

Scleral Lens Fitting and Troubleshooting

Buddy Russell, COMT, FCLSA, FSLS, LDO

Scleral Lenses

- Originally, glass scleral contact lenses were made by very skilled glass blowers at the end of the 19th century.
- Feinbloom and Obrig pioneered PMMA for manufacturing scleral lenses in 1938.
- They were fitted in England by Dallos from 1938 until early 1970.



History of Therapeutic CL

The story of therapeutic lenses began in Wiesbaden, Germany, in 1887 when master glass blower and prosthetic eye maker Frederick A. Muller were asked to fabricate a protective glass shell for a patient with severe exposure following removal of a malignant lid tumor. The patient continued to wear the glass shell successfully until his death 21 years later.

Scleral Lens Indications

Refractive Errors

- Irregular astigmatism, Post trauma, PK, KC, PRK, RK, LASIK
- Centration
- Lens stability

Therapeutic Indications

- Exposure, OSD
- Symblepharon management

Improvement in quality of life

Injury



Surgery



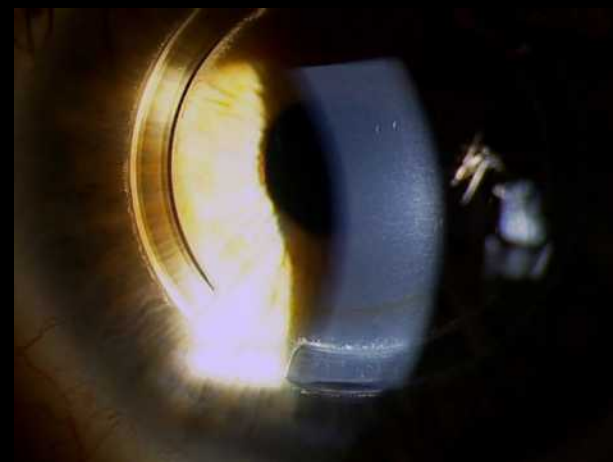
Disease



Scleral Lens Indications

Refractive

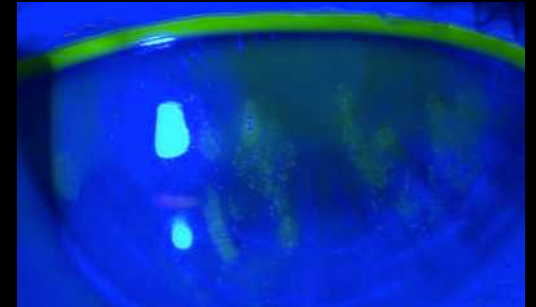
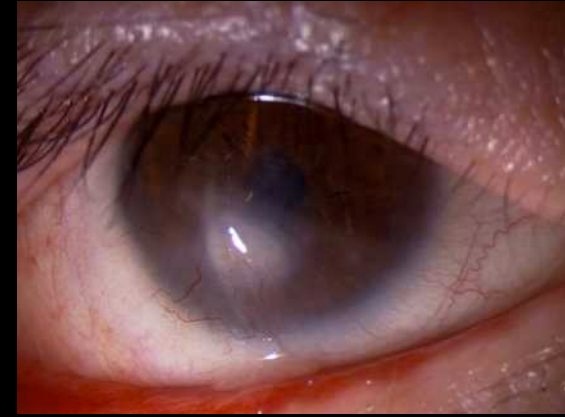
- Ectasias
 - Keratoconus
 - Pellucid marginal degeneration
- Post surgical
 - RK/AK/Hex-K
 - Lasik/Lasek/PRK
 - Penetrating keratoplasty
 - ICRS
- Scars
 - Salzmann's
 - Post trauma
- **Other lens failures**



Scleral Lens Indications

Ocular surface disease

- Stevens Johnson Syndrome
- Ocular pemphigoid
- Kerato-conjunctivitis Sicca
- Sjogren's syndrome
- Graft-host disease
- Exposure keratitis



Scleral Lenses

- In the beginning...
- After that...



Ocular Impression Tools for Scleral Lens Fitting





Early GP Scleral Lenses

- Don Ezekial (Australia) first reported using GP sclerals in 1983

Gas Permeable Haptic Lenses. J BR Contact Lens Assoc. 1983;6:158-161.

- Ken Pullium (UK) developed GP scleral lenses from impressions

A Study of 530 patients referred for rigid gas permeable Scleral Contact Lens Assessment. Cornea. 1997;16:612-622

- Later, Polymer Technology developed the raw material used to produce scleral GP lenses

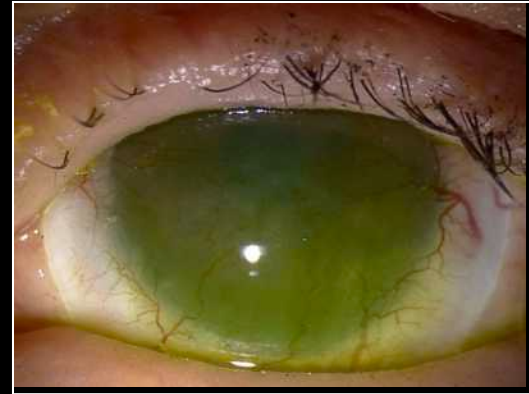
Rosenthal. Fluid-ventilated, gas permeable contact lens to avoid keratoplasty. Eye & Contact Lens.2005;3:130-134.

Material Dk and Tear Thickness Impact on Oxygen Transmission

Predicted values of oxygen transmissibility (Fatt Dk/t units) under the center of scleral contact lenses with a Dk of 150.

Dk=150	Clearance (μm)	100	150	200	250	300	350	400
Lens thickness (μm)								
250		34.3	28.2	24.0	20.9	18.6	16.6	15.0
300		30.8	25.8	22.2	19.5	17.4	15.7	14.3
350		27.9	23.7	20.7	18.3	16.4	14.9	13.6
400		25.5	22.0	19.3	17.2	15.6	14.2	13.1
450		23.5	20.5	18.2	16.2	14.8	13.5	12.5
500		21.8	19.2	17.1	15.5	14.1	13.0	12.0

Lens Manufacturing



Newest Materials

Acuity 200

DK = 200

Contamac Infinite

DK = 200

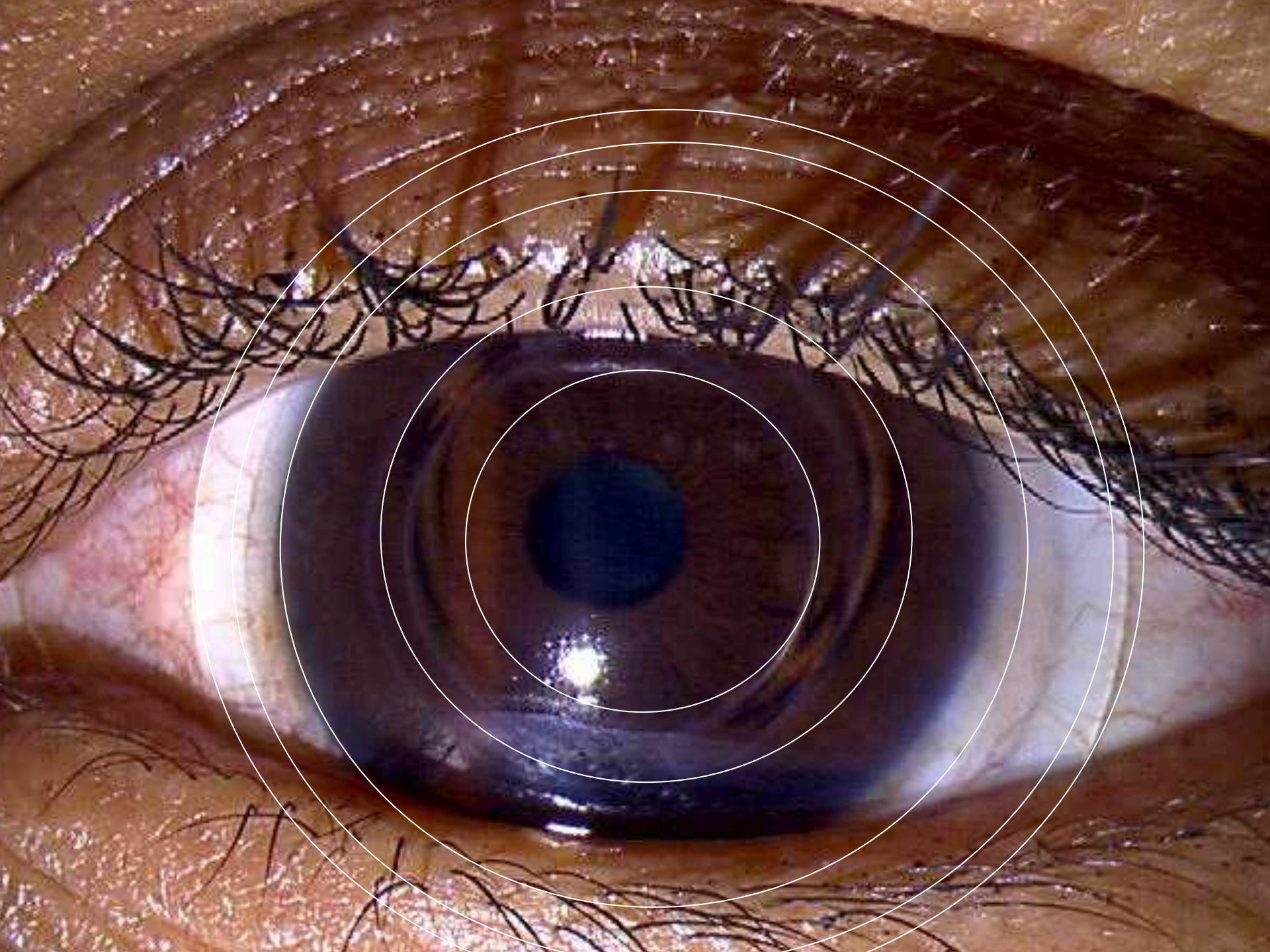
What Does That Mean?

200 DK

—————

.35 CT

DK/T 57



Scleral Nomenclature

- Base curve
- Optic zone
- PC 1
- PC 2
- PC 3
- PC 4
- Central curvature of optic zone
- Width of BC / power
- Usually most width
 $BC + PC\ 1 = \text{corneal zone}$
- Limbal zone
- Scleral zone
- Edge zone

Scleral Nomenclature

Chamber size

OZ + PC 1 & PC 2

$9.4 + (1.7 + .9) \times 2$

$2.6 \times 2 = 5.2$

$5.2 + 9.4 = 14.6$

Haptic size

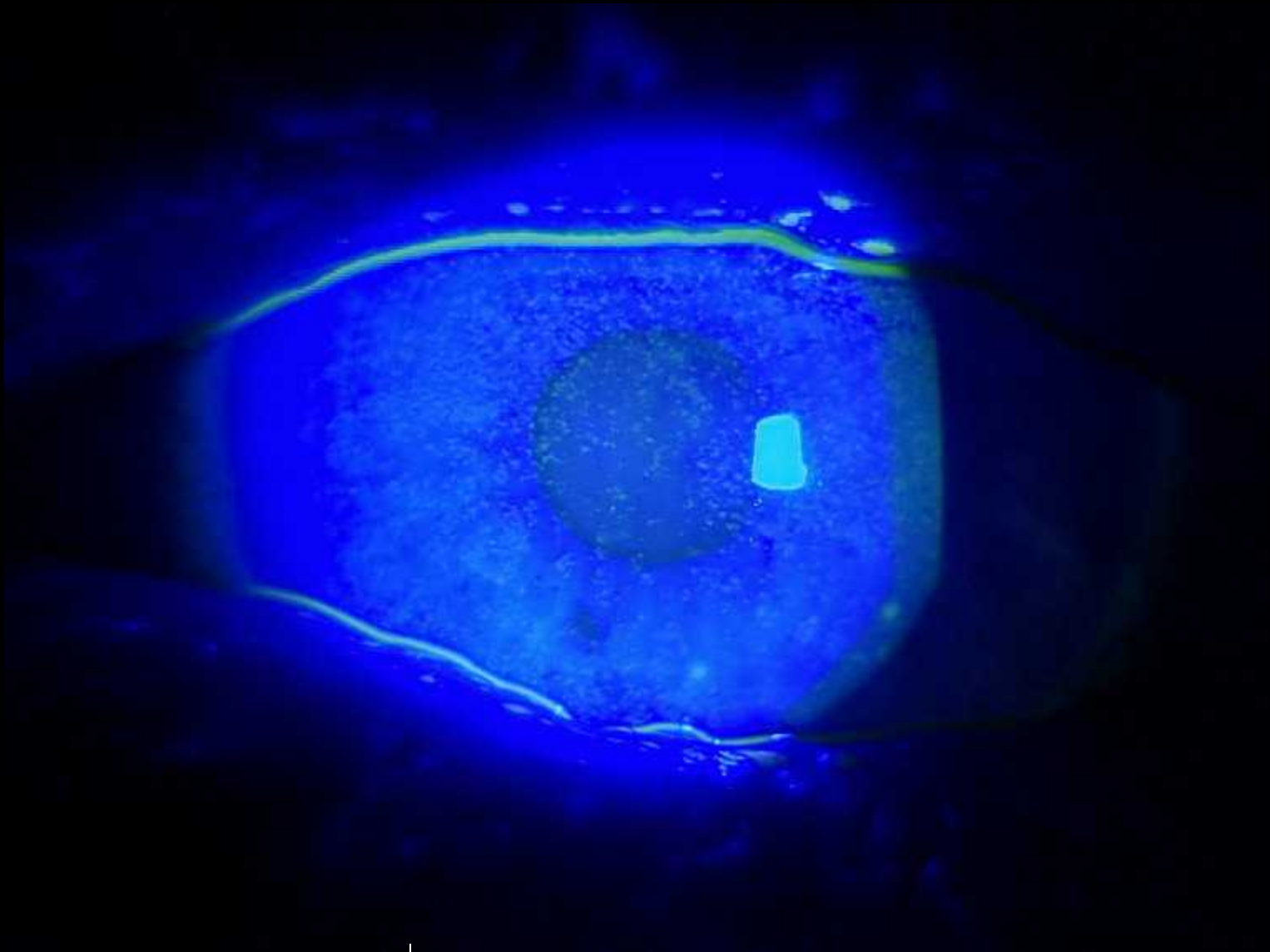
PC 3 + PC 4 x 2

$.4 + .5 = .9$

$.9 \times 2 = 1.8$

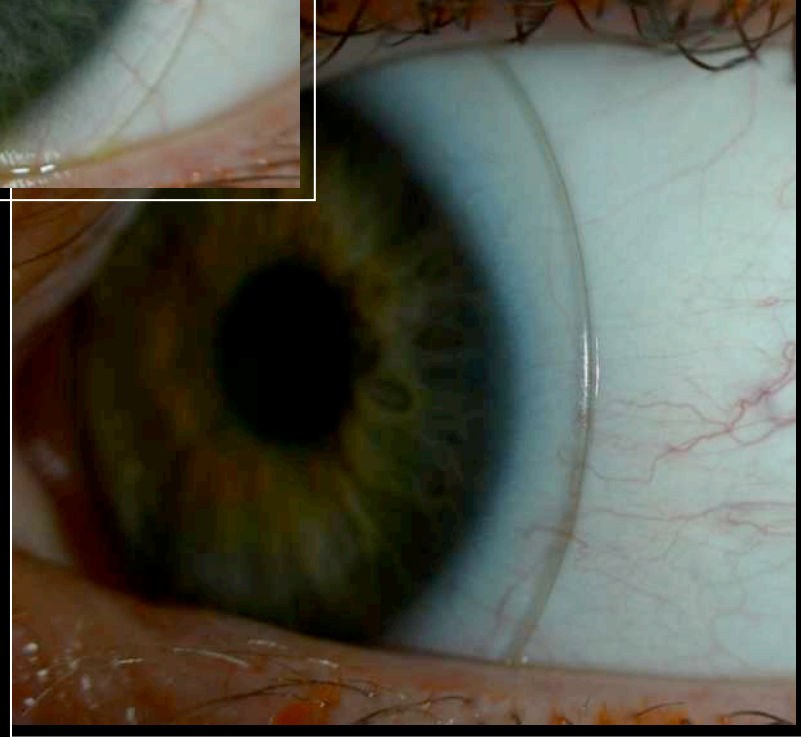
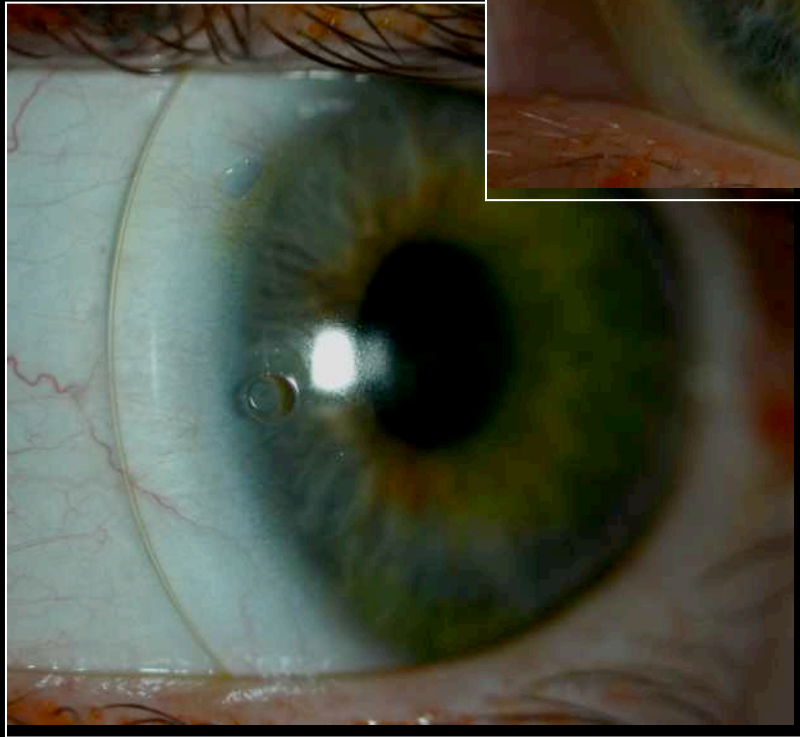
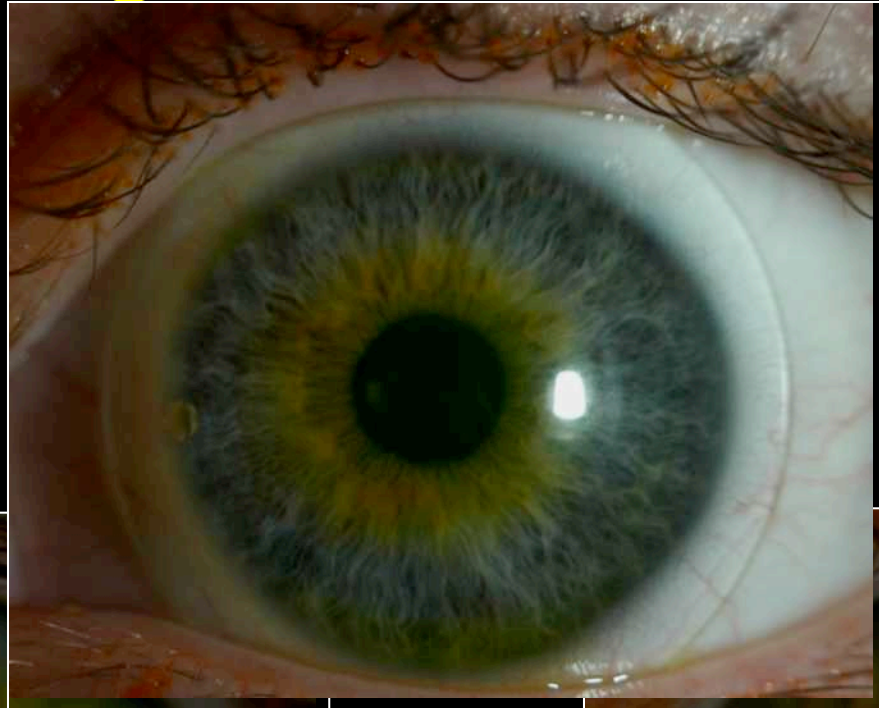
Total Diameter

$14.6 + 1.8 = 16.4$



Subjective does not equal Objective

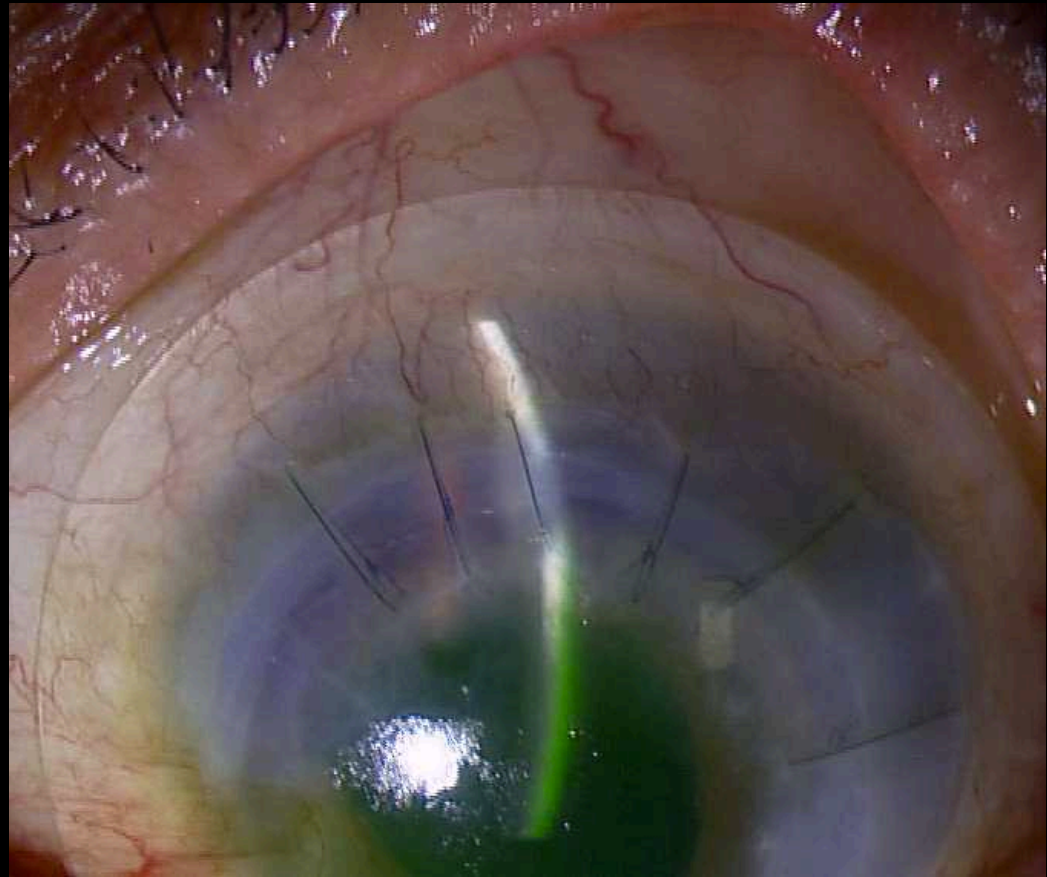
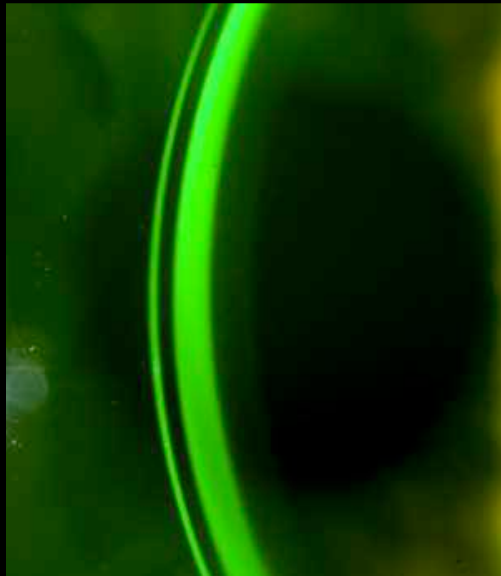
Fitting Scleral Designs



"Where do I start?"

