

Beyond LASIK



For Ivan Vasquez, it was about serving his country, joining the Home Land Security Border Patrol was his dream. But to be involved in this particular division of the military he was required to have at least 20/80 vision without correction.

For Trevor Nimmons, a double board certified physician, glasses were not only a barrier for true eye-to-eye empathy and communication; he was contact lens intolerant. This limited the activities he could perform in and on the water: no surfing, swimming, or snorkeling.

Seeing them now, it's hard to believe they were legally blind just a few months ago.

"I knew I had to do something, I had the gift of a good eye," said Vasquez. "I just didn't have the gift of good sight."

Vasquez and Nimmons wanted to join the million-plus Americans who have LASIK eye surgery each year but Ivan was so myopic, or near-sighted, his vision was worse than what LASIK can fix. Nimmons' eye anatomy also made LASIK a poor refractive option.

The best LASIK candidates have a prescription for correction of minus 1 to minus 8. Vasquez's eyes were minus 11. That is at the very limit of some available contact lens strengths.

Eye surgeon Dr. Rafael Trespalacios, or Dr. Tres as he is referred to by his patients, suggested the Implantable Contact Lens (ICL) a new generation of implantable lens. It is similar to a contact lens that is permanently inserted under the surface of the eyeball.



Dr. Rafael Trespalacios

Dr. Trespalacios has been recognized with an award for his work on the ICL by the American Society of Cataract and Refractive Surgery. He has been implanting ICL's shortly after they became FDA approved in 2005.

"A very small incision is made in the cornea, the clear, domed tissue at the front of the eye," explained Trespalacios. "Through that we inject the lens, which is made out of a new material known as collamer, it is biocompatible, soft, flexible and extremely thin; almost like cellophane. Then my job is to tuck that lens underneath the blue or brown iris so the lens sits behind the iris but in front of the natural lens (of the eye.)"

Patients are awake for the entire procedure, which takes about 6 minutes per eye. Five minutes later in recovery, they can see 20/20 or better. There is 99 percent patient satisfaction.

Because the ICL procedure does not change the shape of your eye or alter any structures within it, few, if any, aberrations (irregularities) are induced, and the quality of vision is better than with other procedures. The "high definition" quality of vision produced makes ICL the advanced vision correction procedure of choice for patients who need and expect high quality results. The U.S. military has embraced the ICL because of the visual clarity it achieves.

"In our practice so far, all the patients that I have implanted this lens are very, very happy," Trespalacios said. "And so my own personal group of patients have 100 percent acceptance rate and really like it."

Vasquez said you can put him at the top of that list. "It's like living life in HD. I didn't know you could see the leaves. I didn't know you could see features on birds and know you could see so many stars. I didn't know the moon had an outline."

At about \$3,000 an eye, it is a bit more expensive than LASIK and like LASIK, insurance does not generally pay for the procedure.

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