

SERVICES

Cataract surgery
Multifocal lenses
Toric lenses

Refractive surgery with excimer laser

Myopia

Astigmatism

Retina and vitreous surgery

Retinal detachment
Macular hole
Epirretinal membrane

Retina is the most delicate eye tissue. It is formed by neurones that send the visual information to the brain through the optic nerve. Vitreous humour is a gelatinous and transparent substance that is located inside the eye globus. The alterations of both retina and vitreous are multiple and the symptoms are different but all of them are usually characterized by eyesight reduction to a greater or lesser extent.

The eyeground exploration is essential in order to appreciate the retinal state. It is done under mydriasis (dilatation of the pupil) and the only health professional who can do it is the ophthalmologist. Only ophthalmological check ups can guarantee ocular and retinal health. Retinal lesions are serious problems that may reduce eyesight permanently. The solutions of these problems may require medical, laser or surgical treatment depending on the cases.

Floaters (myodesopia) macular degeneration, retinal detachment, uveitis, etc. are some retinal and vitreous alterations.

Glaucoma surgery

Strabism surgery

Corneal surgery

There are structures - such as cornea, conjunctiva and the eyelids - on the front surface of the eye globus. Some different causes may alterate the normal functioning of some of them. This conditions a series of symptoms and even the reduction of visual acuity.

We have to pay special attention to the tear film since we know it has a determining factor in eyesight.

Some of the most usual diseases that affect the ocular surface are; keratitis, blepharitis, dry eye syndrome, cornea transplant (keratoplasty), etc.

Surgery of the lachrymal tract and eyelids

The diseases of the lachrymal tract have to be treated by the ophthalmologist. At our clinic, we can offer you solutions for the most usual problems, amongst them the tearing (Epiphora) and the chronic infection or dacryocystitis, commonly called 'quarrel'.

Medical and surgical treatments are applied according to the patient's specific case and needs.

Diagnosis tests and laser treatment

Yag laser

Argon laser

Excimer laser

OCT Optic Coherence Tomography (RETINAL SCANNER)

Campimetry

Corneal topography

Pachymetry

Retinographies

Biometry / Echographia

Endothelial microscopy

Contrast sensitivity test

Colour vision test

Angiography with fluorescein

Campimetry

This test is also known as Analysis of the Visual Field. This is an essential diagnosis test for glaucoma and neurological diseases. Retinal sensitivity for light stimuli are evaluated and enable to do daily survey of the evolution of these diseases.

Corneal topography

This test gives us different measures of the cornea as many measures of elevation as of radius, curvature and symmetry. Also, it gives us measures of thickness and depth of the structures of the front part of the eye globus.

It is one of the most basic tests in the preoperative study of the refractive surgery with excimer laser. Its alteration may be a cause of surgery contraindication.

Pachymetry

This is the measurement of corneal thickness. It is recommended in the preoperative and survey of corneal refractive surgery. It is also essential in the study of glaucoma and ocular hypertension. Nowadays we know for certain that this thickness plays an important role in the measurement of intraocular pressure.

Retinographies

They are digital photographs of the eyeground, these are filed and they allow us to compare the state of the retina and the optic nerve in the different periodical check ups.

Its use is fundamental in the survey of diseases such as diabetic retinopathy, macular degeneration and glaucoma.

Echographia / Biometry

It enables to find out about the state of the vitreous humour, retina and orbita. Also, it is used in order to determine the axile length (total) of the eye globus and this way to be able to calculate the intraocular lense that has to be impanted in the cataract operation. Therefore, it is essential in any preoperative study for cataract. Moreover when the state of the ocular structures prevents the eyeground visualisation, this test enables us to make a diagnosis even without seeing directly if there is a retinal problem.

Endothelial microscopy

The most internal corneal part consists of the endothelial cells. The analysis and evaluation of the number of cells and their morphology is essential in order to know the state of this coat. This test is usually carried out in the preoperative and survey of different surgeries such as; cataract, implants of lenses for strong myopia, etc. also in cases of endothelial alterations and check ups of corneal dystrophy.

Optic Coherence Tomography (OCT)

This test can be considered as a scanner of the retina and of the optic nerve. This is the most modern ophthalmologic test of diagnosis. It is used for the study and survey of the retinal coats, of their thickness and of macular state. Also, it shows us the state of the optic nerve's coats of nerve fibers.

It is used in studies of glaucoma and in many vitreoretinal diseases such as; diabetic macular edema, epiretinal membranes, macular holes, macular degeneration, inflammatory diseases.

Angiography with fluorescein

This is a specific diagnosis test for the retina and choroidea that enables us to evaluate the state of the small blood vessels of the internal part of the eye. It is basic in order to determine the treatment as well as to assess its response

This test requires the injection of a stain called sodic fluorescein in the vein in the forearm. After a few seconds, the entry of this stain through the eye's blood vessels (choroida and retina) is studied and photographed. For the angiography, the patient's pupil has to be dilatated with colirios before the test.

Some of the diseases that require this test are; diabetic retinopathy, macular degeneration, thrombosis, uveitis, etc.

Colour vision test

This is a test that enables us to find out if the patient has an anomaly in the colour vision or daltonism.

Contrast sensitivity test

This is a test that measures the eye capacity to distinguish the objects when there is little contrast between them. With another measuring test of visual acuity, it enables us to assess the patient's eyesight.

Laser

In our clinic we have 3 types of laser:

Laser Excimer

This is a laser we use to correct the defaults of the eye refraction, that is to say, to operate myopia, hypermyopia and astigmatism. This technique enables us to improve the patient's corneal profile.

Laser Neodimio-Yag

This is a surgical laser that enables us to operate without going to the operation room. This is a photodisruptive laser we use in the following operations:

Iridotomy

Capsulotomy

Trabeculoplasty and iridoplasty

Laser Argon / Diodo

It is photocoagulator with a determined wavelength. Its main applications are:

Laser in diabetic retinopathy

Laser in retinopathy caused by retinal thrombosis

Laser in retinal teasing

Laser in patients with macular edema

Cataract surgery

What is cataract?

Cataract is not a disease, it consists in the transparence loss of the crystalline, the eye natural lense.

In a physiological process throughout life, almost everyone over 60 suffers from this disease to a certain extent.

What symptoms does it cause?

Cataract causes a progressive reduction of eyesight. It may also cause glare, bad night vision and colour vision. Another sign is the frequent change of graduation or good eyesight close up.

What is the treatment?

The only solution for cataract is surgery. Cataract surgery.

This is a surgical operation that gives an exceptional result in the hands of experts and using the most advanced techniques.

It is carried out at the surgery, without admission, and the whole process lasts less than fifteen minutes. Anesthesia is administered only in drops, it does not require a shot or eye covering.

Through an incision of a little than 2 millimetres, the opacified crystalline is extracted and a lense that will enable the patient to recover vision completely.

Types of intraocular lenses. Each patient is studied previously in order to decide what kind of lenses is the most adequate.

Monofocal: enables to see at a distance

Multifocal: enables to see at a distance and close up

Toric: Corrects stigmatism (When is cataract surgery necessary?)

The decision has to be made by both patient and ophthalmologist. The best moment is when there is already a reduction of eyesight but not when the cataract is very advanced and the eyesight very weak as there might more complications-

Good eyesight improves the quality of life.