3 Decisions

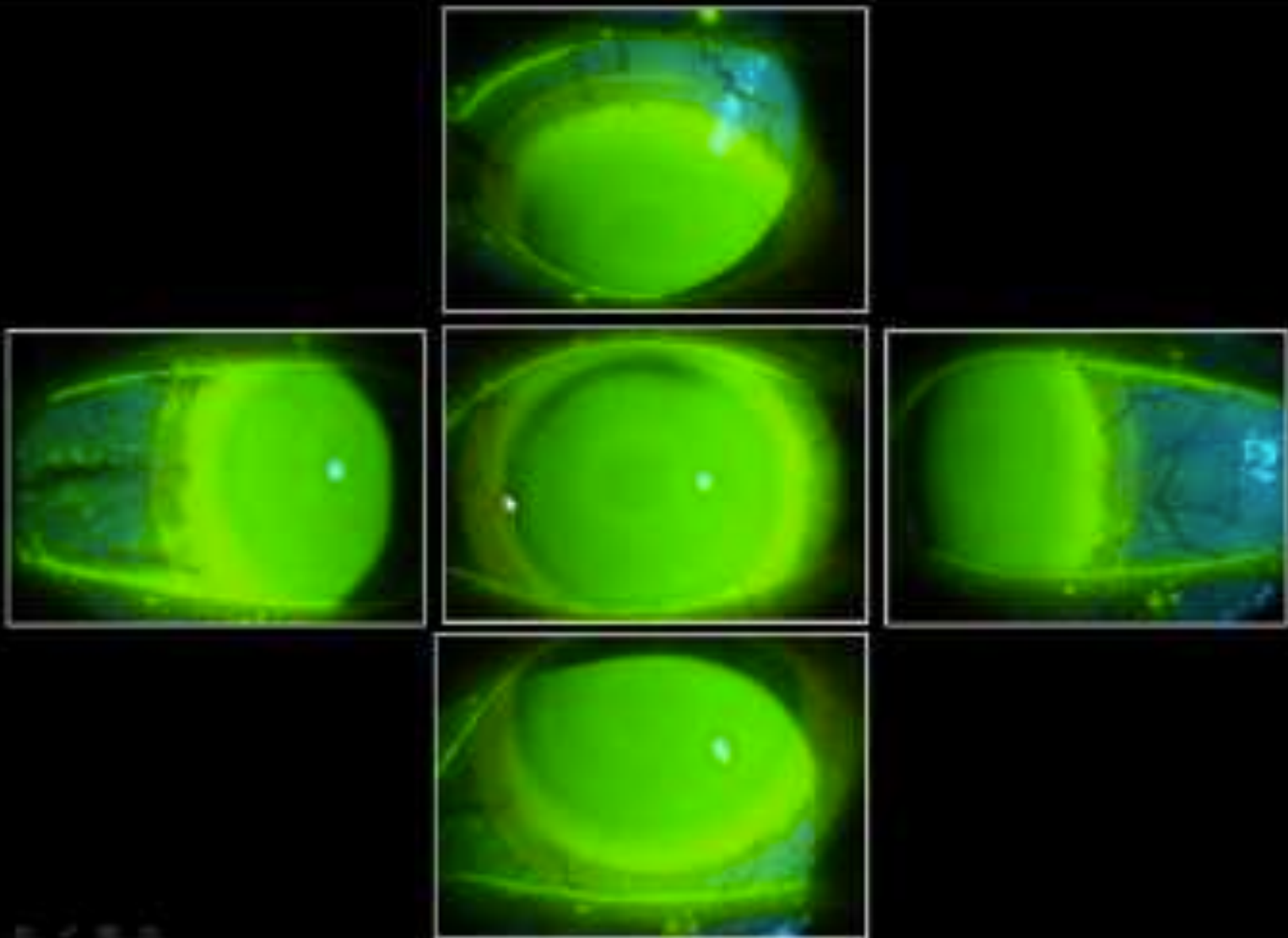
- How large?
- What depth?
- Align haptic



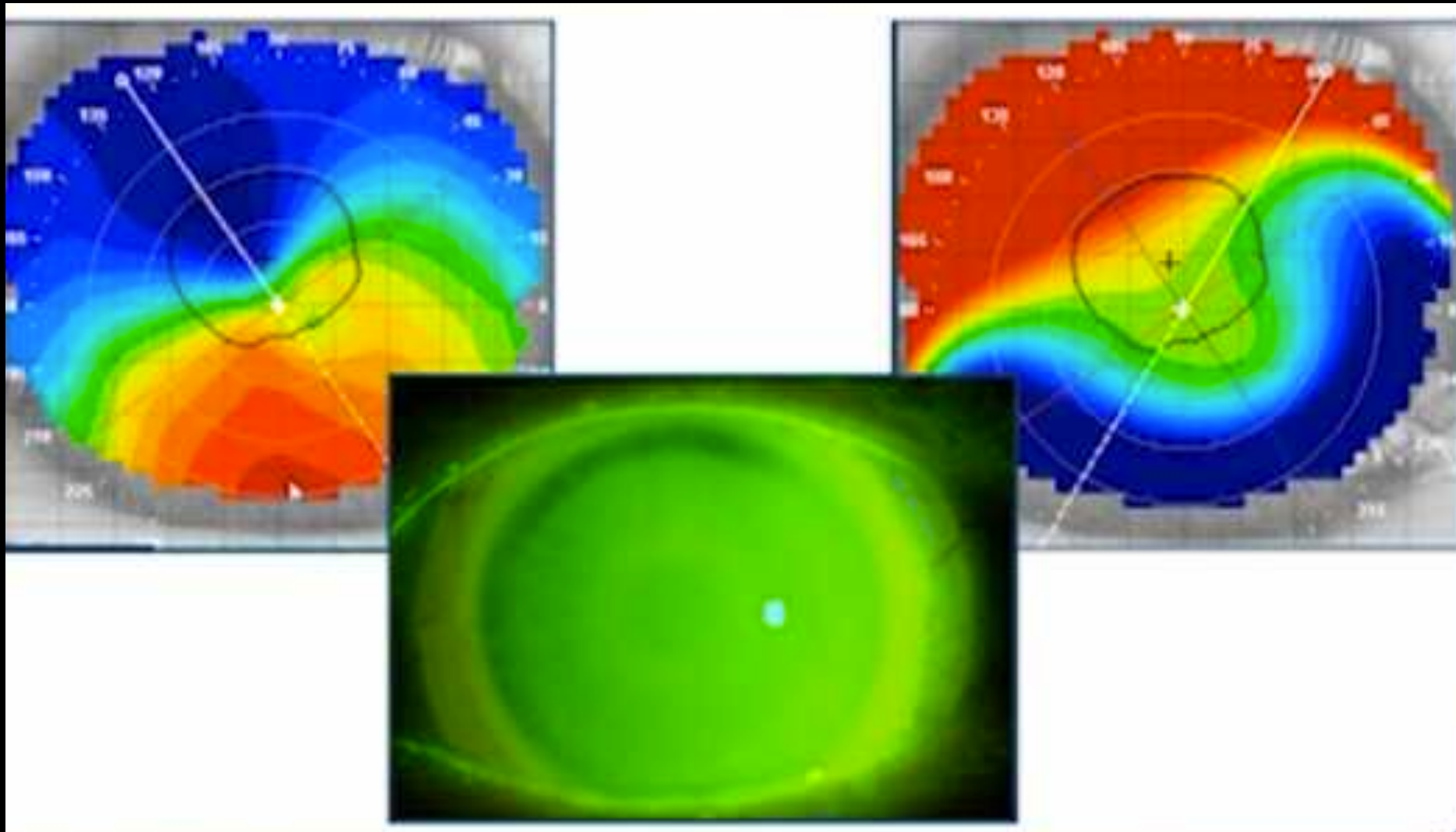
Protect the Limbus



Check in All Gazes



Elevation Display May Help





15.6 mm Diameter



**Step #1
Lens
Diameter**

18.0 mm Diameter

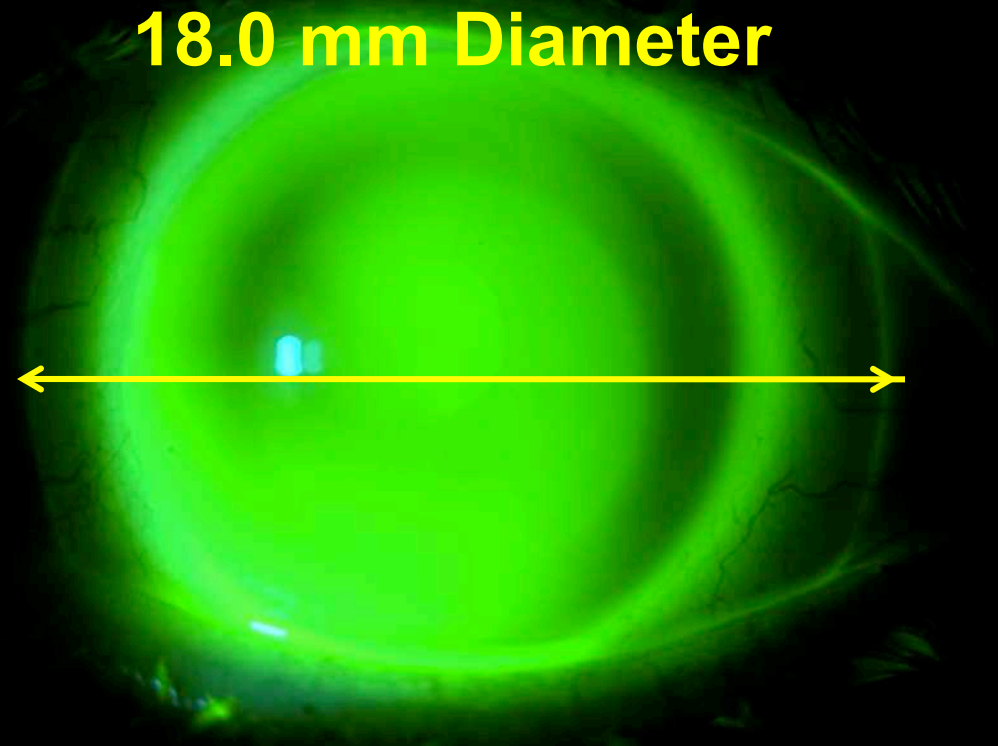
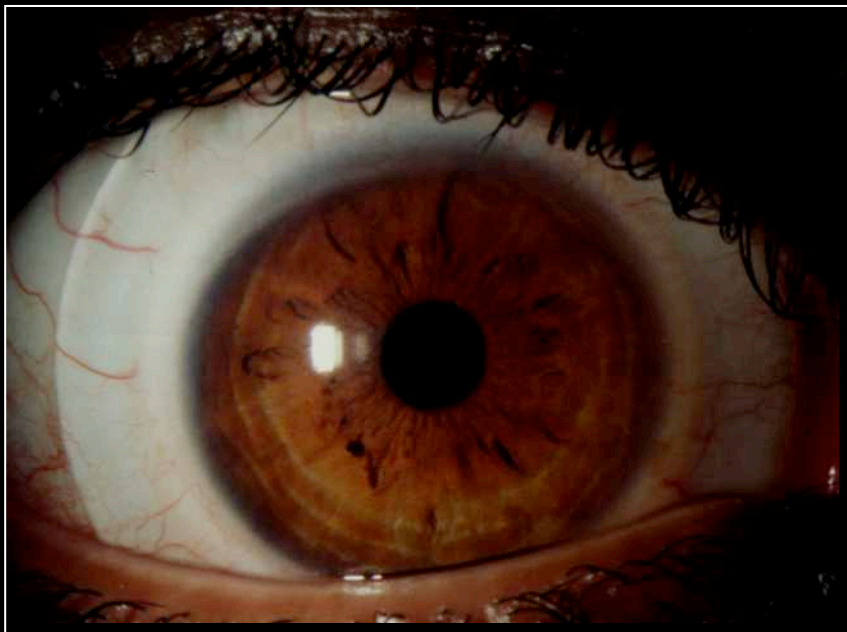


Step #1

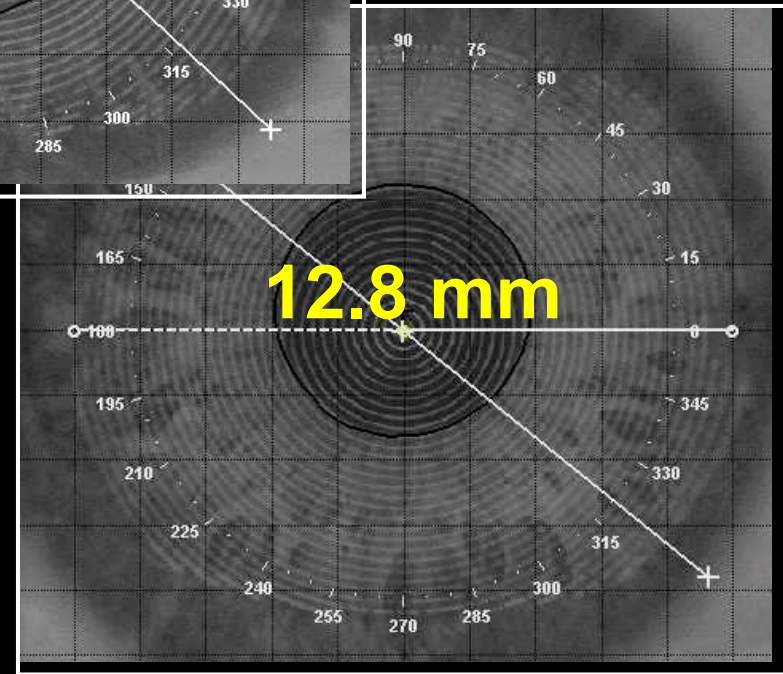
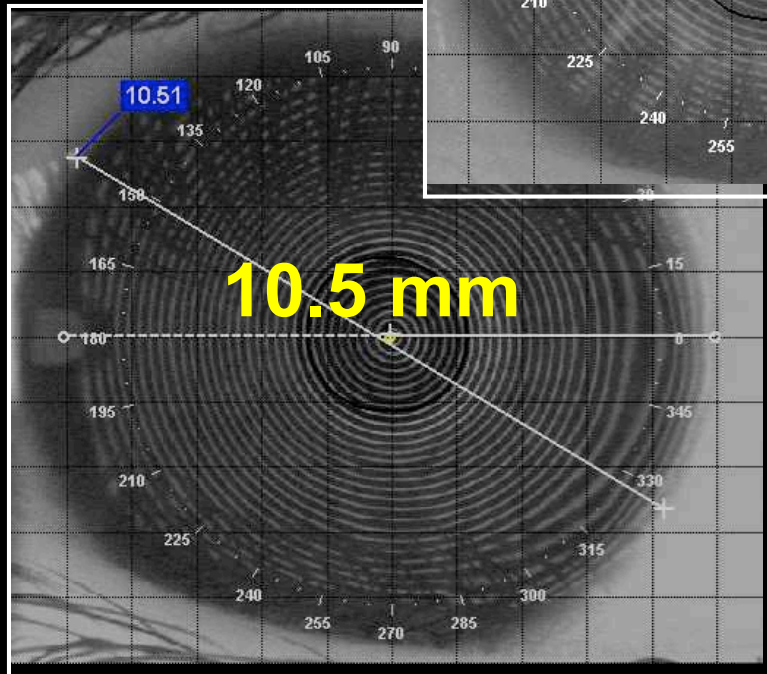
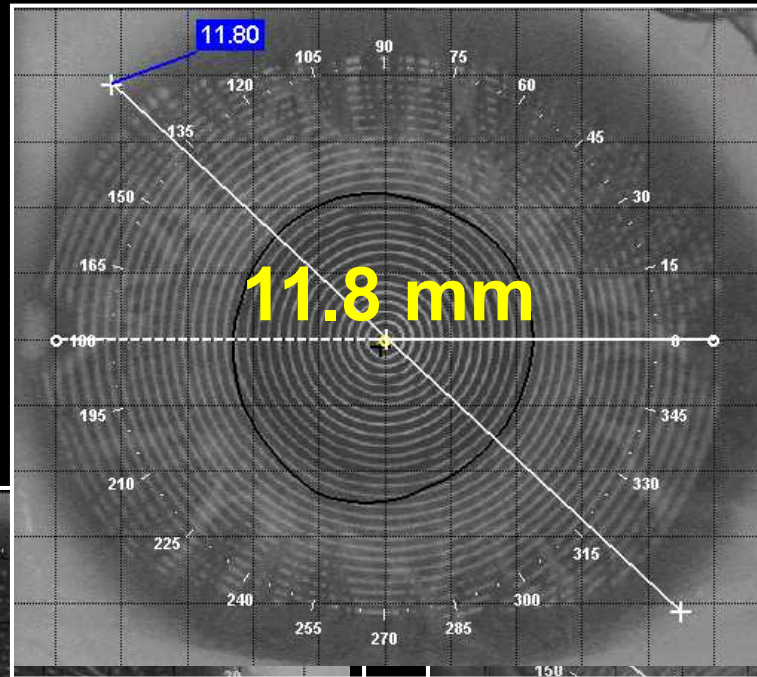
Lens

Diameter

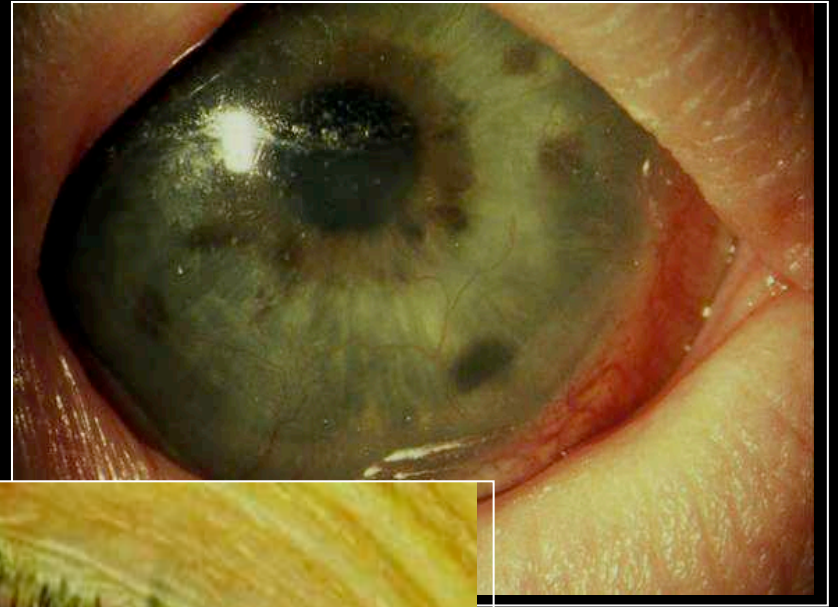
- Cornea diameter
- Fissure size
- Conjunctiva challenges



