual acuity or decreased tolerance to contact lens wear, caused by the ongoing changes in the cornea. Therefore, the earlier progressive keratoconus is diagnosed, the sooner treatment can be provided that may slow the progression of the disease¹.

What are the signs I should be looking for?

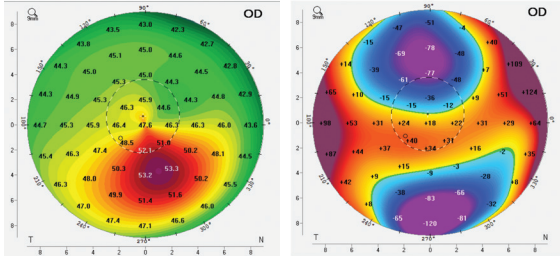
Early signs of keratoconus may include asymmetric refractive error, high or progressive astigmatism, or reduced best corrected visual acuity. The onset of keratoconus often occurs in teenage years or early twenties but can start at any time.

Patient symptoms may include:

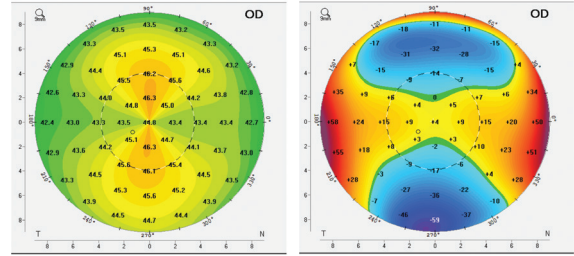
- Constantly and regularly changing refractive errors
- Blurry vision
- Increased light sensitivity
- Difficulty driving at night
- A halo around lights and ghosting (especially at night)
- Eye strain
- Headaches and general eye pain
- Eye irritation, excessive eye rubbing

Keratoconus, especially in the early stages, can be difficult to diagnose and all of the above symptoms could be associated with other eye problems.

Diagnosing Keratoconus



Example topography of patient with keratoconus



Example topography of patient with normal astigmatism

INDICATIONS

Photrexa® Viscous (riboflavin 5'-phosphate in 20% dextran ophthalmic solution) and Photrexa® (riboflavin 5'-phosphate ophthalmic solution) are indicated for use with the KXL System in corneal collagen cross-linking for the treatment of progressive keratoconus and corneal ectasia following refractive surgery.

Corneal collagen cross-linking should not be performed on pregnant women.

IMPORTANT SAFETY INFORMATION

Ulcerative keratitis can occur. Patients should be monitored for resolution of epithelial defects.

The most common ocular adverse reaction was corneal opacity (haze). Other ocular side effects include punctate keratitis, corneal striae, dry eye, corneal epithelium defect, eye pain, light sensitivity, reduced visual acuity, and blurred vision.

These are not all of the side effects of the corneal collagen cross-linking treatment. For more information, go to www.livingwithkeratoconus.com to obtain the FDA-approved product labeling.

You are encouraged to report all side effects to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

¹ Gelles, J. D., OD, FIAO, FCLSA. (2017, April). The Optometrist's Role in Keratoconus Management. Advanced Ocular Care.