NEED MORE INFORMATION?

You can find out more from the websites listed below.

www.nkcf.org

This is the website of the North American National Keratoconus Foundation.

www.keratoconus.asn.au

This is the Keratoconus Australia website

VISITOR AND STAFF SAFETY

Every person working in or accessing the public health system including patients, their whanau, visitors and staff - has the right to personal safety.

Patients and visitors must not harass abuse, threaten or place any other person on CMDHB premises at risk of physical or psychological harm. This kind of behaviour will not be accepted from anyone under any circumstances.

SMOKEFREE POLICY

CMDHB is a smokefree environment. This means the buildings and grounds of all sites must be smokefree at all times. We encourage and support patients who want to stop or reduce their smoking. Please ask your doctor or nurse for guidance. Support is also available at Quitline Ph: 0800-778-778, website www.quitline.org.nz or Aukati Kai Paipa-Raukura Hauora O Tainui Ph: 09-270 3499.

HELP US TO HELP YOU

Please contact us immediately if any of the following happens:

- You think you are too ill to attend surgery/operation.
- You no longer require/want the surgery/operation.
- You change your address or contact phone number.

We may be able to offer your appointment to someone else off the waiting list if you no longer need it.

Call 09-276-0044 ext 2013 Fax 09-250-3840 Email customerservice@middlemore.co.nz visit our website at www.cmdhb.org.nz



For more health information visit www.healthpoint.co.nz

YOUR CODE OF RIGHTS

This means you can expect:

- Respect and Privacy
- Fair Treatment
- Dignity and Independence
- Proper Standards
- Effective Communication
- Information
- Your choice and Decisions
- Support
- Rights during teaching and research
- Your complaints taken seriously

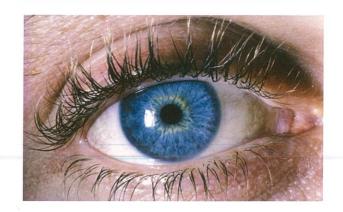


A Community Partnership

| Pamphlet Number | OPTH012 |
|------------------|---------------|
| Next Review Date | October 2015 |
| Department | Opthalmology |
| Approver | Clinical Head |

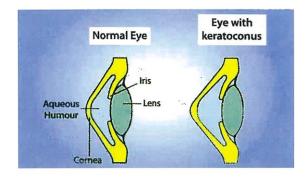


A PATIENT'S GUIDE TO **KERATOCONUS**



WHAT IS KERATOCONUS?

The cornea is the transparent dome-shaped window on the surface of the eye, overlying the coloured iris. Its smooth round surface is important for maintaining clear vision. In keratoconus the cornea becomes thin and distorted, eventually protruding forwards in a cone-like shape. It typically affects both eyes, but can often be quite asymmetric.



WHY DOES KERATOCONUS DEVELOP?

The cause of keratoconus are not very well understood. However there is a genetic tendency, so it can sometimes run in families. There is also an association with allergies and most people with keratoconus have itchy eyes and rub their eyes to some degree. Over several years the pressure on the eye from rubbing may contribute to distortion of the cornea.

WHO GETS KERATOCONUS?

Keratoconus occurs in young people, often starting in the teens, or even younger. It usually progresses slowly, and then stabilizes in the thirties or forties. It affects males and females in all racial groups, although in New Zealand it is more common in the Maori and Pacific Island populations.

WHAT ARE THE MAIN SYMPTOMS OF KERATOCONUS?

Keratoconus causes blurring and distortion of vision in one or both eyes. It often gets slowly worse over time, but occasionally causes quite a sudden deterioration in vision. People with keratoconus often have associated allergic conjunctivitis, which causes itchy eyes and eye rubbing.

WHAT TREATMENTS CAN HELP WITH KERATOCONUS?

There are two main aims in treating keratoconus; improving vision and preventing progression of the disease.

In the early stages of keratoconus, glasses or soft contact lenses may help correct blurred vision. As the cornea becomes more distorted only hard contact lenses are able to improve vision. About 15% of people with keratoconus progress to the stage where corneal transplant surgery is required. Traditionally full-thickness corneal transplant surgery has been required, but in some cases of keratoconus it is now possible to perform a partial transplant, which has possible advantages in long term transplant survival.

In recent years preventing progression of keratoconus has become a priority for people with mild or moderate keratoconus. Treating allergic eye disease and avoiding eye rubbing may be of some benefit.

CORNEAL COLLAGEN CROSS LINKING

(CXL) is a fairly new treatment designed to stabilise the disease. It uses a combination of ultraviolet light and vitamin B2 to stiffen the cornea, slowing or halting keratoconus progression. About 50% of people also have some improvement, with better vision and improved contact lens tolerance. CXL may reduce the need for corneal transplant surgery, by preventing keratoconus from progressing to more advanced disease.