Corneal Diameter & Scleral Lenses

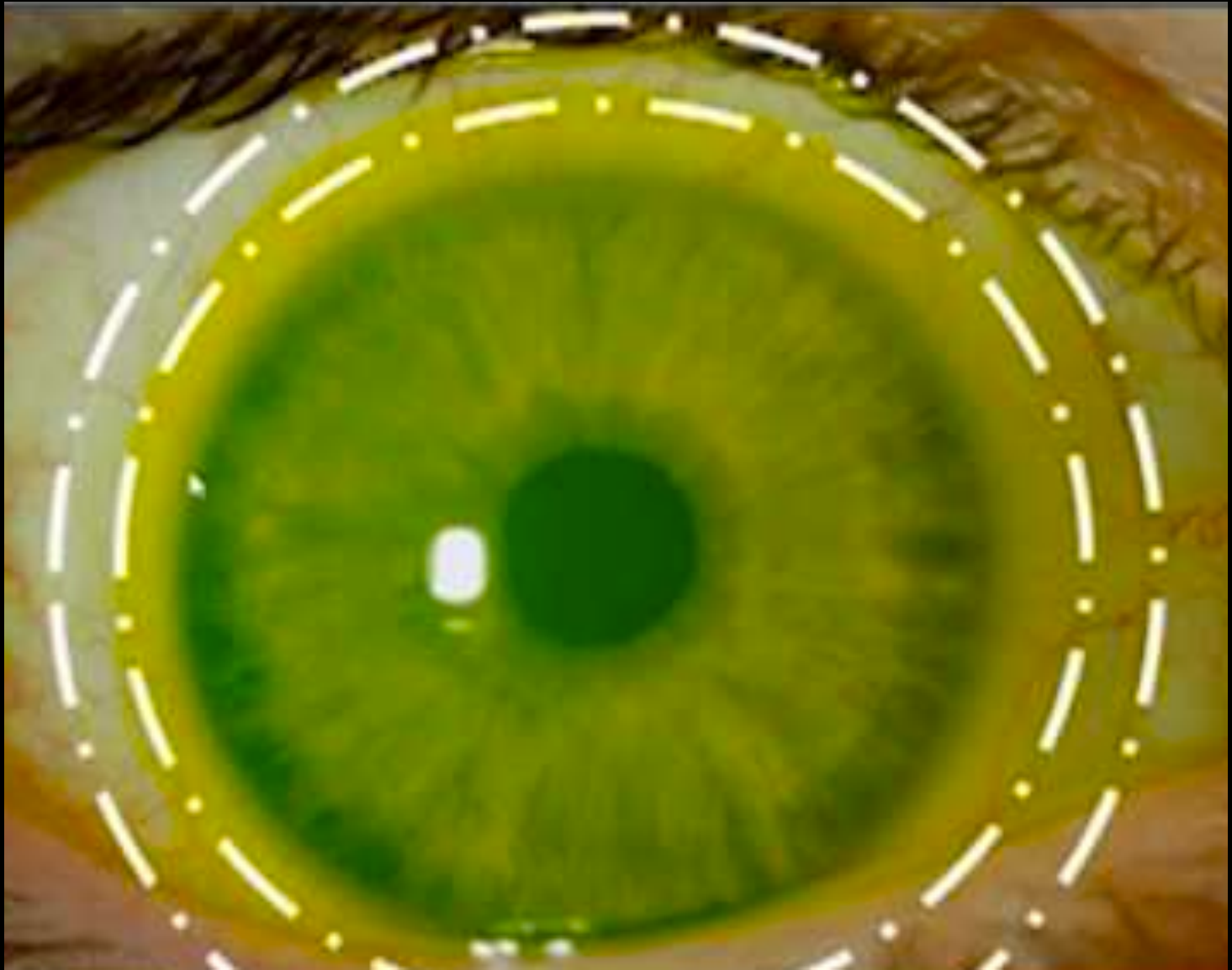


Fissure Size and Lens Diameter



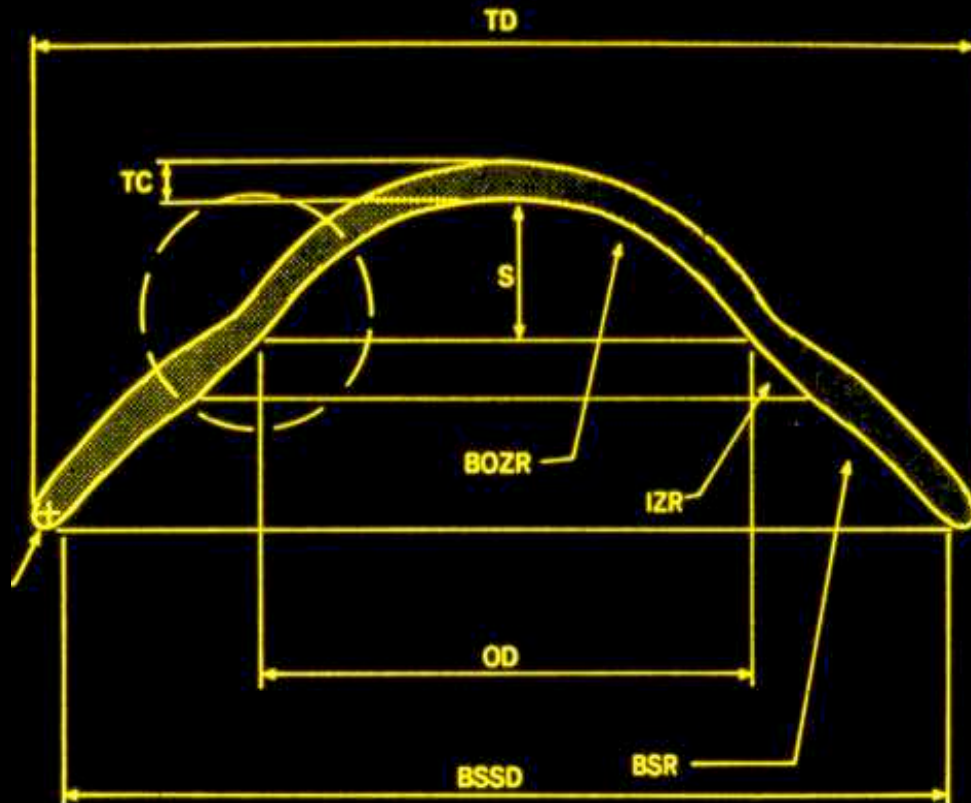


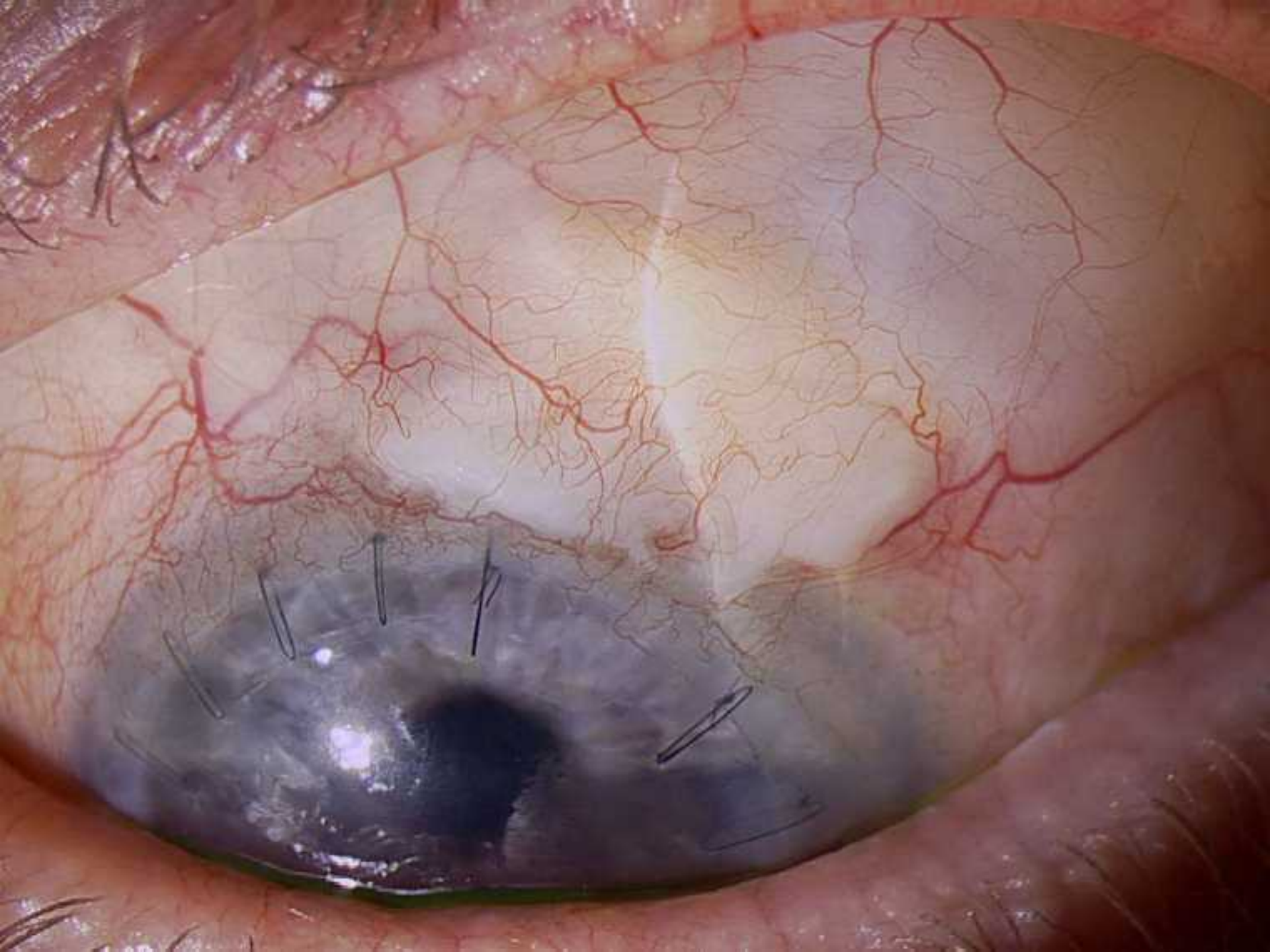
Landing the Lens

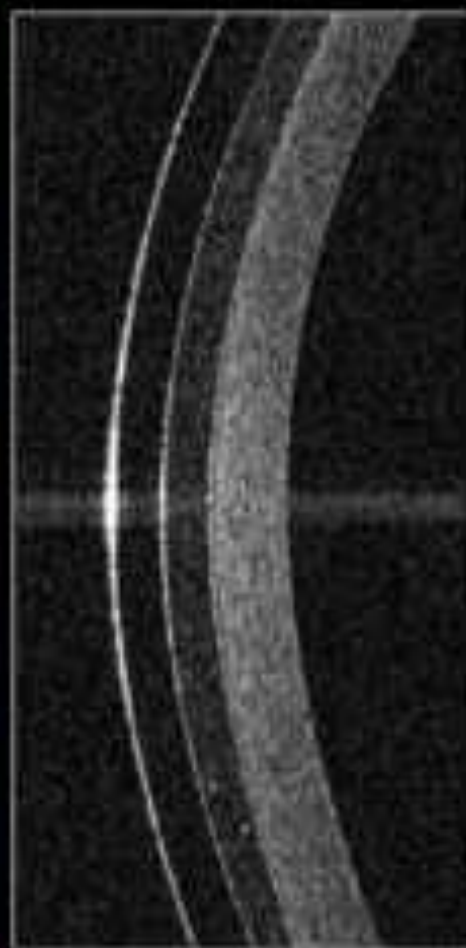
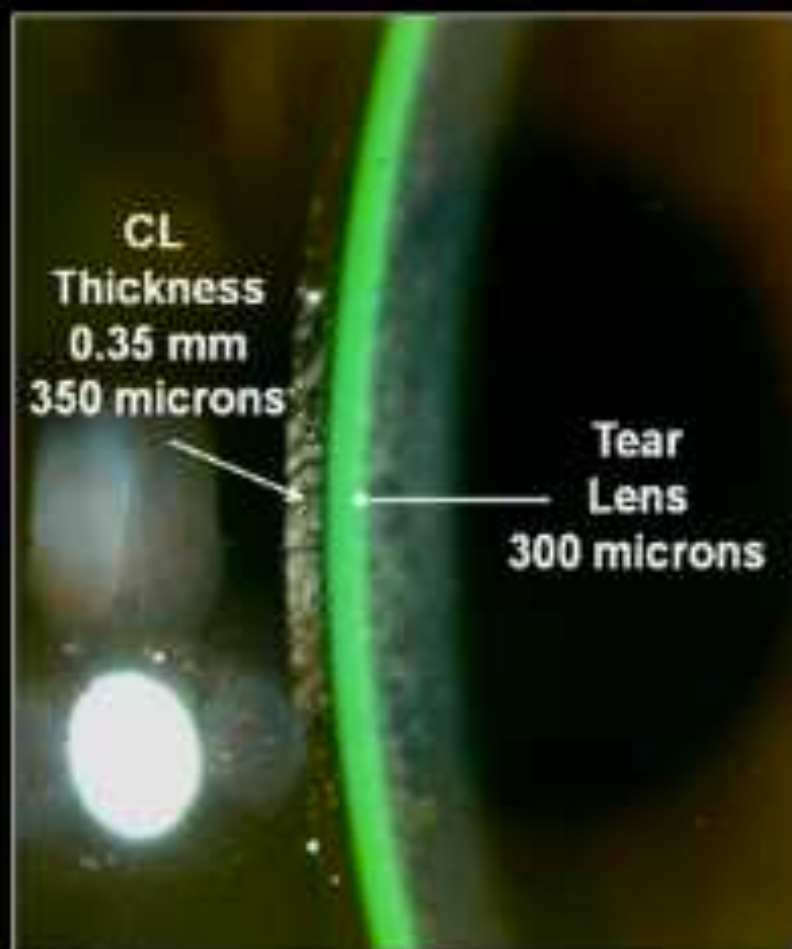


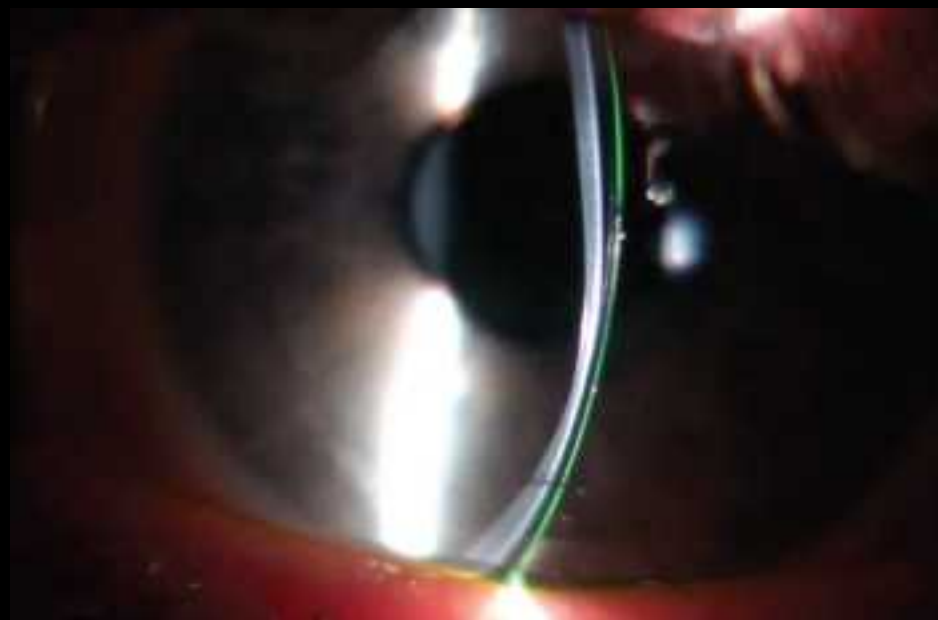
Weight Pressure Bearing...

ONLY on the sclera





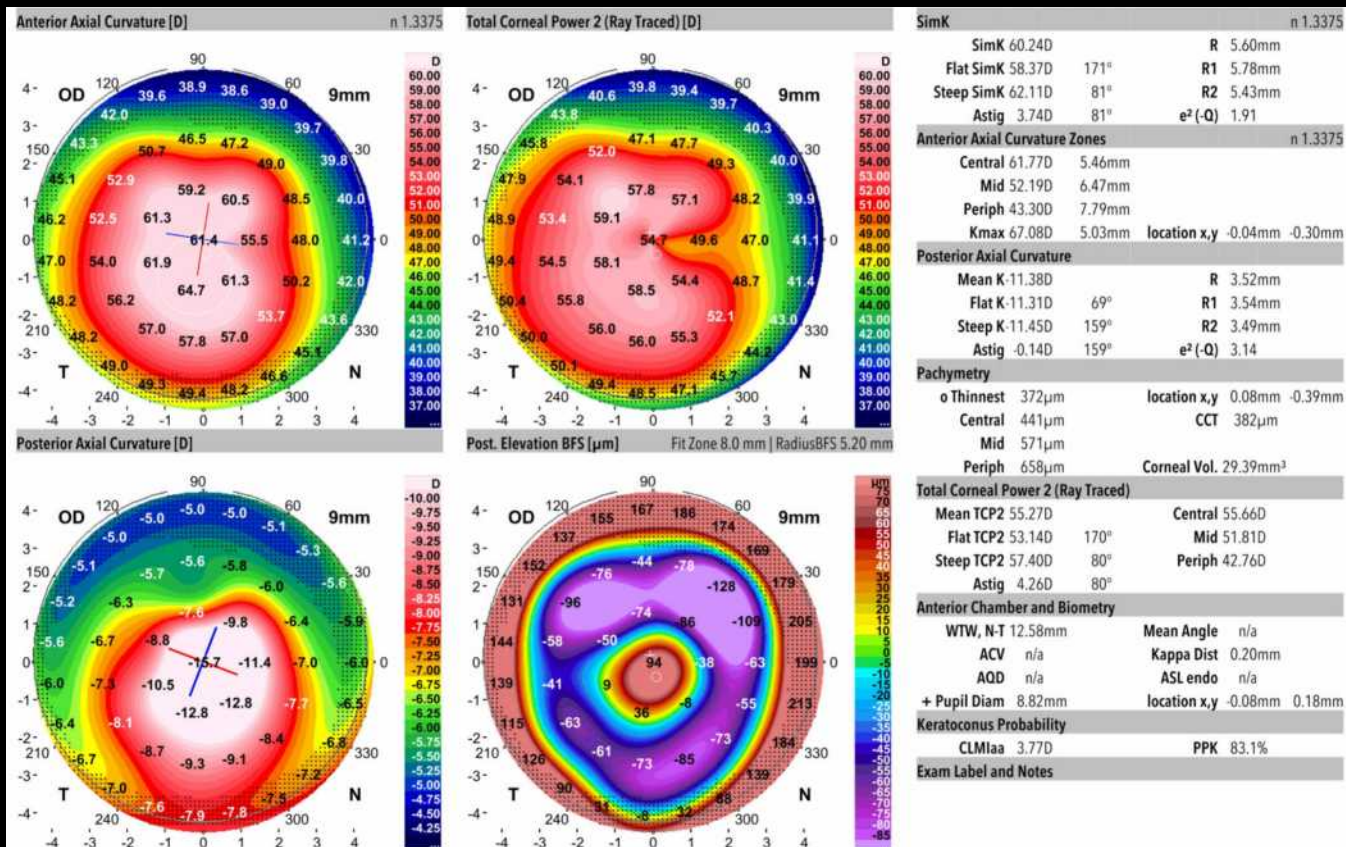


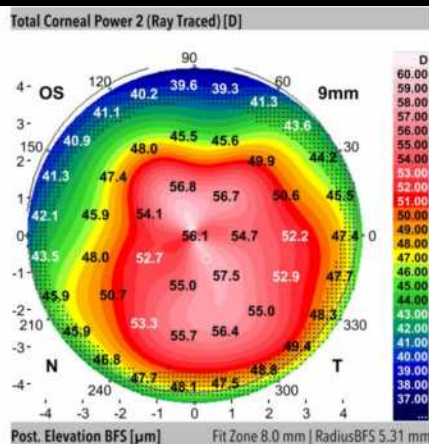
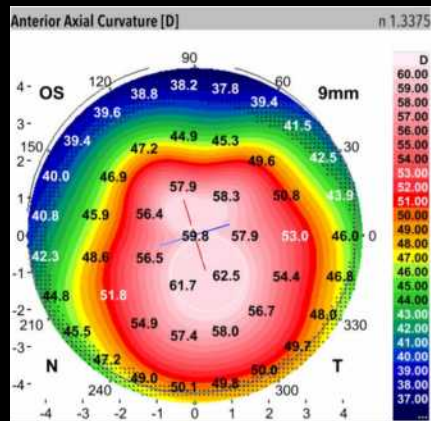
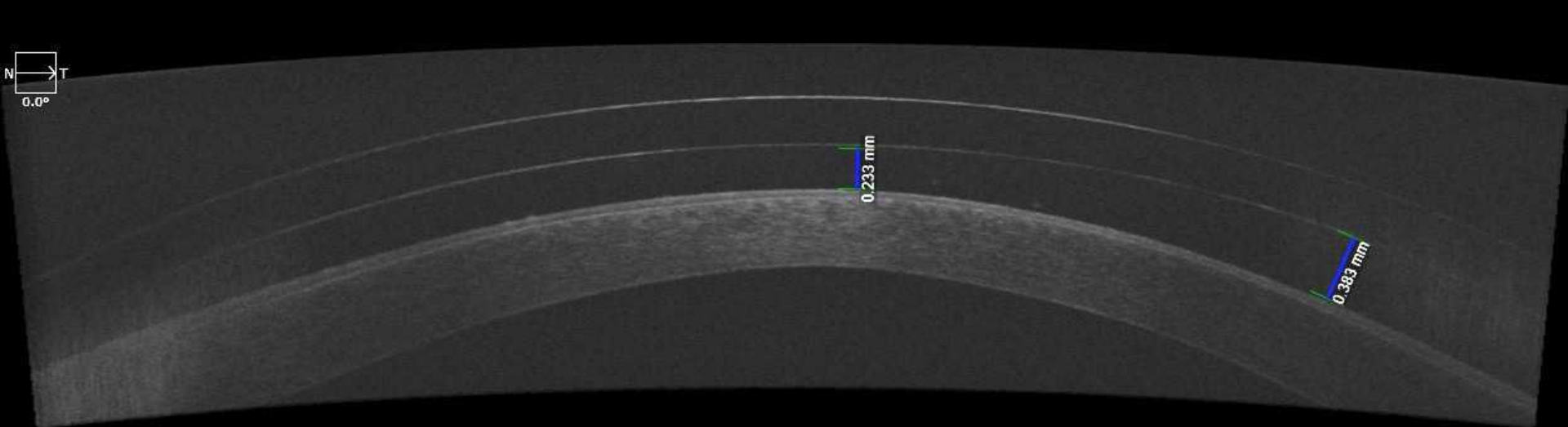




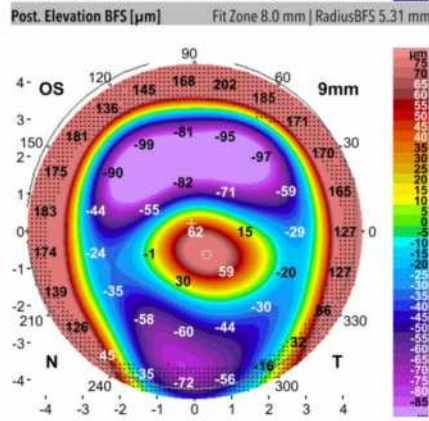
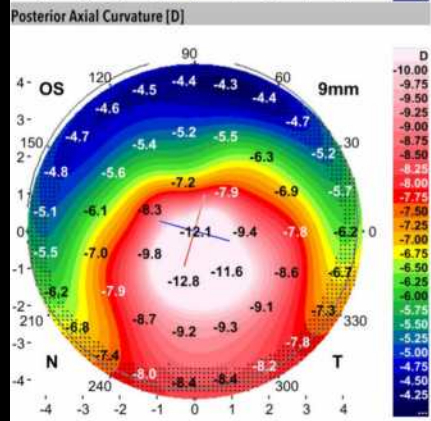
0.295 mm

0.131 mm





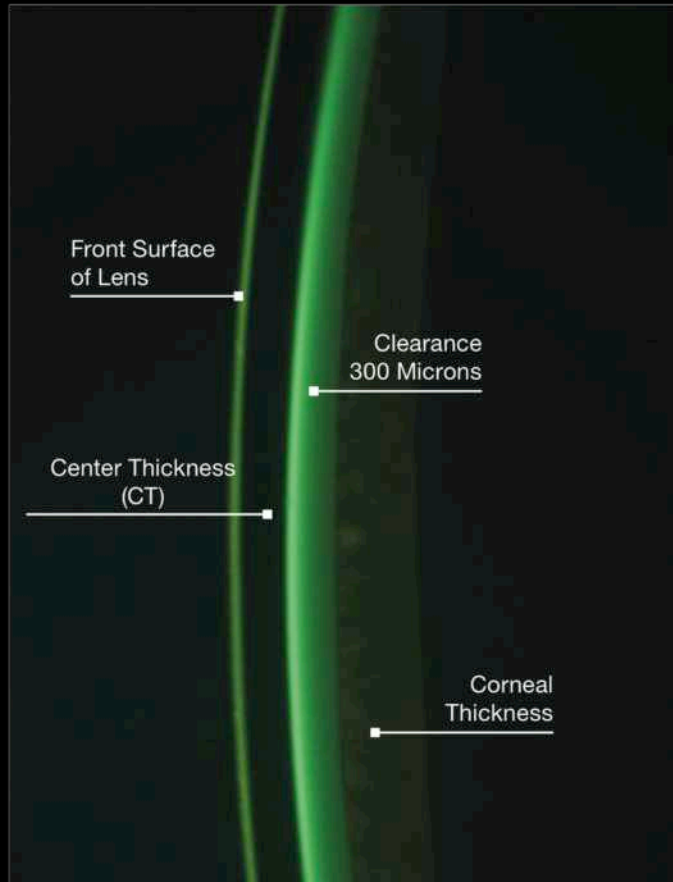
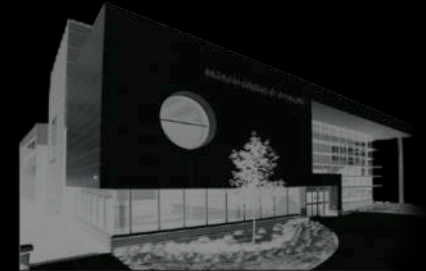
SimK	n 1.3375
SimK 59.15D	R 5.71mm
Flat SimK 57.18D	R1 5.90mm
Steep SimK 61.12D	R2 5.52mm
Astig 3.94D	e ² (-Q) 1.95
Anterior Axial Curvature Zones n 1.3375	
Central 59.88D	5.64mm
Mid 51.12D	6.60mm
Periph 43.44D	7.77mm
Kmax 65.36D	5.16mm location x,y 0.08mm -0.29mm
Posterior Axial Curvature	
Mean K -10.01D	R 4.00mm
Flat K -9.57D	R1 4.18mm
Steep K -10.45D	R2 3.83mm
Astig -0.87D	74° e ² (-Q) 2.88
Pachymetry	
o Thinnest 397µm	location x,y 0.32mm -0.62mm
Central 457µm	CCT 420µm
Mid 565µm	
Periph 661µm	Corneal Vol. 29.31mm ³
Total Corneal Power 2 (Ray Traced)	
Mean TCP2 55.54D	Central 55.48D
Flat TCP2 53.57D	Mid 50.51D
Steep TCP2 57.50D	Periph 43.25D
Astig 3.93D	111°
Anterior Chamber and Biometry	
WTW, N-T 12.64mm	Mean Angle n/a
ACV n/a	Kappa Dist 0.23mm
AOD n/a	ASL endo n/a
+ Pupil Diam 8.88mm	location x,y -0.08mm 0.21mm
Keratoconus Probability	
CLMlaa 4.64D	PPK 96.9%
Exam Label and Notes	



SCLERAL LENS FIT SCALES

To accurately estimate the amount of vaulting (clearance) underneath the posterior surface of a scleral lens necessitates a reference point for comparison. Although some have suggested corneal thickness for the reference, we prefer the

center thickness (CT) of the lens itself which will be listed on the manufacturer's invoice. In each of the examples below, the CT is 0.30mm (300 microns). In most scleral lens designs, the ideal amount of clearance is about 300 microns.

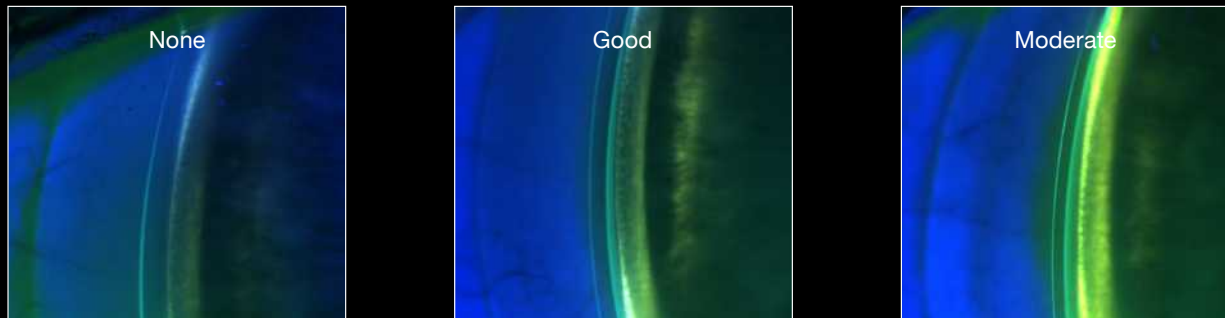


SCLERAL LENS FIT SCALES

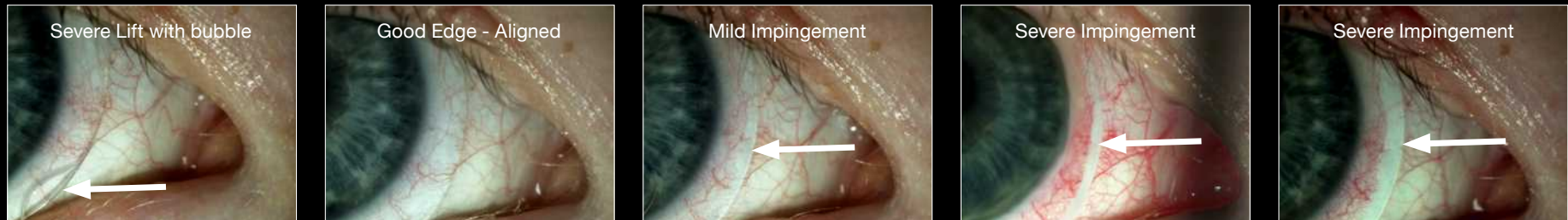
CENTRAL VAULTING



LIMBAL VAULTING



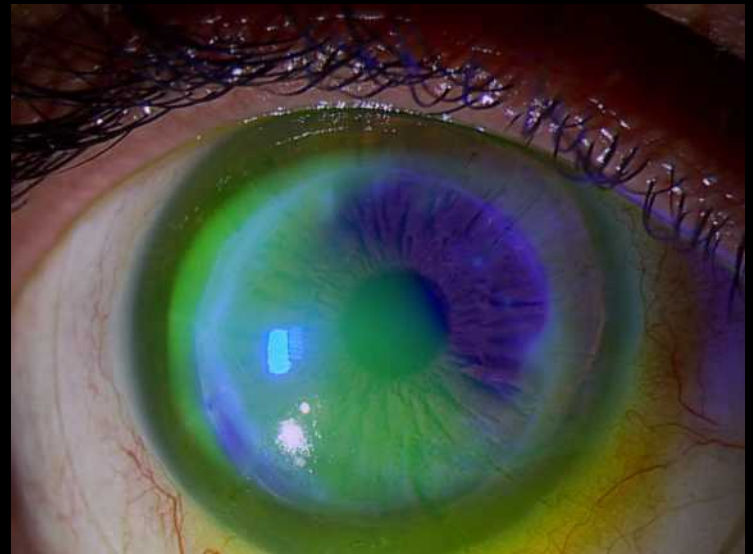
EDGE RELATIONSHIP

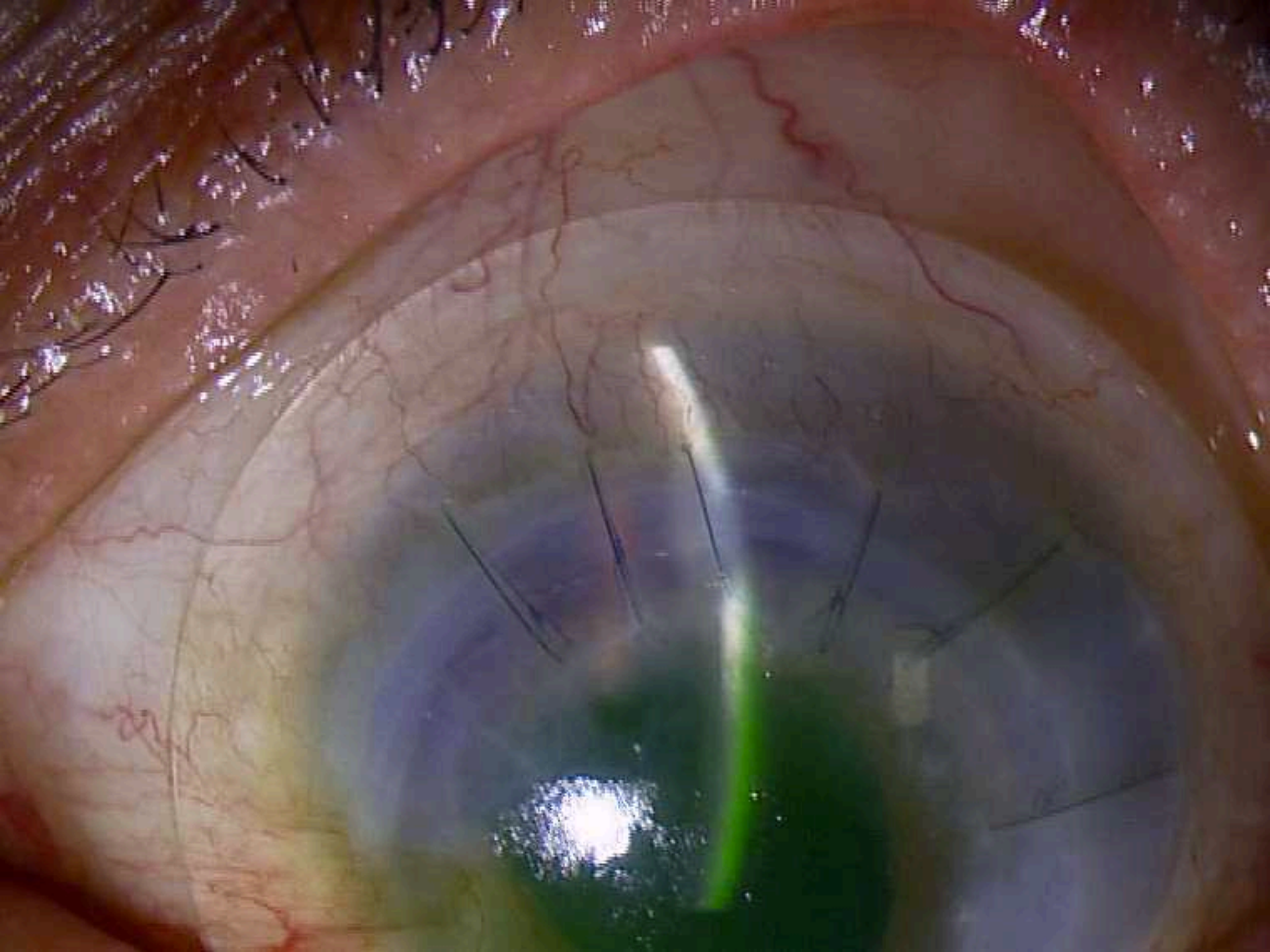


Reservoir Chamber Depth

Example:

Insufficient fluid chamber depth

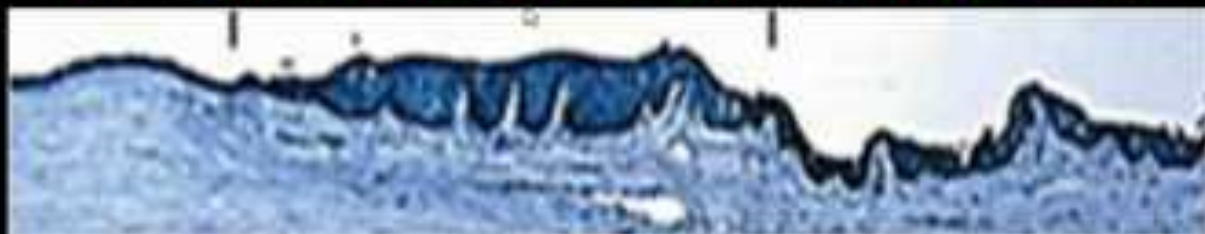




Lens Settling

15 Normal Eye Subjects

- Following 8 hours of lens wear the scleral lenses “settled” on average **96 μm** .
- The amount of “lens settling” varied with a range in sagittal depth loss from **70 to 180 μm** .
- Following one month of scleral lens wear John Mountford found the average lens settling to be **146 microns with a range of 106 to 186 microns**.



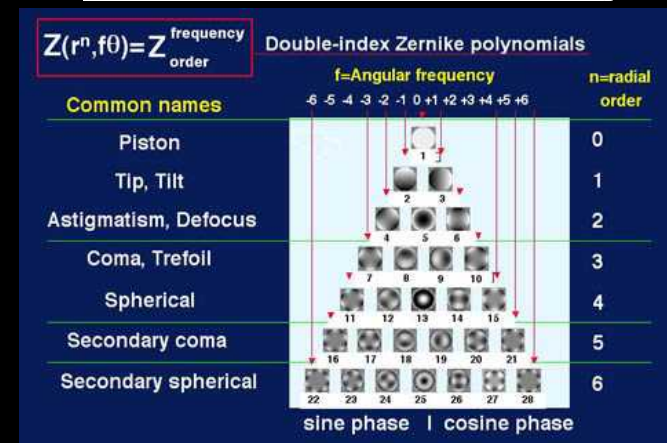
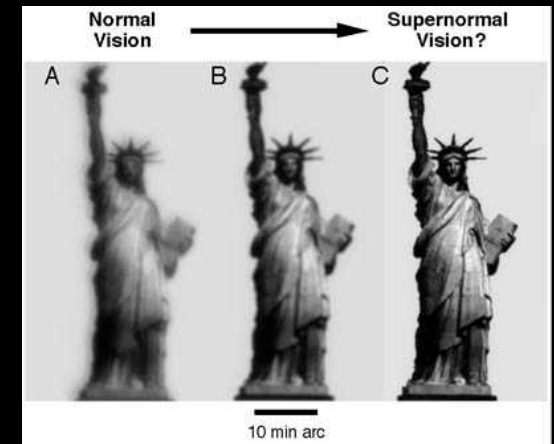
Impact on Vision

Same Effective RX

49 D -10.00 16.5

42 D -3.00 16.5

* using wide RC
to achieve same depth

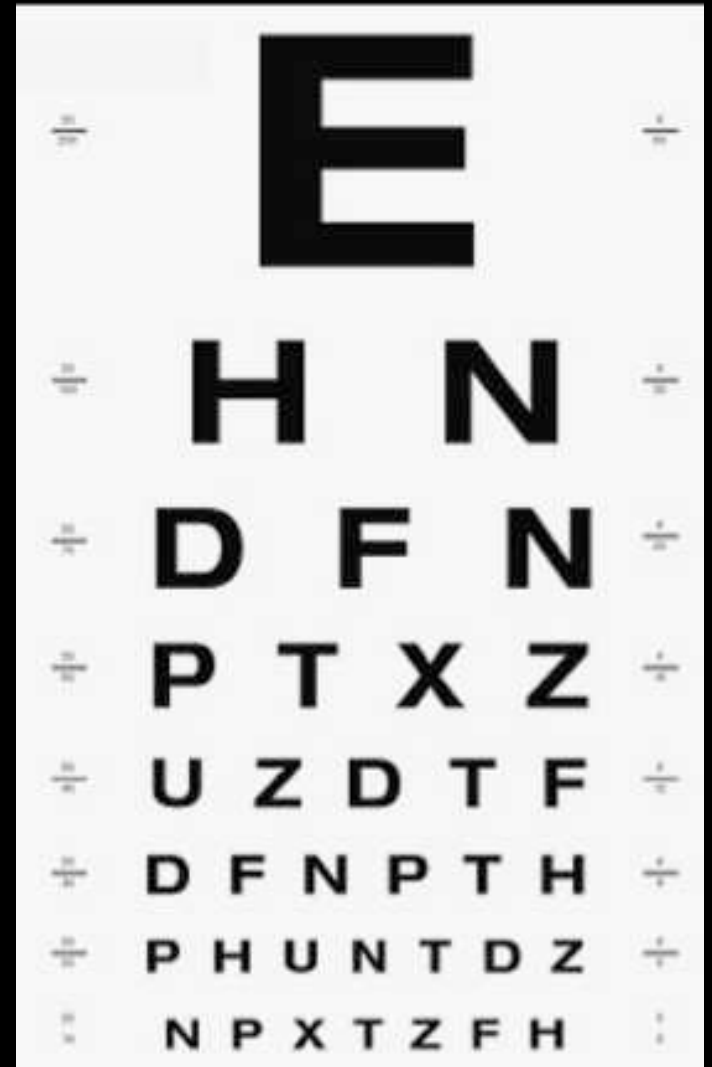


Higher Order Aberrations

Spherical
symmetrical

Coma
comet

Trefoil
triple



The "Perfect" Scleral Lens

- Provides complete alignment 360 degrees
- Uncompromised vision
- Corneal alignment
- Limbal shape control
- Sufficient oxygen delivery
- Wetable surface
- Easily maintained
- Stays clean despite the environment

The "Perfect" Scleral Lens

Provides complete alignment 360 degrees



Surface coverage with single vs. multiple gaze surface topography to fit scleral lenses.

DeNaeyer G¹, Sanders DR², Farajian TS³.

Author information

- 1 Optometrist at Arena Eye Surgeons, United States.
- 2 Center For Clinical Research and President and CEO, Visionary Optics LLC, United States. Electronic address: drsmd@drsmd.com.
- 3 Precision Ocular Metrology, LLC, United States.

Abstract

OBJECTIVES: To determine surface coverage of measurements using the sMap3D[®] corneo-scleral topographer in patients presenting for scleral lens fitting.

METHODS: Twenty-five eyes of 23 scleral lens patients were examined. Up-gaze, straight-gaze, and down-gaze positions of each eye were "stitched" into a single map. The percentage surface coverage between 10mm and 20mm diameter circles from corneal center was compared between the straight-gaze and stitched images. Scleral toricity magnitude was calculated at 100% coverage and at the same diameter after 50% of the data was removed.

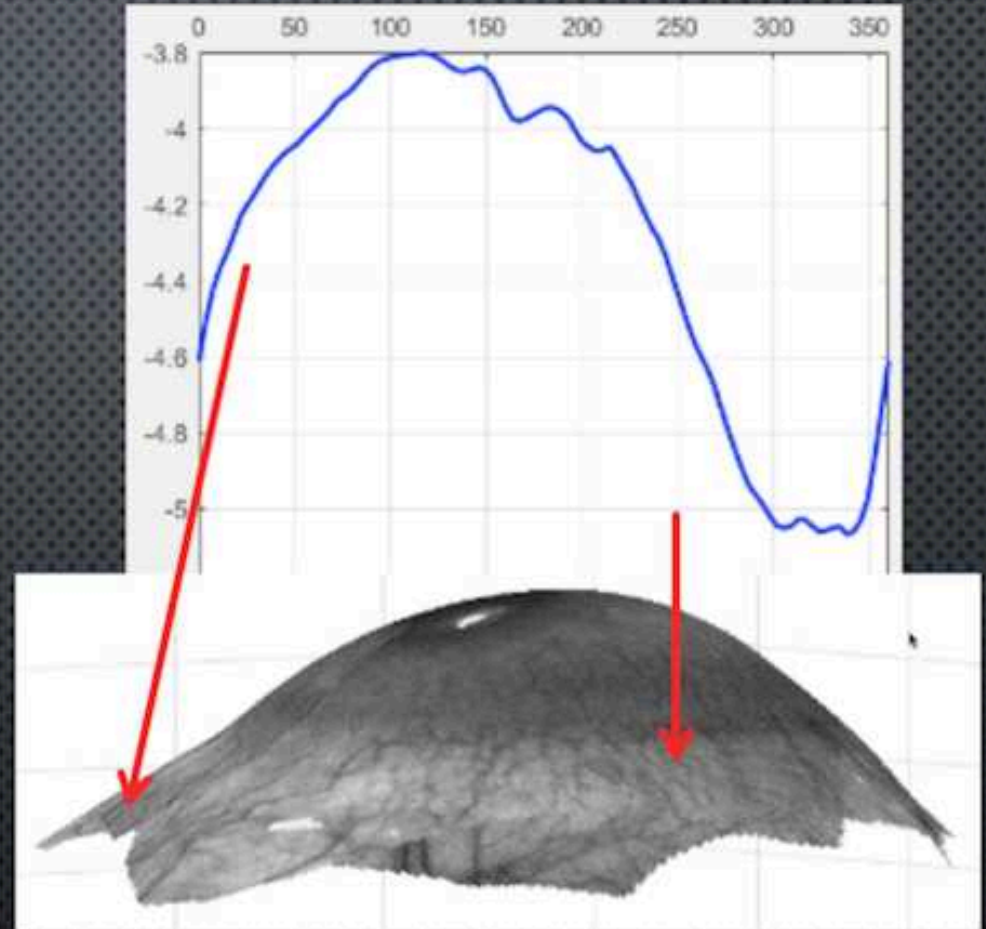
RESULTS: At a 10mm diameter from corneal center, the straight-gaze and stitched images both had 100% coverage. At the 14, 15, 16, 18 and 20mm diameters, the straight-gaze image only covered 68%, 53%, 39%, 18%, and 6% of the ocular surface diameters while the stitched image covered 98%, 96%, 93%, 75%, and 32% respectively. In the case showing the most scleral coverage at 16mm (straight-gaze), there was only 75% coverage (straight-gaze) compared to 100% (stitched image); the case with the least coverage had 7% (straight gaze) and 92% (stitched image). The 95% limits of agreement between the 50% and 100% coverage scleral toricity was between -1.4D (50% coverage value larger) and 1.2D (100% coverage larger), a 2.6D spread. The absolute difference between 50% to 100% coverage scleral toricity was $\geq 0.50D$ in 28% and $\geq 1.0D$ in 16% of cases.

CONCLUSIONS: It appears that a single straight-gaze image would introduce significant measurement inaccuracy in fitting scleral lenses using the sMap3D while a 3-gaze stitched image would not.

Copyright © 2017 British Contact Lens Association. Published by Elsevier Ltd. All rights reserved.

KEYWORDS: Ocular surface coverage; Scleral lenses; Scleral topography

- 4 PRIMARY CATEGORIES OF SHAPE
- RESULTS SUGGEST THAT THE MAJORITY OF EYES MAY BENEFIT FROM **CUSTOM BACK SURFACE** HAPTICS



**Table 1 Scleral Surface Patterns
x in 140 Scleral Lens Patients**

Group	Pattern Description	N(%)
1	Spherical	8 (5.7%)
2	Toric-Regular	40 (28.6%)
3	Asymmetric High or Low Points	57 (40.7%)
4	Periodicity different from 180°	35 (25%)

65.7%

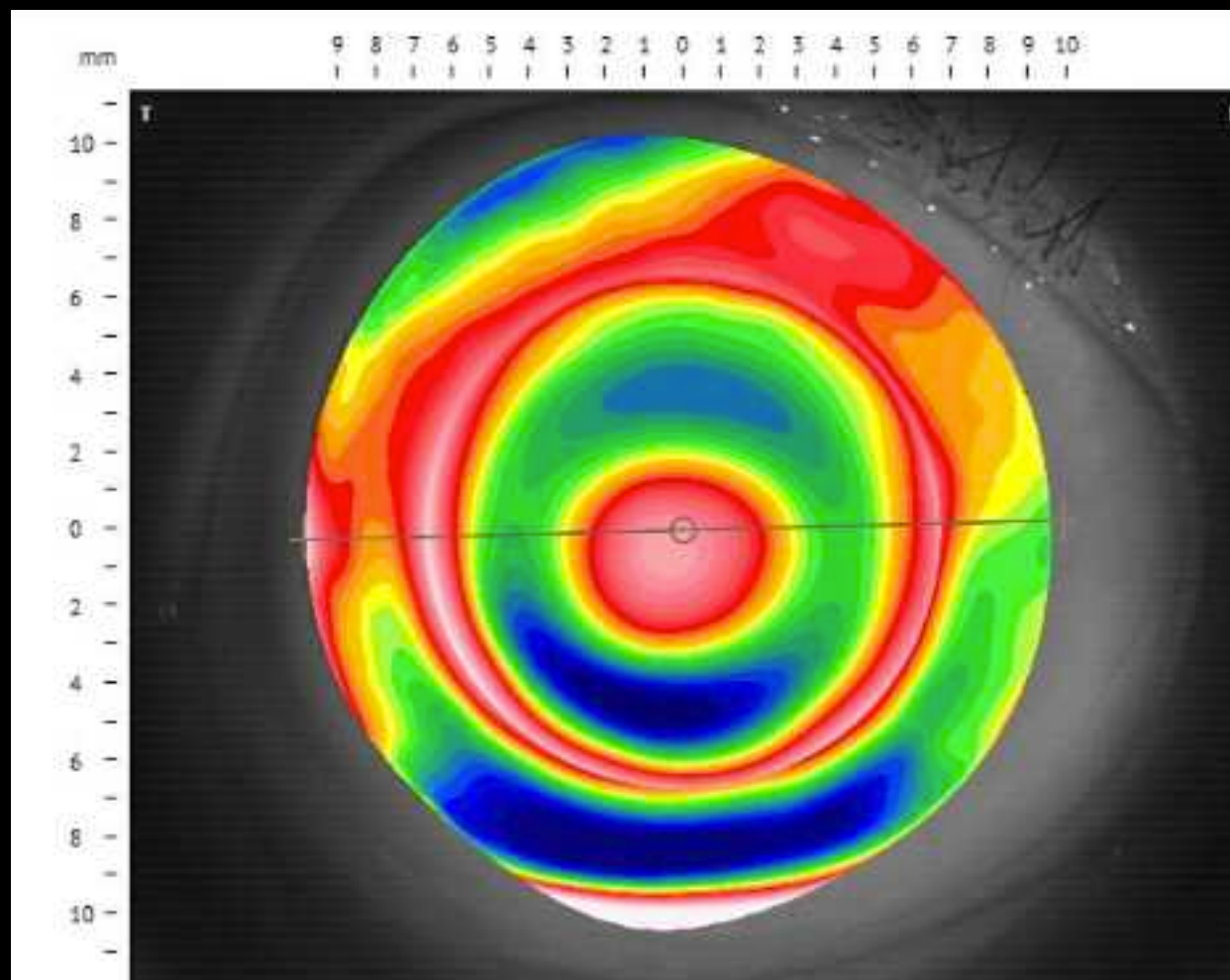
Groups 3 and 4 have scleral shapes that are different from commonly designed spherical or toric haptic designs!

The "Perfect" Scleral Lens

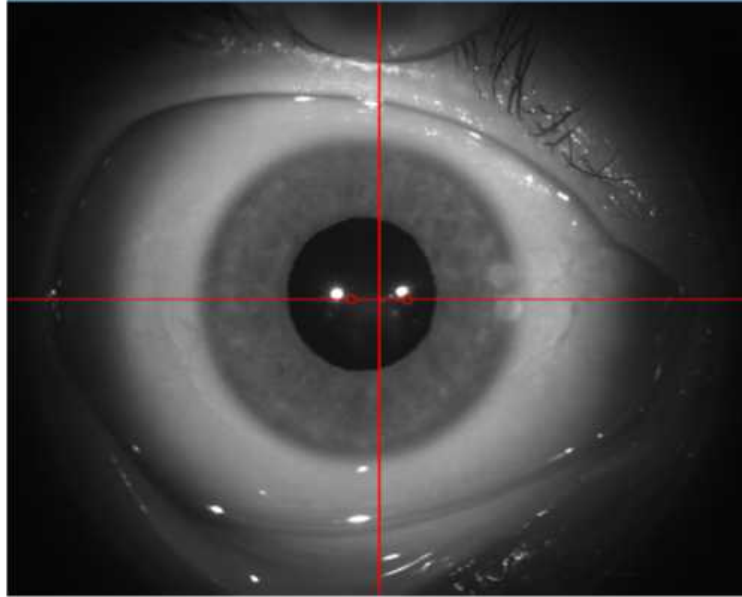
Provides complete alignment 360 degrees

- Spherical
- Toric
- Asymmetrical
- Quadrant specific
- Angles
- Manage additional lesions (1 or more)

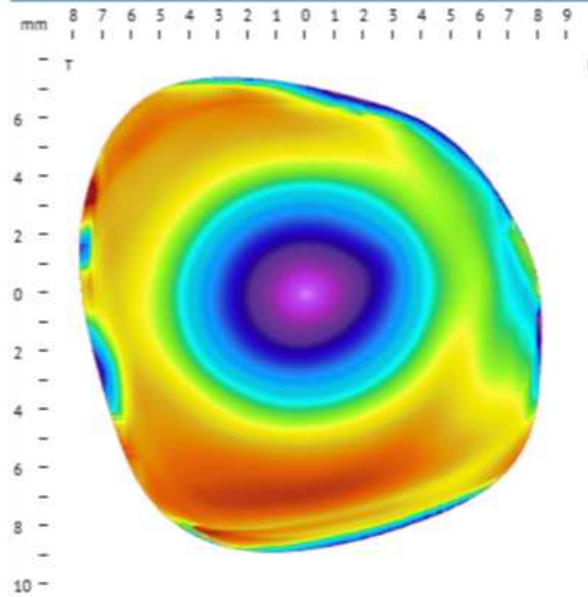




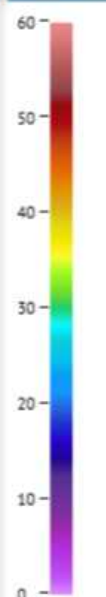
Source



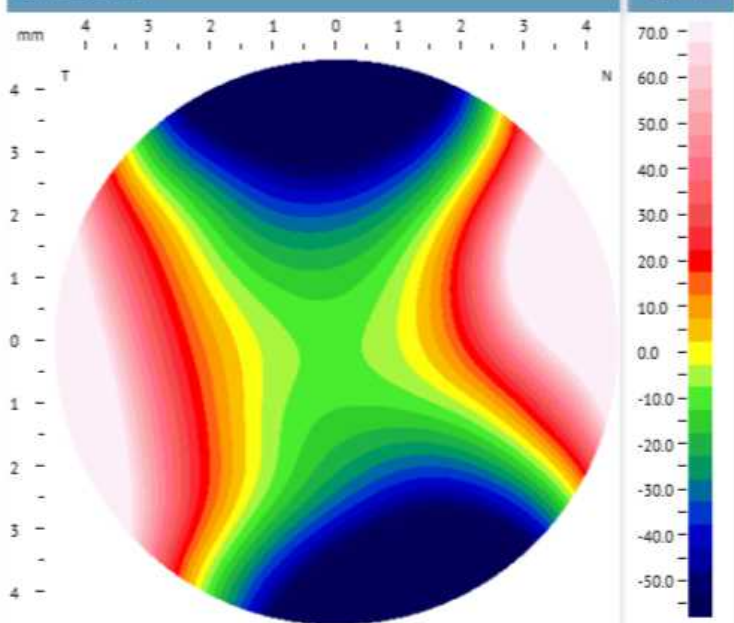
Tangent angles



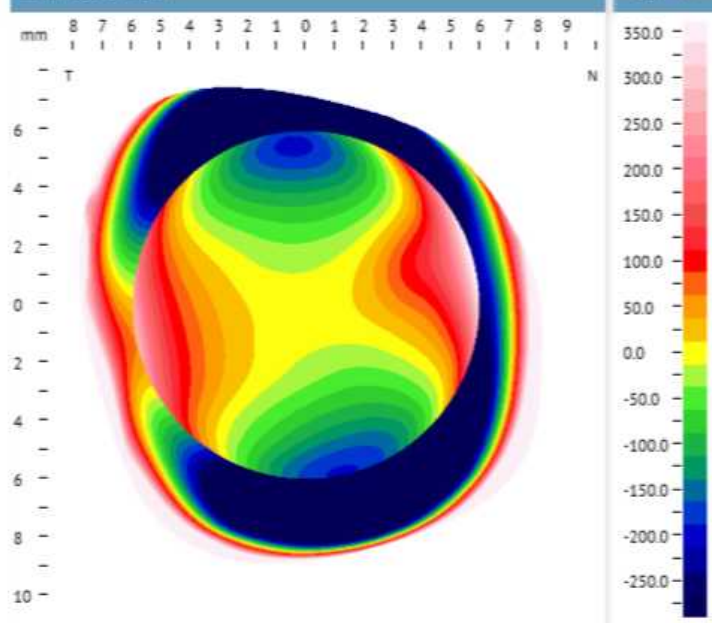
* Ansi



Corneal elevation

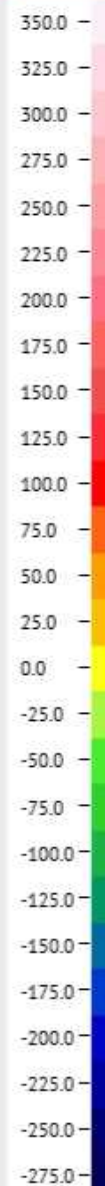
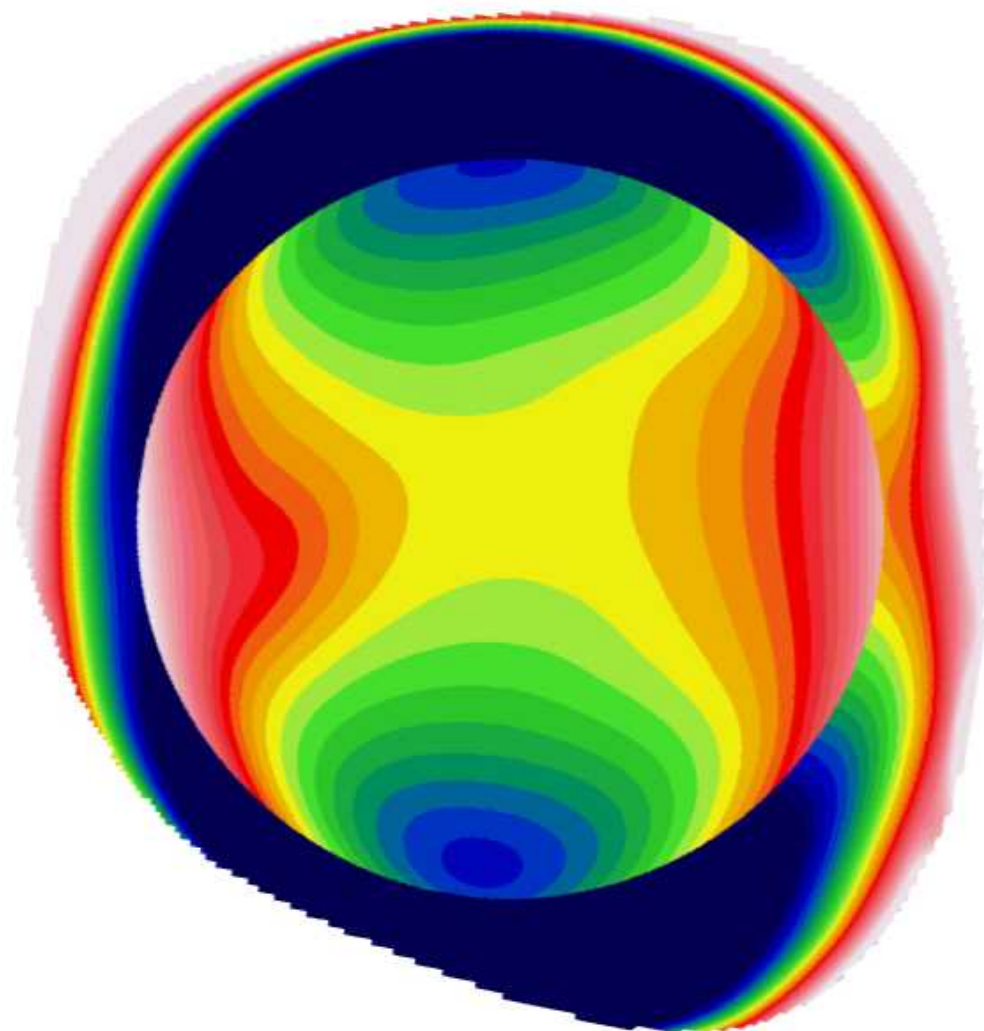


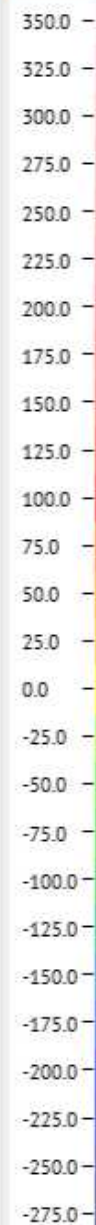
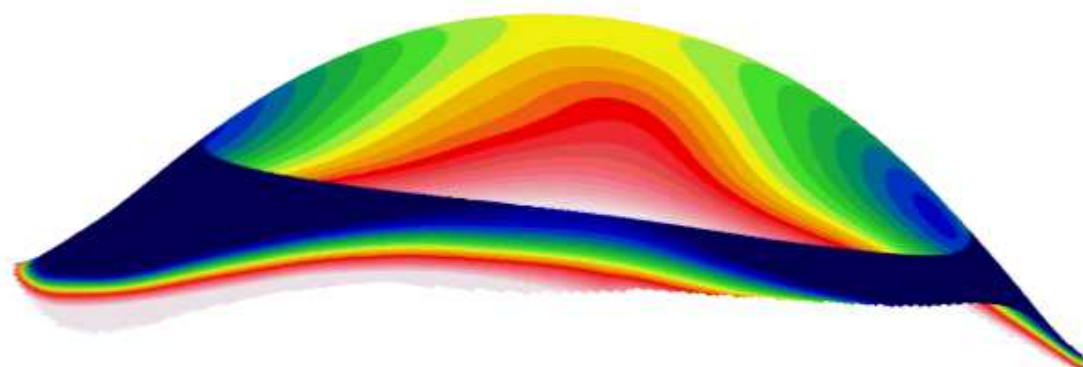
Bisphere elevation



Combined measurement - 6/20/2019 1:59 PM (0) OD

μm ▼



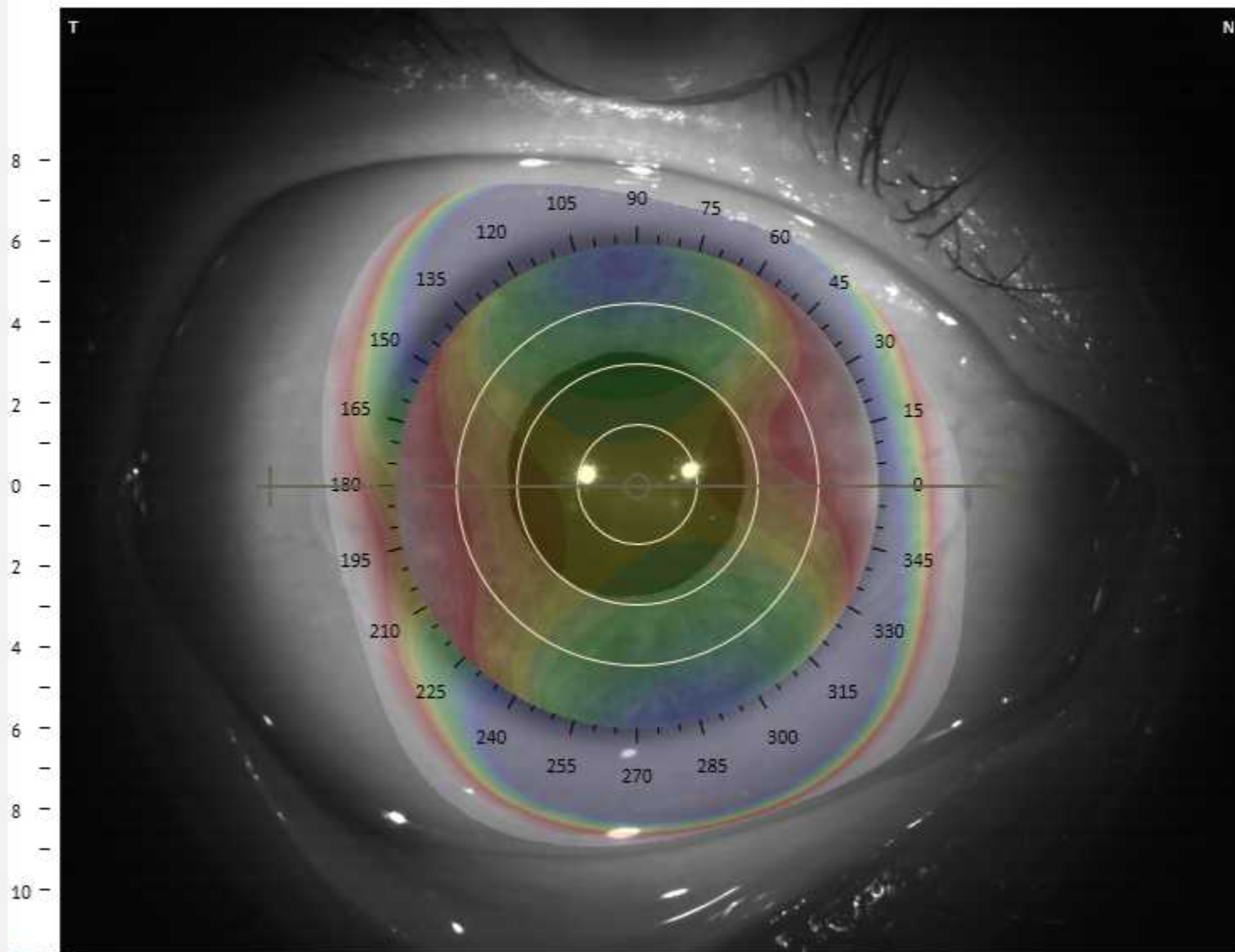


Combined measurement - 6/20/2019 1:59 PM (0) OD

μm

mm

8 7 6 5 4 3 2 1 0 1 2 3 4 5 6 7 8 9
| | | | | | | | | | | | | | | | | |

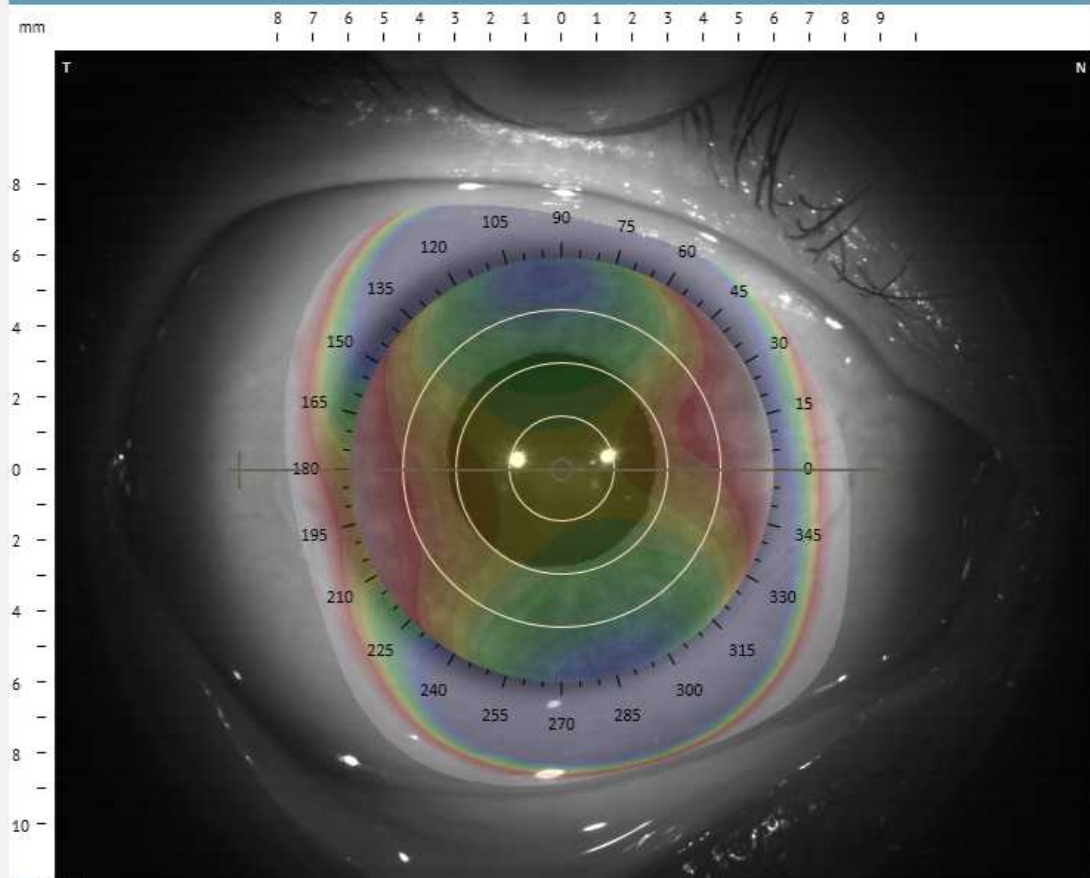


350.0
325.0
300.0
275.0
250.0
225.0
200.0
175.0
150.0
125.0
100.0
75.0
50.0
25.0
0.0
-25.0
-50.0
-75.0
-100.0

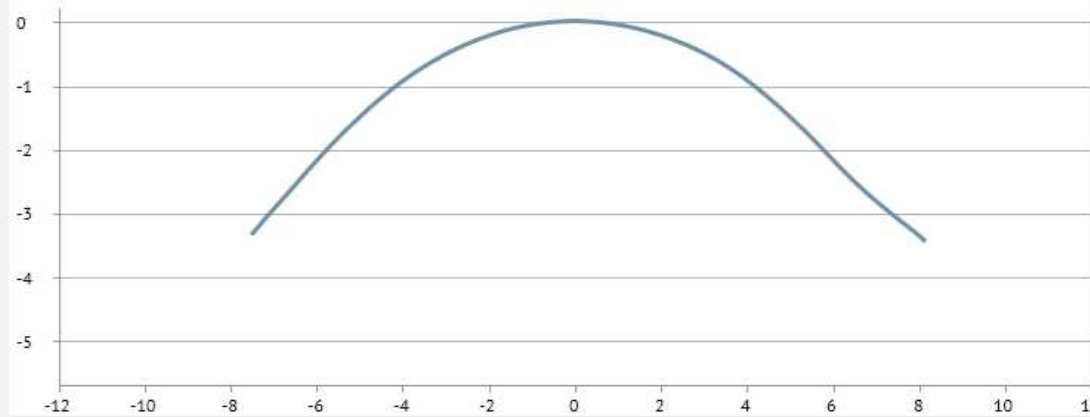
Combined measurement - 6/20/2019 1:59 PM (0) OD

μm ▼

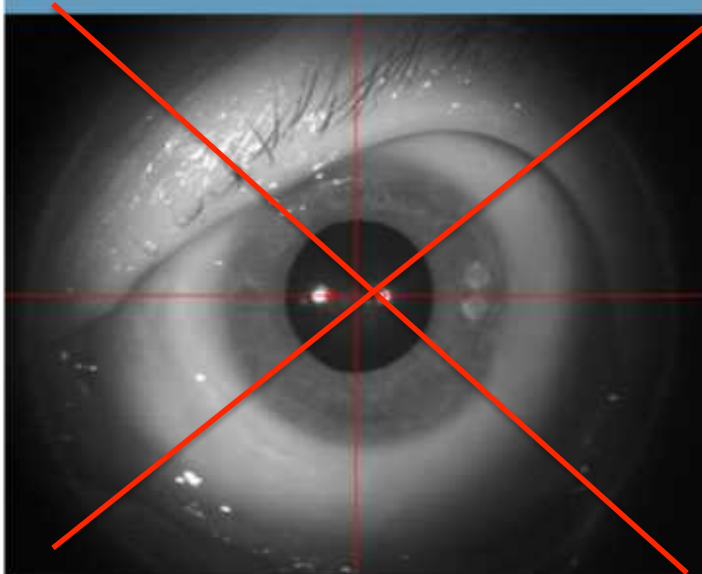
mm



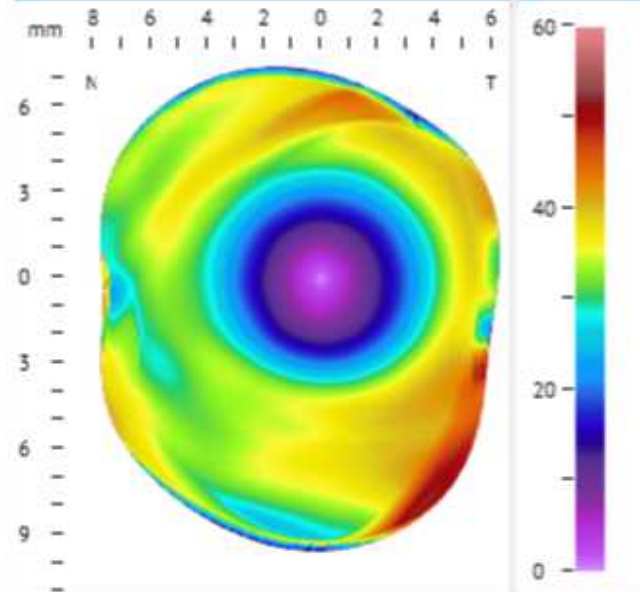
[-] [x] [y]



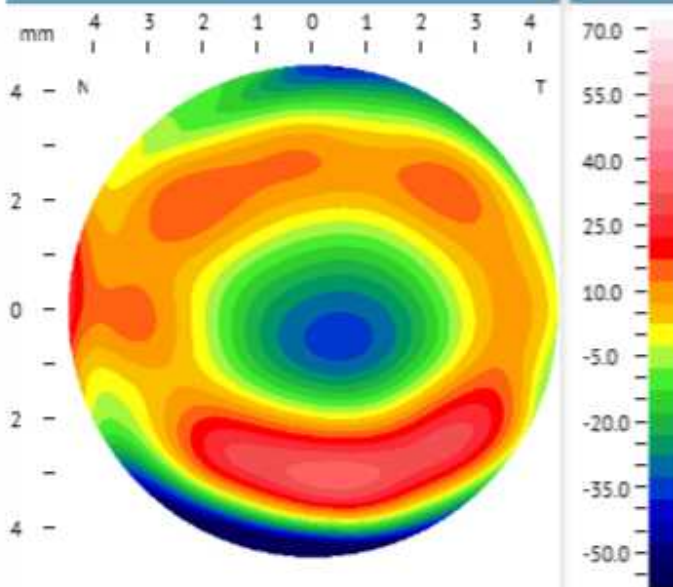
Source



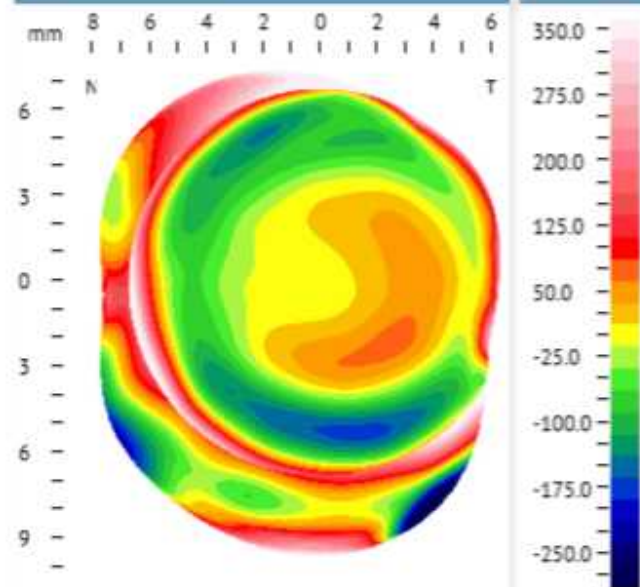
Tangent angles



Corneal elevation



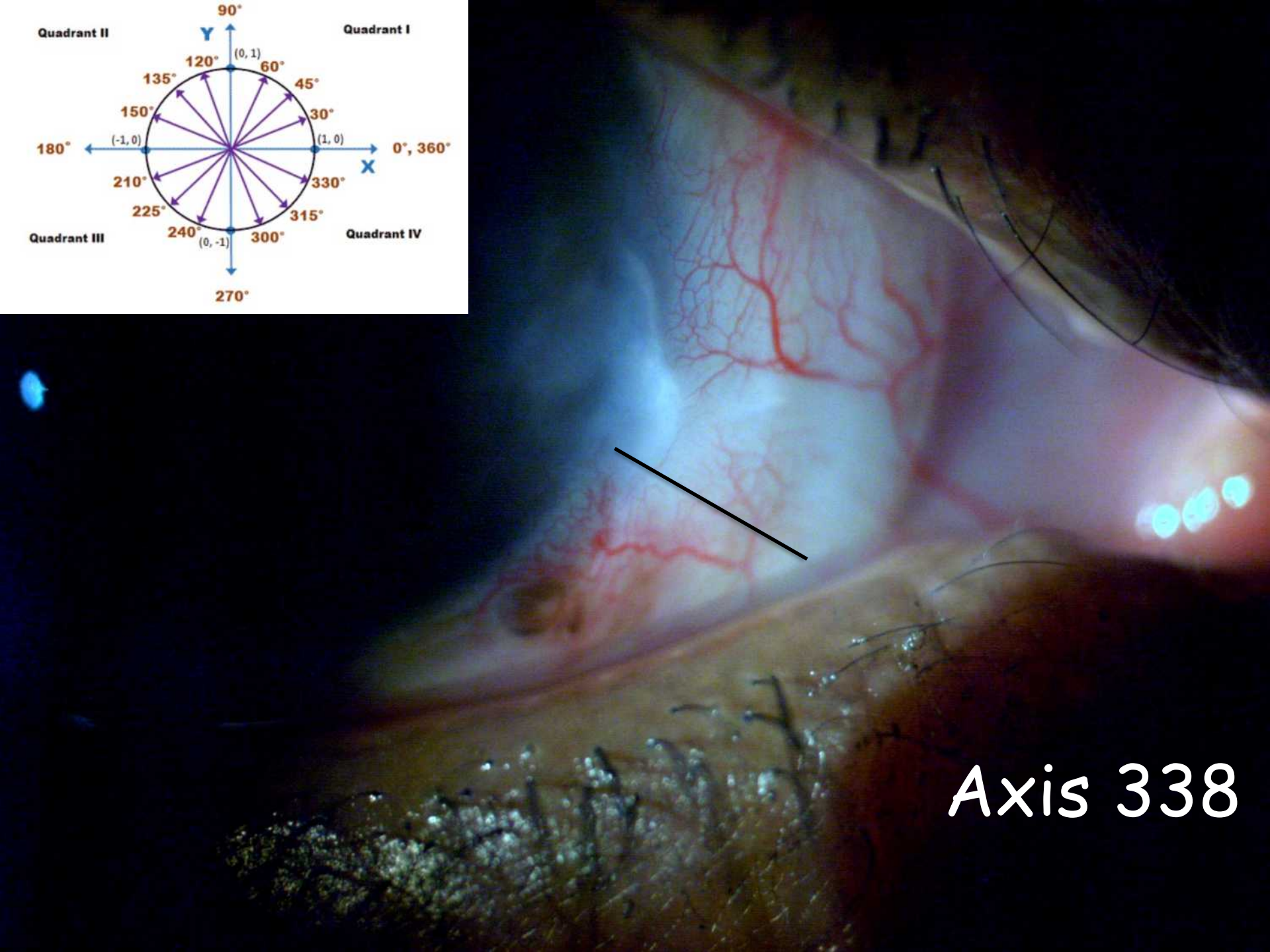
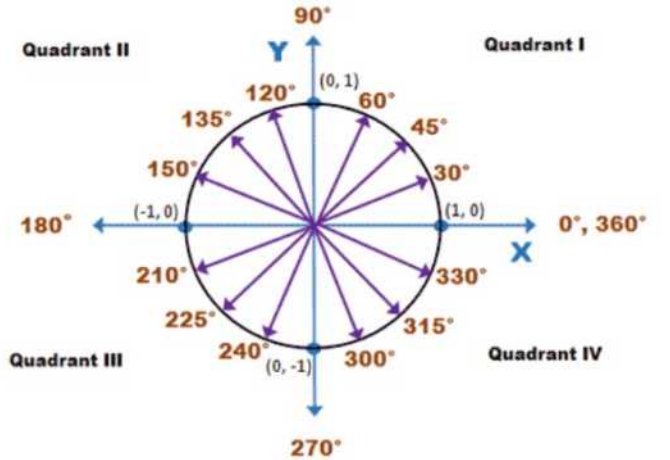
Bisphere elevation

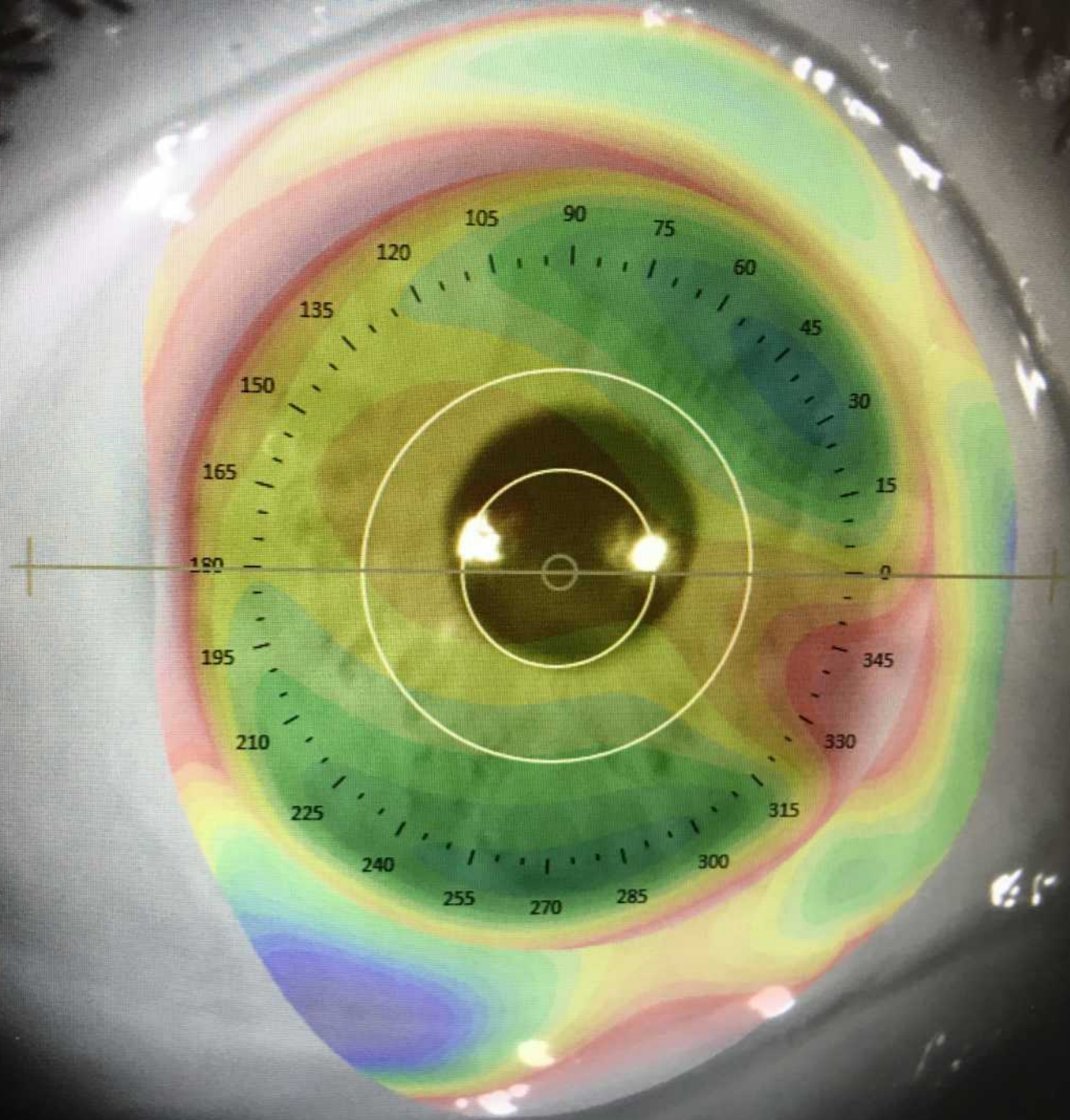


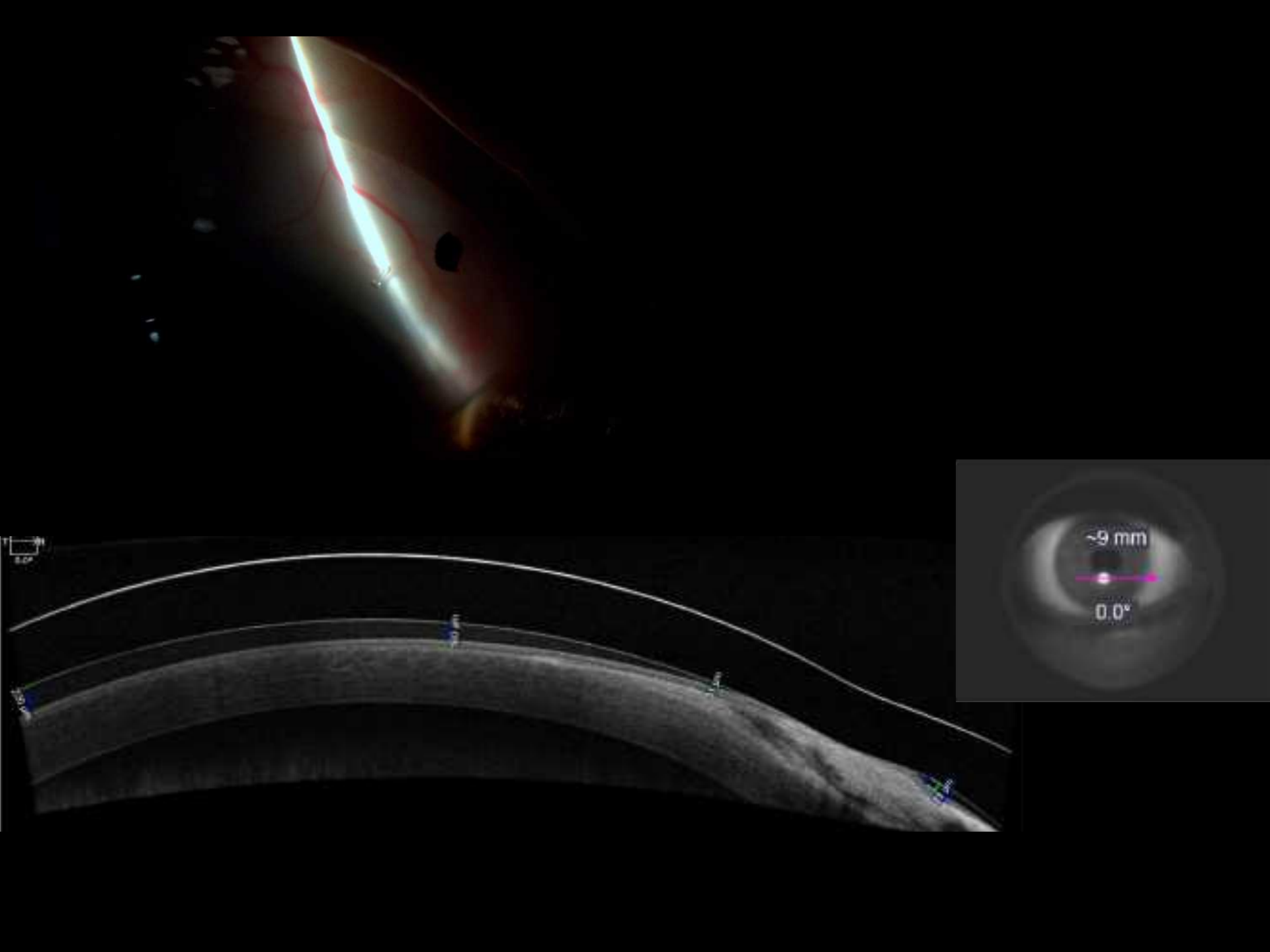
169°

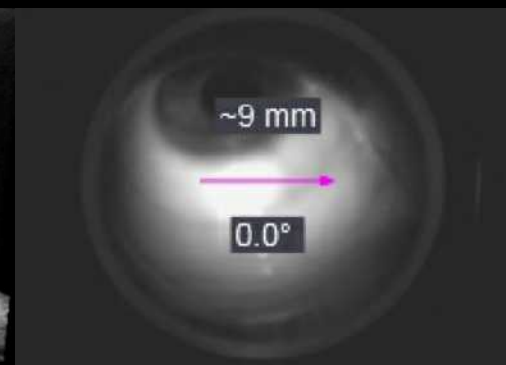
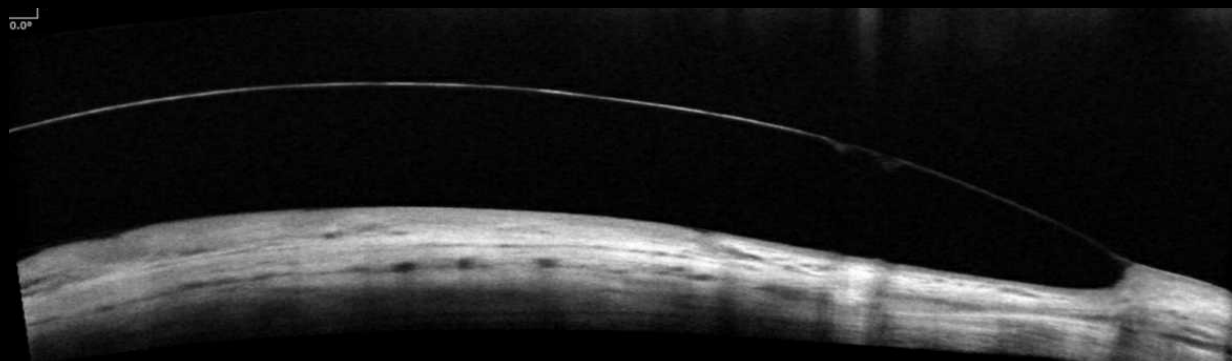
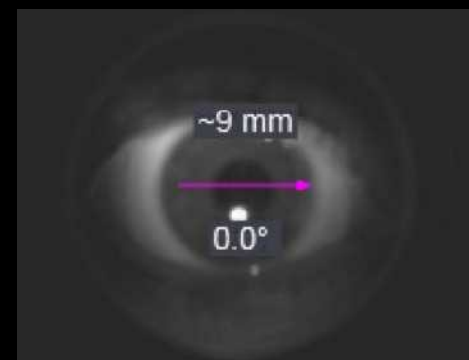
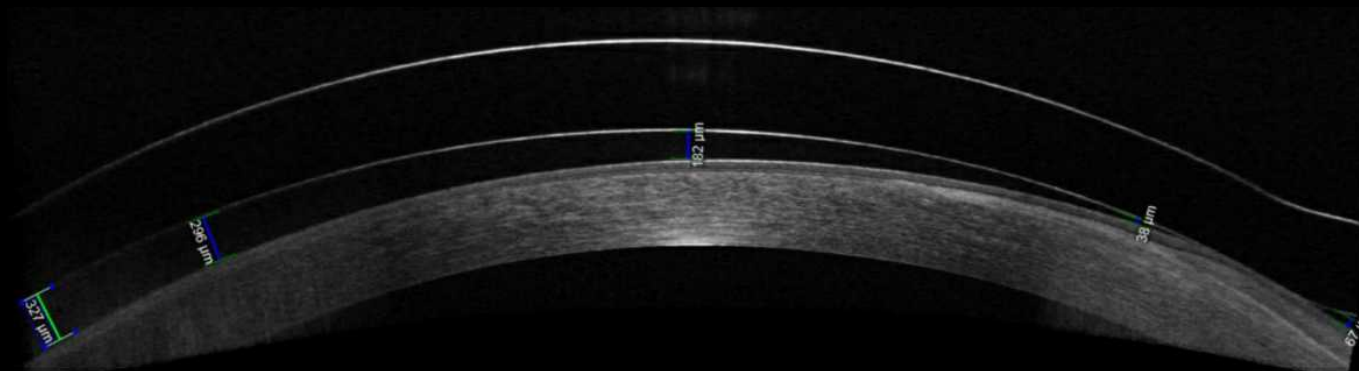
Axis Assistant App

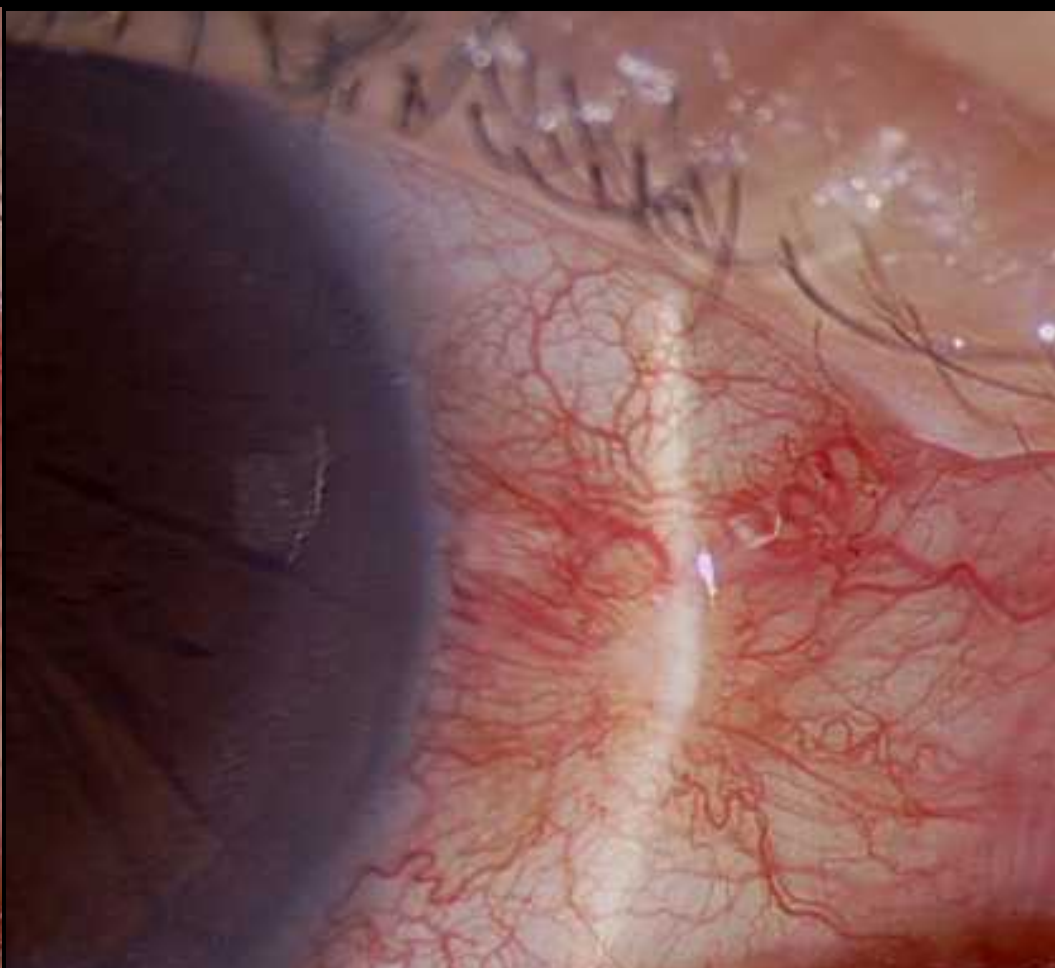
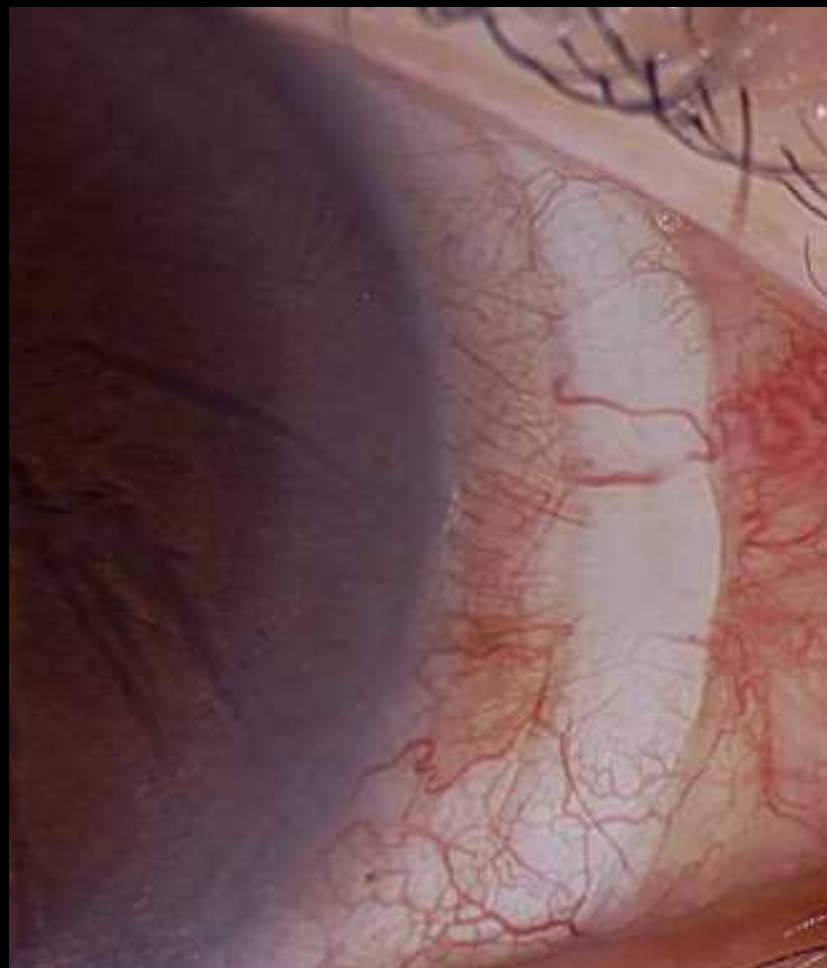


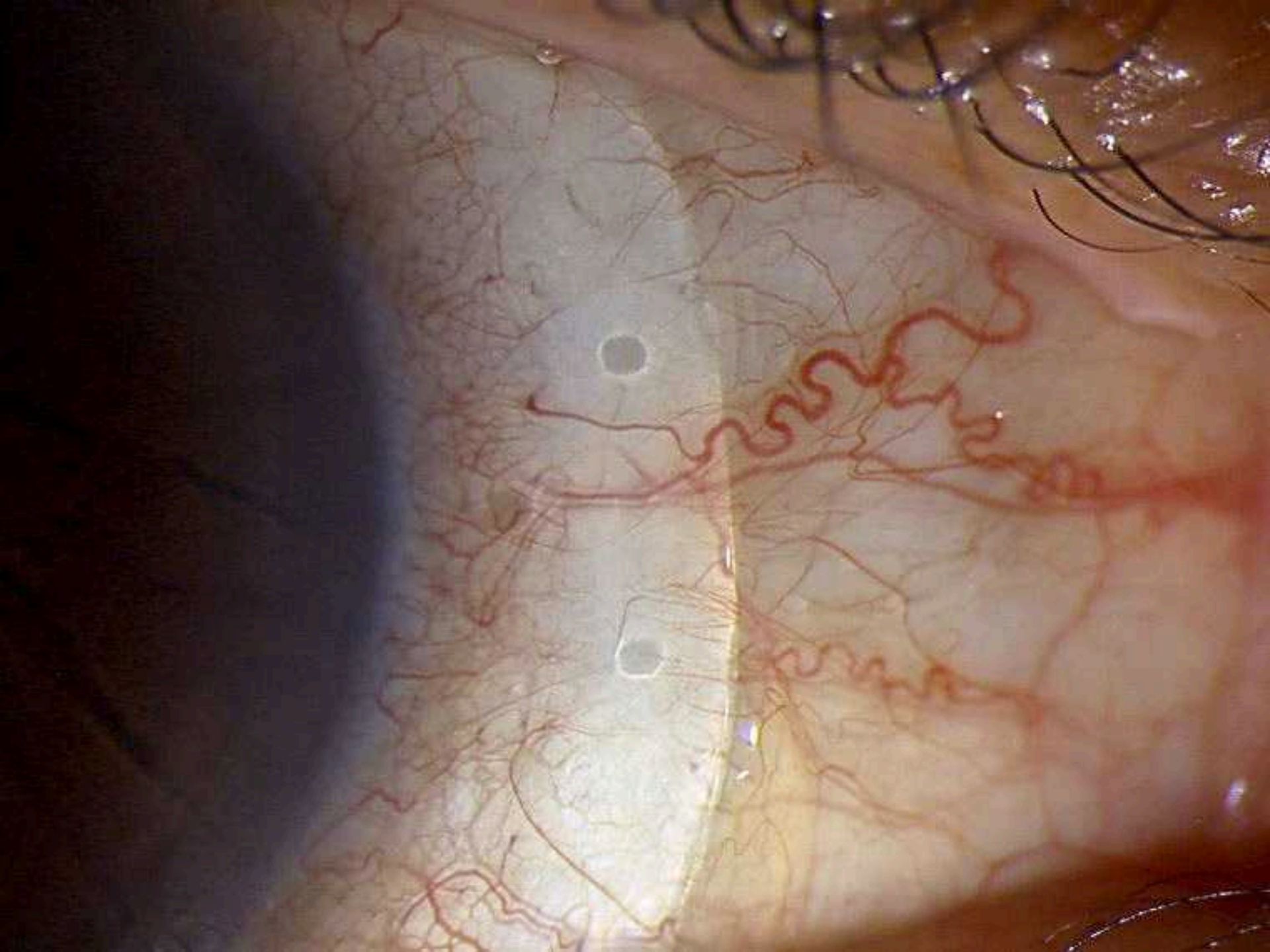


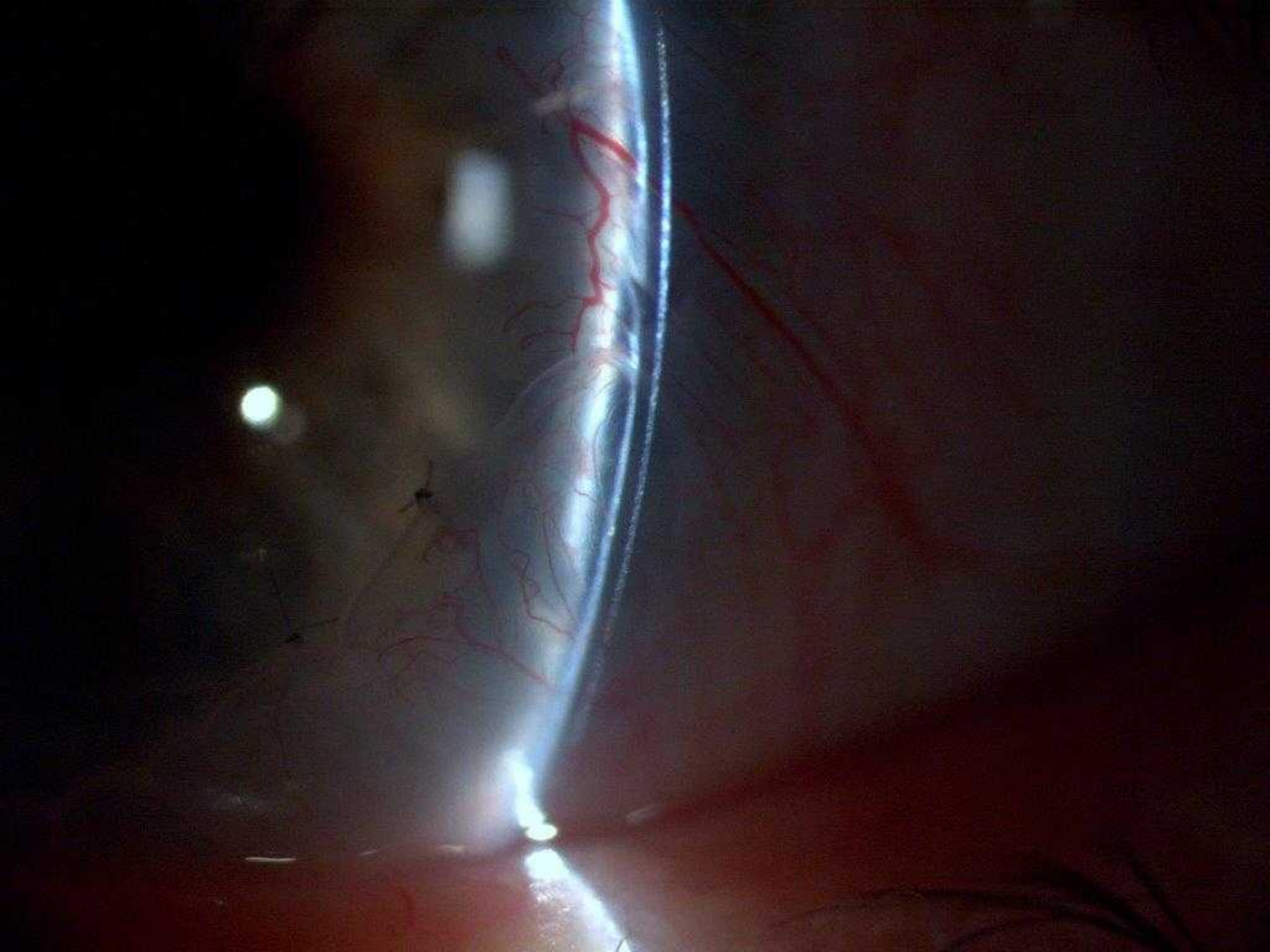


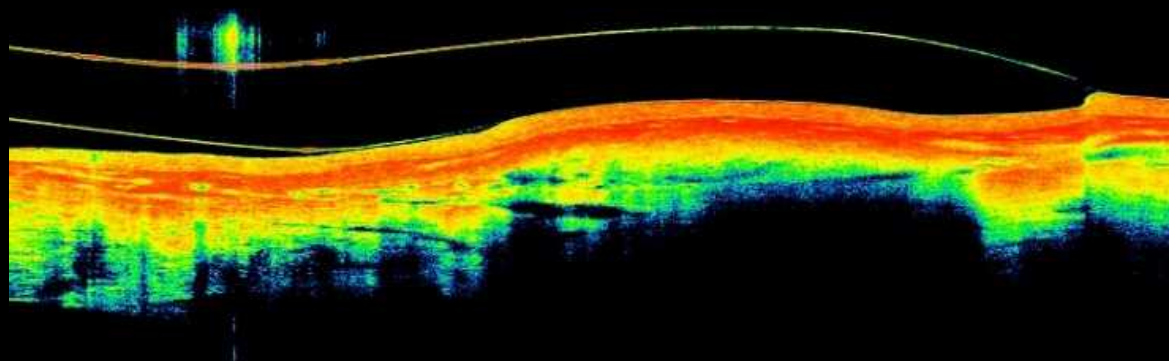


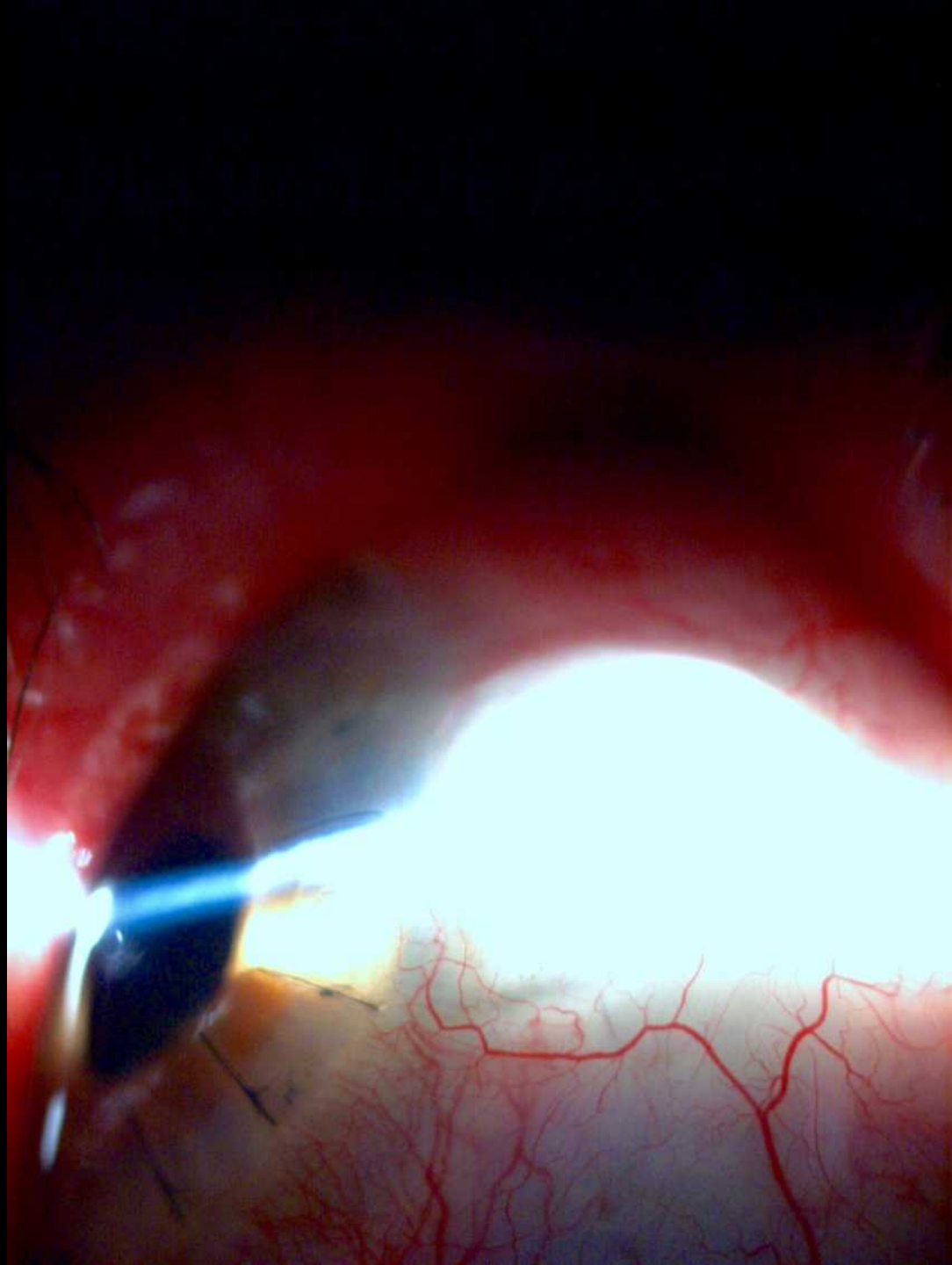










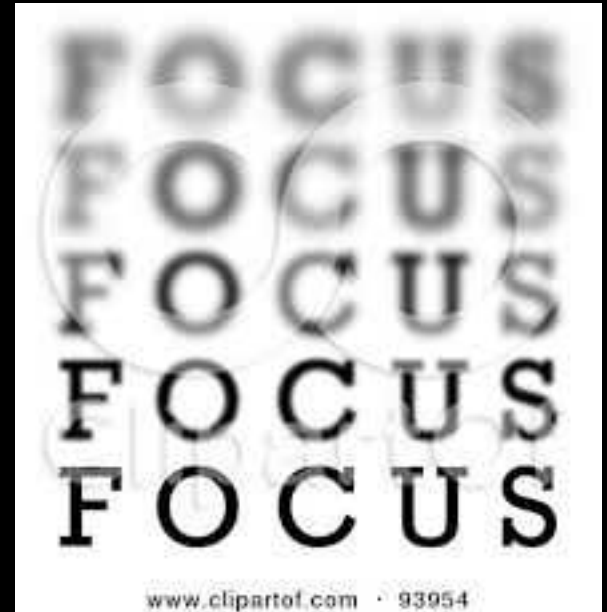


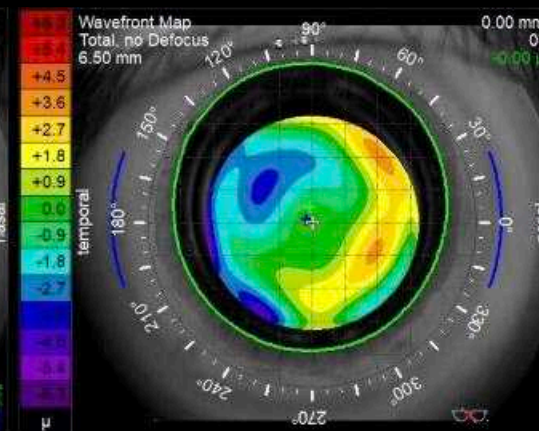
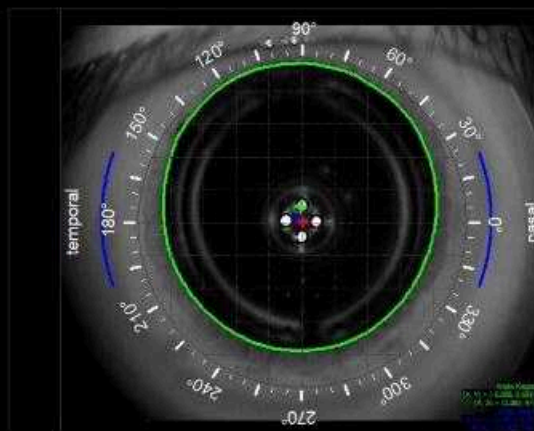


The "Perfect" Scleral Lens

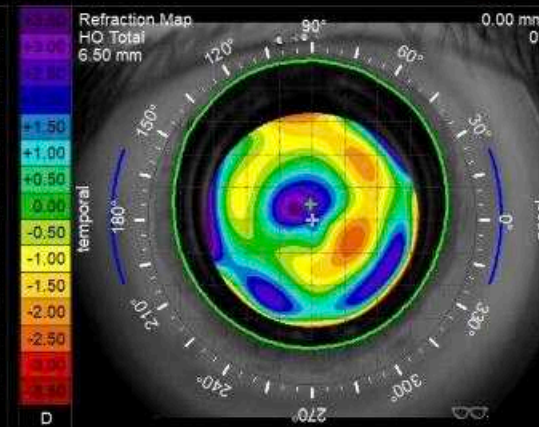
Uncompromised vision

- Spherical
- Toric
- HOA
- Front surface asphericity
- Multifocal
- Any combination





Root Mean Square		HO Total 6.50 mm		
2	n m	Name	μ	
1	0.0	Defocus	0.000	
2	0.0	Astigmatism	0.000	
3	0.0	Astigmatism	0.000	
4	0.0	Astigmatism	0.000	
5	0.0	Astigmatism	0.000	
6	3	Trefoil	0.215	
7	3	Coma	0.510	
8	3	Coma	0.190	
9	3	Trefoil	0.170	
10	4	Tetrafoil	0.121	
11	4	Astigmatism	0.027	
12	4	Spherical	0.248	
13	4	Astigmatism	0.248	
14	4	Tetrafoil	0.164	
15	5	Pentafoil	0.129	
16	5	Trefoil	0.078	
17	5	Coma	0.060	
18	5	Coma	0.070	
19	5	Trefoil	0.058	
20	5	Pentafoil	0.070	
21	6	Hexafoil	0.098	
22	6	Tetrafoil	0.041	
23	6	Astigmatism	0.049	
24	6	Spherical	0.136	
25	6	Astigmatism	0.097	
26	6	Tetrafoil	0.097	
27	6	Hexafoil	0.150	



02-07-2019 17:15:20

OD

Clinic
Physician
Operator

Limbus / Pupil / Scan 11.85 / 8.54 / 6.50 mm
Fixation Target Position +2.50 D

Tracey Refraction +0.87 D -0.25 D x 109°
+1.98 D -0.39 D x 133° @ D ≤ 2.50 mm / D = 12.00 mm
+0.93 D -0.25 D x 109° @ D ≤ 4.00 mm / D = 12.00 mm
@ D ≤ 8.00 mm / D = 12.00 mm
+1.04 D -0.30 D x 147° @ D ≤ 6.50 mm / D = 12.00 mm

Root Mean Square @ D ≤ 6.50 mm

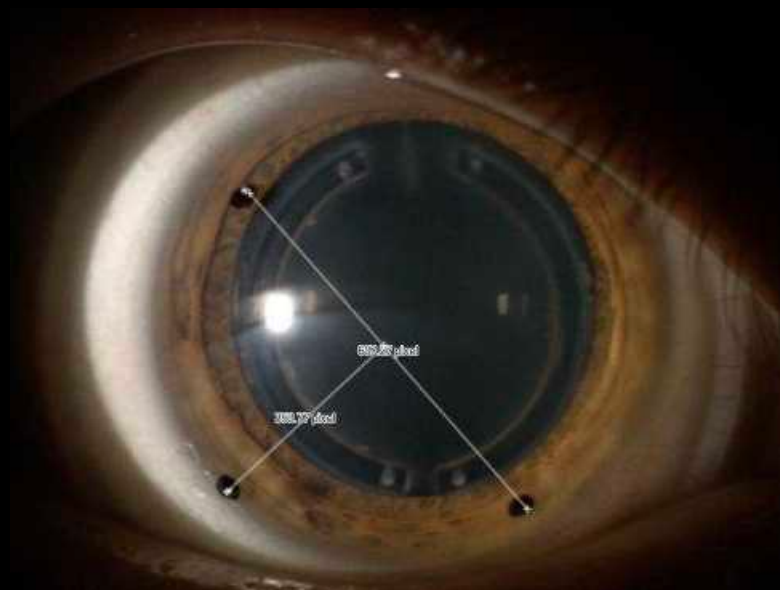
Total	1.850 μ
LO Total	1.404 μ
Defocus	-1.365 μ
Astigmatism	0.329 μ x 57°
HO Total	1.204 μ
Coma	0.921 μ x 96°
Spherical	-0.248 μ
Secondary Astigmatism	0.247 μ x 87°
Trefoil	0.275 μ x 43°

Pupil size is larger than 6.00 mm.

Aligned on IR dots.

Angle Kappa Distance: 0.462 mm @ 97°

Angle Alpha Distance: 0.182 mm @ 156°



INTERNAL - RMS Total. no Defocus 3.00 mm

z	Name	μ	1
3	Astigmatism	0.122	
5	Astigmatism	0.120	
6	Trefoil	0.012	
7	Coma	0.009	
8	Coma	0.023	
9	Trefoil	0.002	
10	Tetrafoil	0.022	
11	Astigmatism	0.016	
12	Spherical	0.023	
13	Astigmatism	0.008	
14	Tetrafoil	0.024	



TOTAL EYE - RMS Total. no Defocus 3.00 mm

z	Name	μ	1
3	Astigmatism	0.148	
5	Astigmatism	0.062	
6	Trefoil	0.013	
7	Coma	0.009	
8	Coma	0.017	
9	Trefoil	0.017	
10	Tetrafoil	0.018	
11	Astigmatism	0.017	
12	Spherical	0.032	
13	Astigmatism	0.014	
14	Tetrafoil	0.025	



05-06-2019 16:28:04

OD

Pupil 5.72 mm / Scan 3.00 mm

Tracey Refraction

2.00 mm

5.00 mm

8.00 mm

3.00 mm

-1.50 D -0.75 D x 124°

-1.13 D -0.96 D x 130°

-1.48 D -0.73 D x 124°

HO Total @ D <= 3.00 mm

0.069 μ

Coma

0.019 μ x 27°

Spherical Aberration

+ 0.032 μ

Trefoil

0.022 μ x 12°

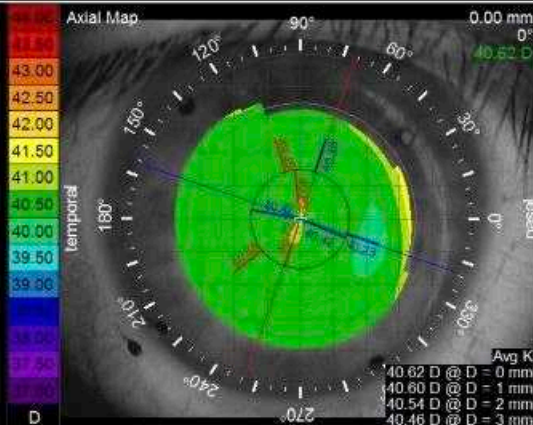
Angle Alpha D =

0.167 mm @ 148°

Averaged Exam

CORNEA - RMS Total. no Defocus 3.00 mm

z	Name	μ	1
3	Astigmatism	0.026	
5	Astigmatism	0.058	
6	Trefoil	0.001	
7	Coma	0.000	
8	Coma	0.006	
9	Trefoil	0.019	
10	Tetrafoil	0.004	
11	Astigmatism	0.001	
12	Spherical	0.009	
13	Astigmatism	0.006	
14	Tetrafoil	0.002	



05-06-2019 16:28:16 Manual

OD

Refractive Power @ D <= 3.00 mm

Steep

40.84 D x 83°

Flat

40.60 D x 183°

Astigmatism

0.24 D x 83°

Effective RP

40.73 D

Central Radius / Power

8.31 mm / 40.62 D

Corneal SphAb @ D = 6.00 mm

0.242 μ

I-S Axial Power @ D = 6.00 mm

0.01 D

with DigiForm

The "Perfect" Scleral Lens

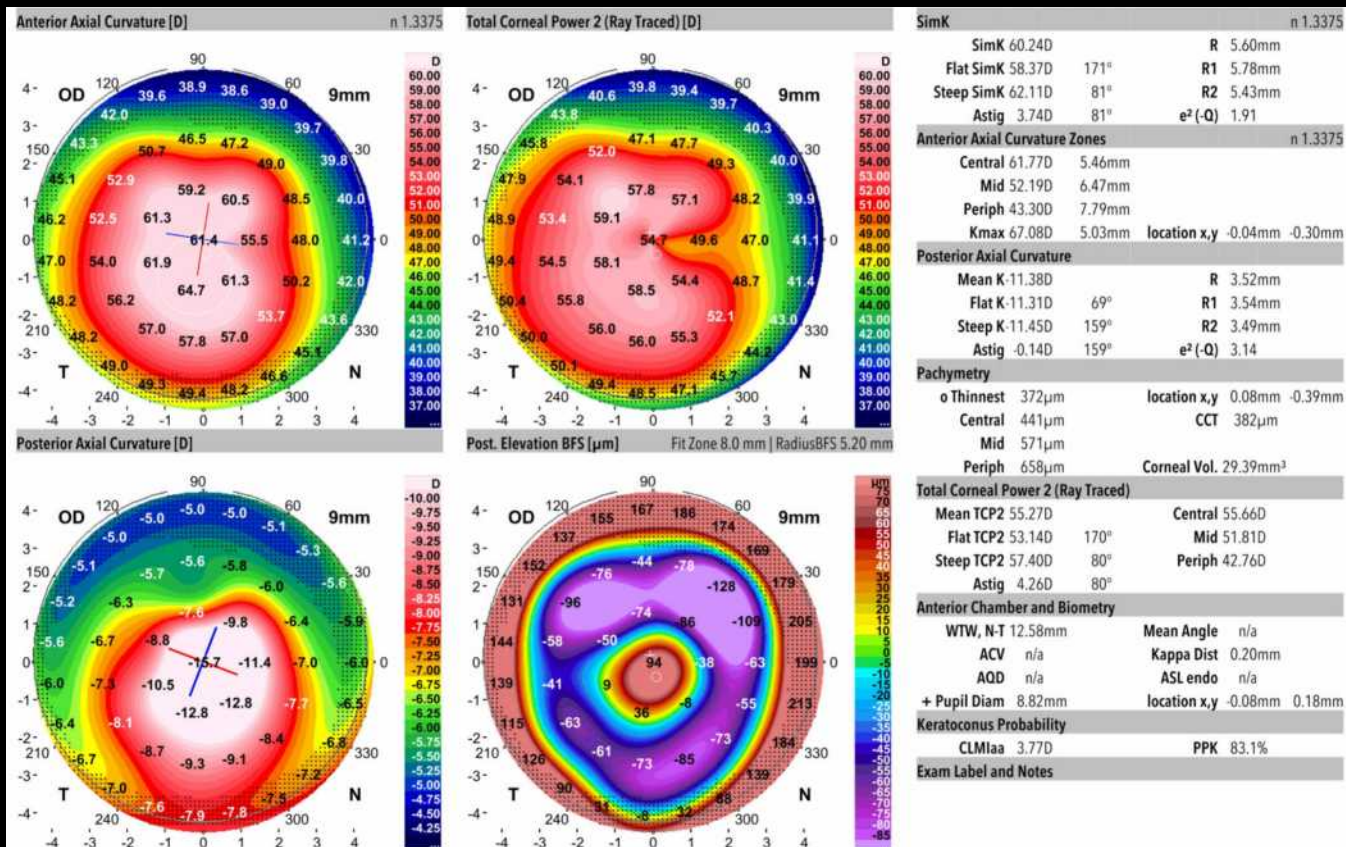
Corneal alignment





0.295 mm

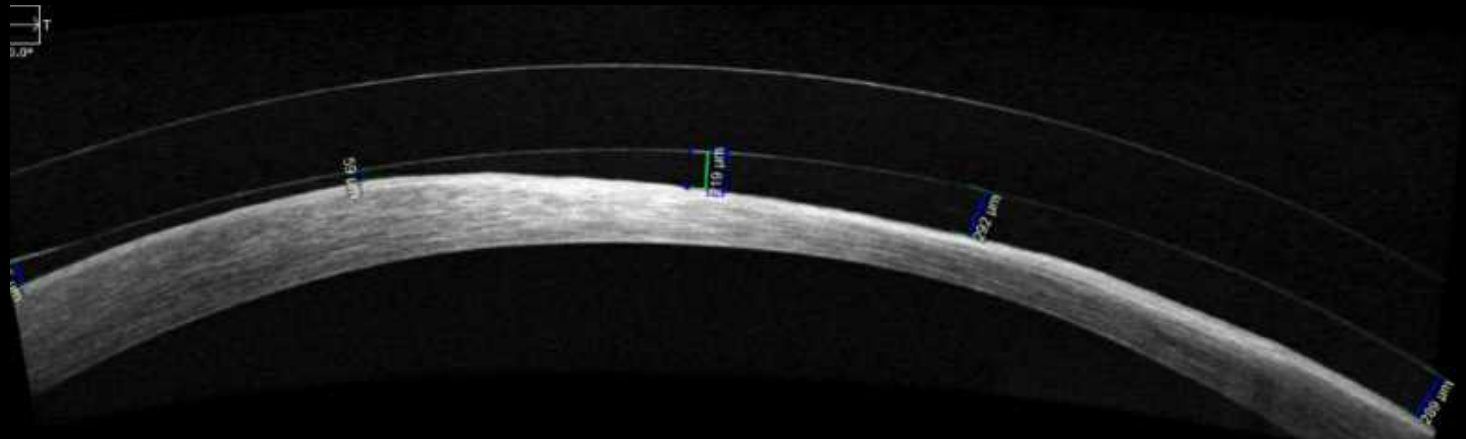
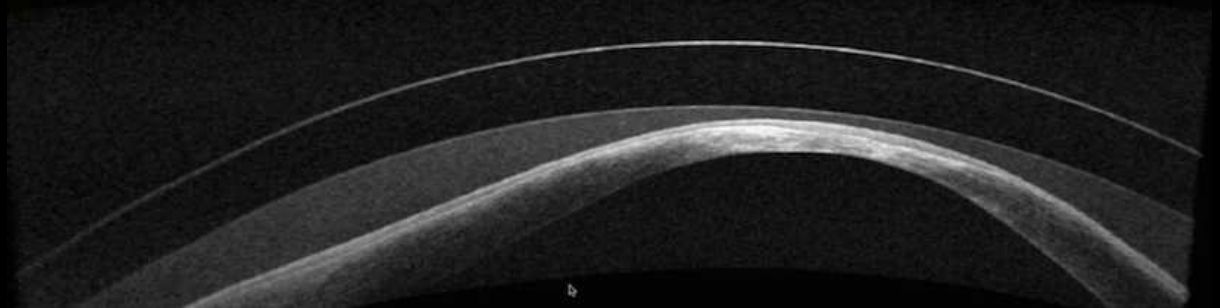
0.131 mm



The "Perfect" Scleral Lens

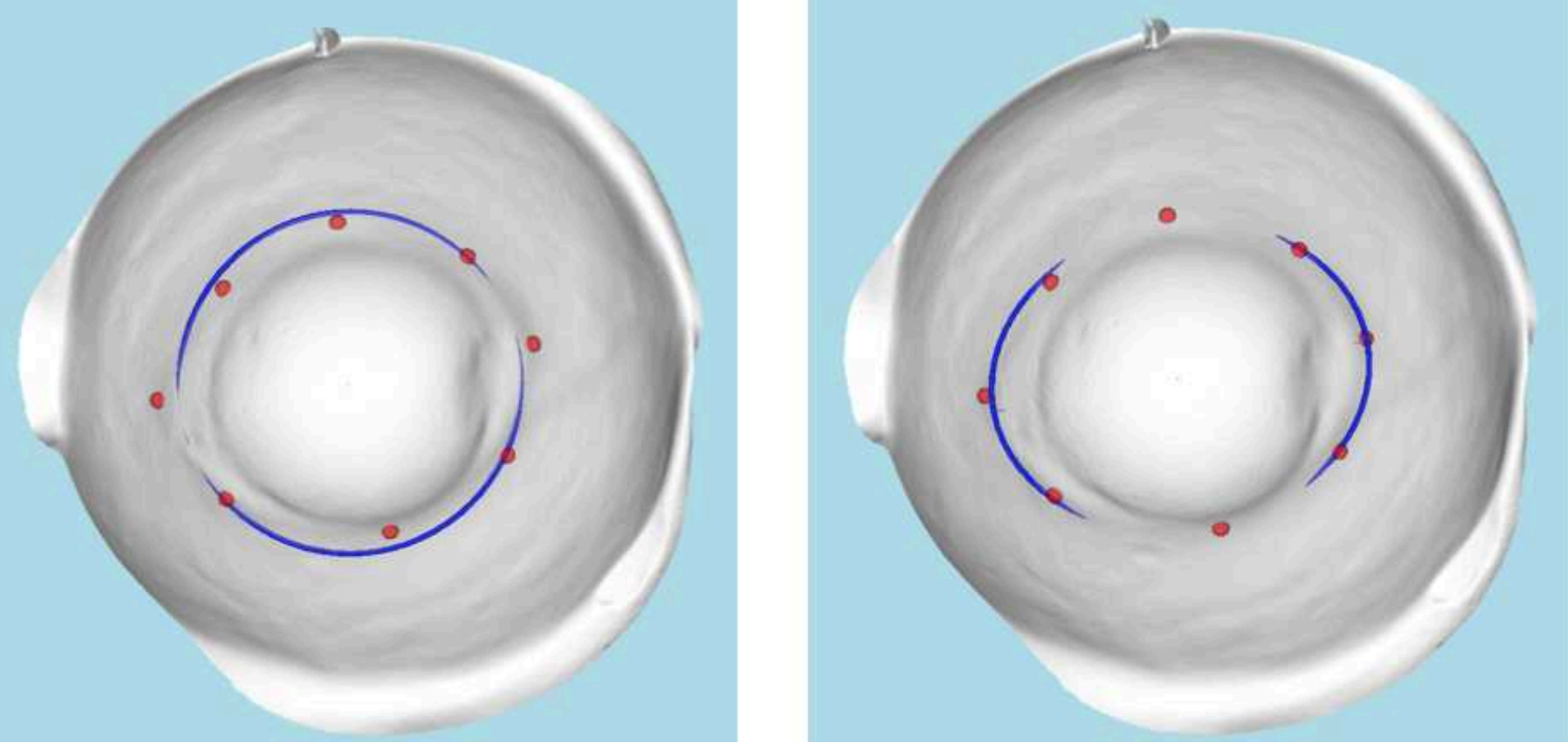
Corneal alignment

Prolate
Oblate
Custom

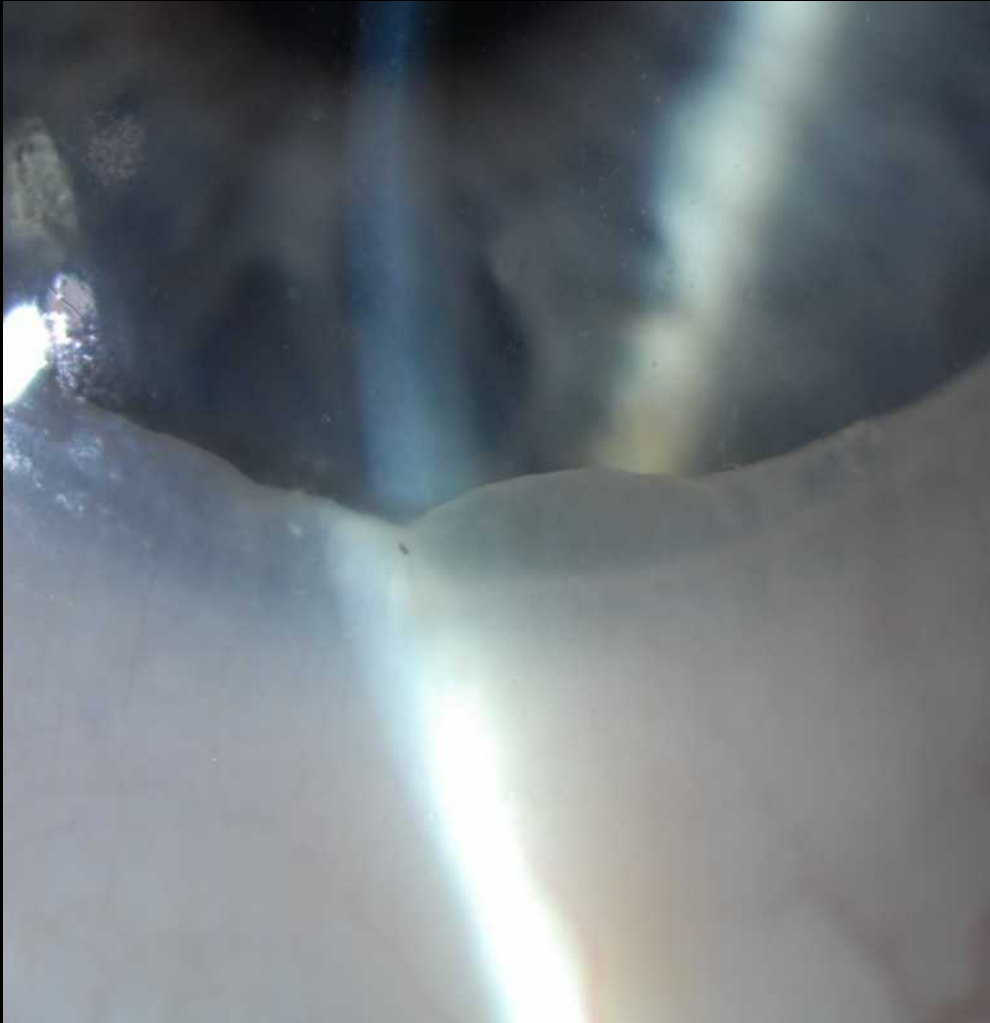


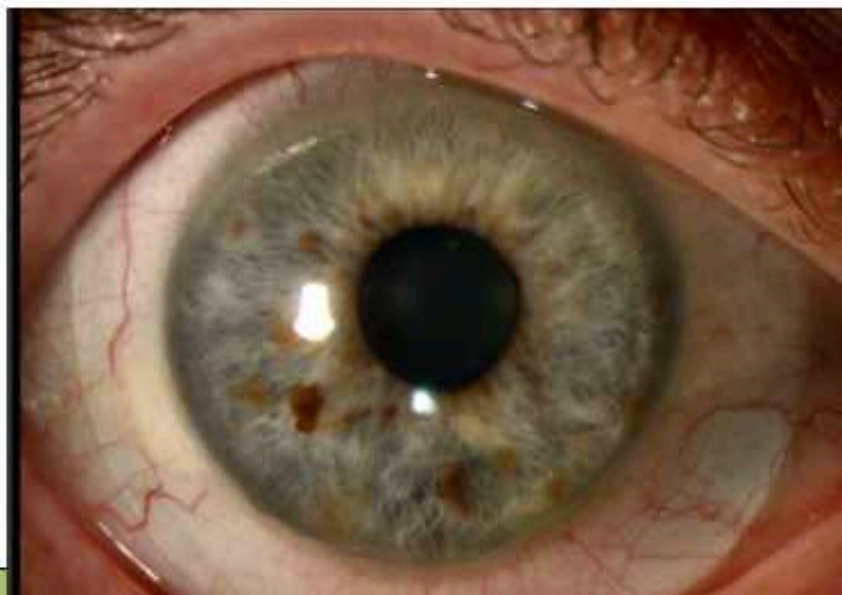
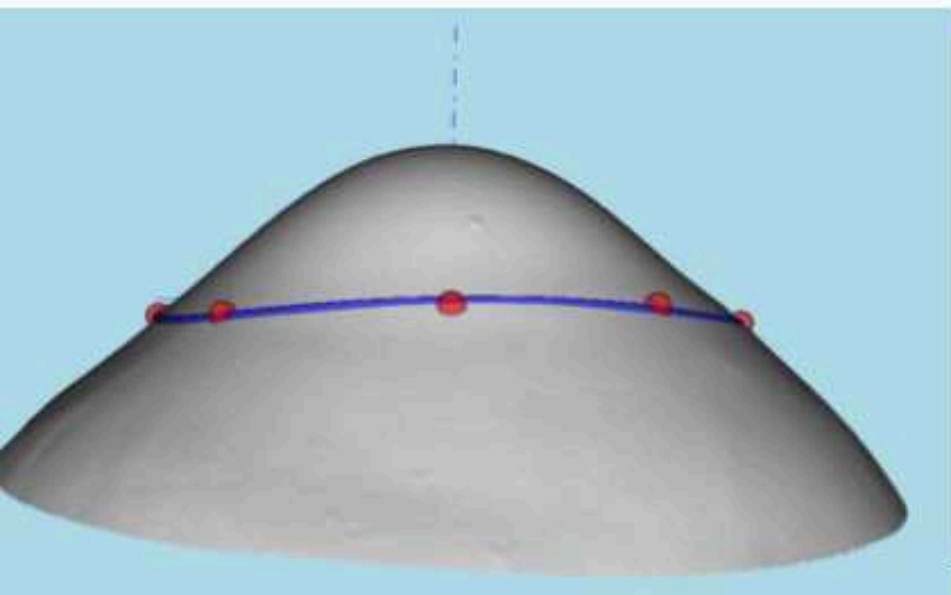
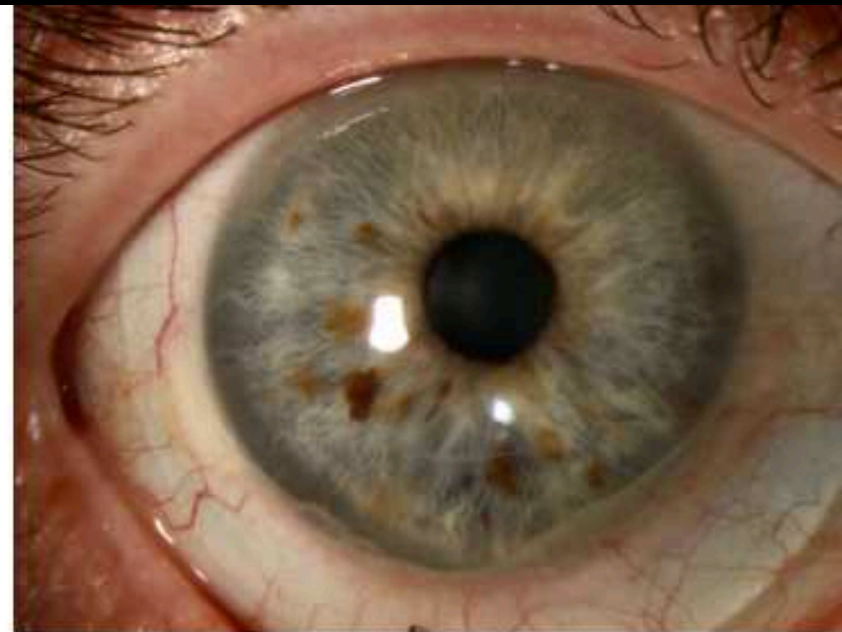
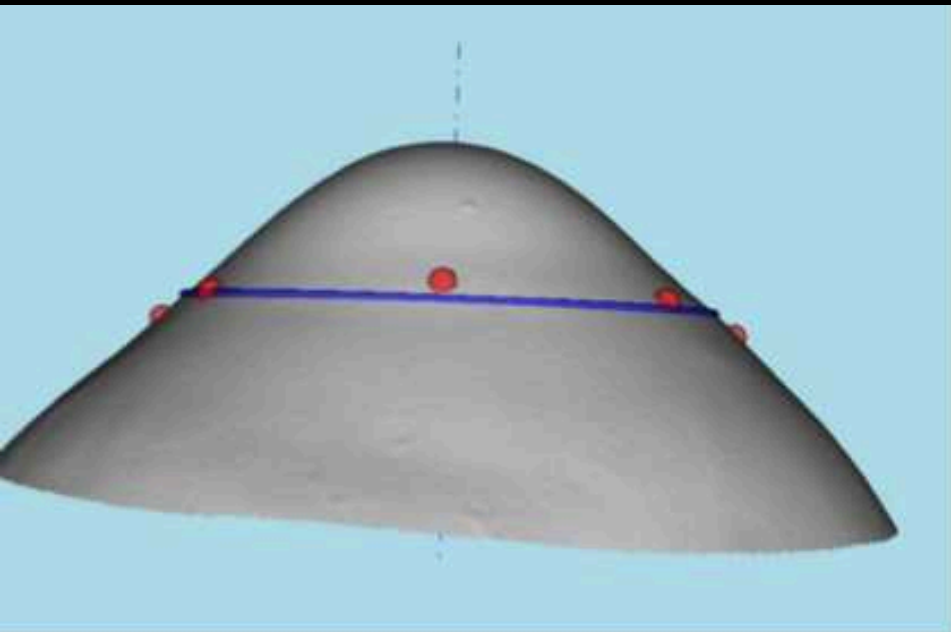
The "Perfect" Scleral Lens

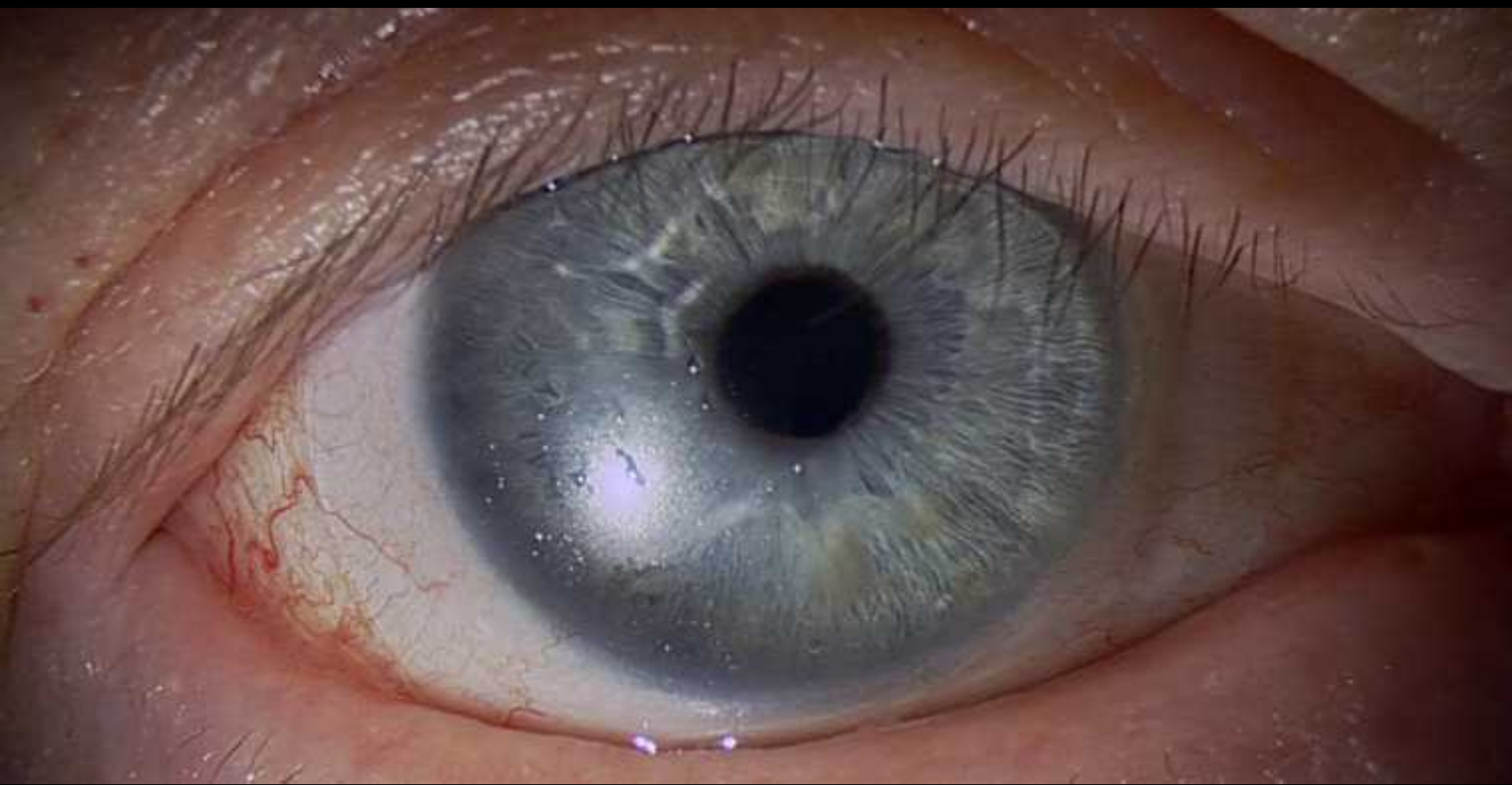
Limbal shape control



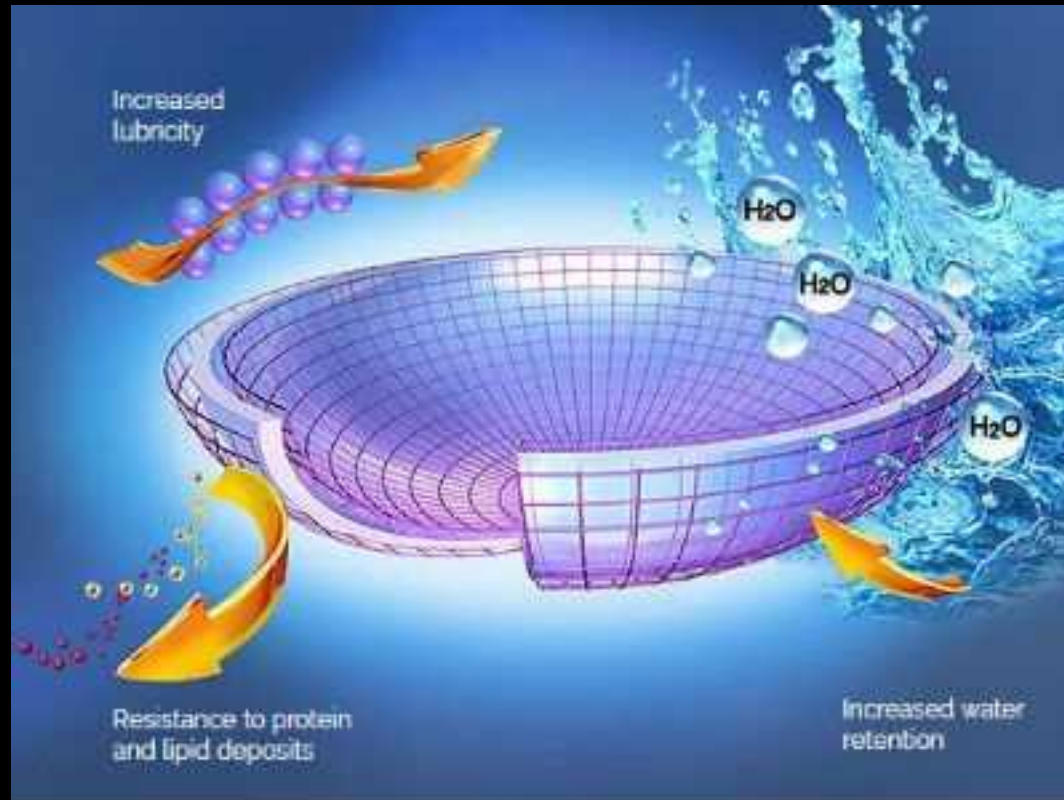
Conjunctivochalasis





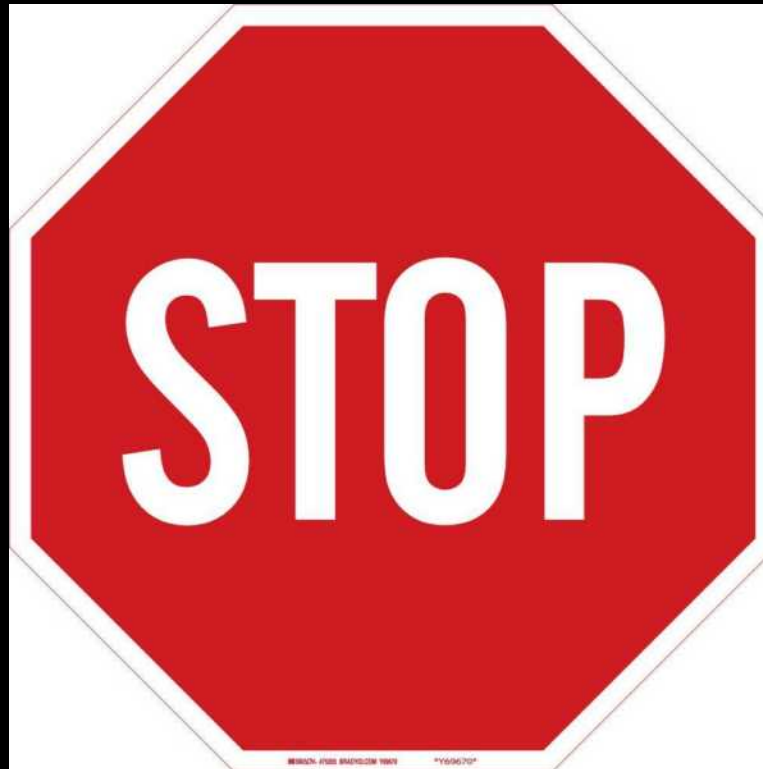


Hydra-PEG



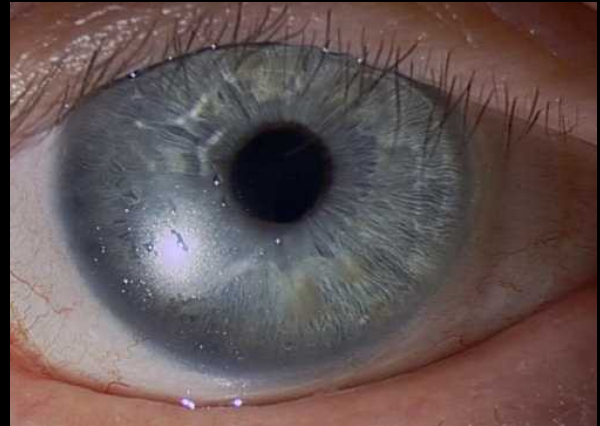
The "Perfect" Scleral Lens

Easily maintained



The "Perfect" Scleral Lens

Stays clean despite the environment



Environmental contamination of tear film

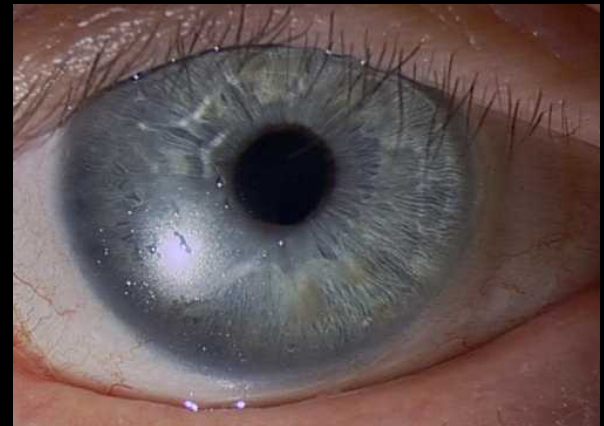
Use basic hand soaps

Avoid fragranced or moisturizing (most liquid) hand soaps



Environmental contamination of tear film

- Do not apply oil-based cosmetics or moisturizers to eyelids
- oils can spread along skin and contaminate the tear film



**Clean and
Disinfect**
applicators &
plungers with
isopropyl alcohol
wipes

